
Peter Csanyi, Rudolf Kucharčík

SLOVAKIA AND THE SLOVAK LOCAL GOVERNMENTS RESPONSE TO COVID-19 CHALLENGES

The aim of this paper is to identify critical factors in success/failure of Slovak public policies focusing on fighting the spread of COVID-19 pandemic. It uses a review of secondary research and data available in regulations of the national government, data published by governmental bodies, international statistics, and media articles published before March 31, 2021. The results suggest that the timing of public policy responses and success in motivating compliance may be critical factors in preventing the pandemic. The current COVID-19 research focuses on epidemiologic and macro-level socioeconomic aspects and only marginally covers the impact on local budgets. Our intention is to enrich the existing limited debate on this dimension by discussing and assessing what has already happened and what may happen in local public finance in Slovakia, and to analyse the 'effectiveness' of local governments' response to COVID-19. Besides, some measures might have had a disproportionate negative impact on human rights, which we review by focusing on the Roma community. Although the Slovak state authorities and local governments have taken a range of measures with the aim to prevent the spread of COVID, including its spread in marginalised Roma communities, their response in this regard has raised serious concerns. A better coordinated approach at all levels manifested in improved communication between national government, regions, and municipalities is vital to implement measures taken against the spread of the virus.

Key words: local government; COVID-19; Slovakia; measures; impact; budget, human rights

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Peter Csanyi – PhD, Assistant Professor, Faculty of International Relations, University of Economics in Bratislava, Slovakia. Email: peter.csanyi@euba.sk

Rudolf Kucharčík – PhD, Assoc. Prof., Dean of Faculty of International Relations, University of Economics in Bratislava, Slovakia. Email: rudolf.kucharcik@euba.sk

The COVID-19 virus had a significant impact on every aspect of our lives in Slovakia and globally. Officially declared as a pandemic by the World Health Organization in January 2020, everyone's primary concern was to minimize the spread of the virus, mitigate its effects, and protect those most vulnerable in society. Businesses and organizations had a role to play and a responsibility to their own people and wider society. They also had to confront a wide range of practical, and commercial and legal challenges associated with the spread of the virus.

Initially, according to the data of the Ministry of Health of the Slovak Republic (2020a), Slovakia seemed to be handling the pandemic comparatively well. After a strict lockdown in spring 2020, the economy and public life in the country soon returned to normal. In the fall, as the 'second' wave loomed, Prime Minister Igor Matovič decided on regular nationwide antigen testing to avoid another nationwide lockdown against the advice of many experts. The tests were meant to show whether there were hotspots, and if so, where they occurred. The strategy failed as it did not help to identify the hotspots and the number of COVID-19 patients in hospitals increased (Koronavírus Slovensko 2020a). Despite this, the government continued with the testing, which meant a huge burden for local governments.

Meanwhile, the coronavirus crisis in Slovakia spiralled out of control at the beginning of 2021. Health officials complained of poor cooperation with authorities and pointed out that sometimes no systematic infection data was available. It also appeared that the compliance regime with general restrictions or quarantine measures for the infected persons was hardly monitored.

For more than a year (when?), Slovakia was ruled by a coalition that pledged to be a government for the people, and to create justice and transparency. It was the main goal of a coalition headed by Igor Matovič, an anti-corruption and political activist, who came to power in Slovakia in 20. The coalition faced quite a challenge, namely dismantling former Prime Minister Robert Fico's corrupt, mafia-style system with its close ties between politics and organized crime (a footnote?). Besides, the coalition also took office in the middle of the first coronavirus lockdown. Nevertheless, its chaotic strategies during the COVID-19 pandemic pushed the country into a healthcare emergency (Verseck 2021). As far as the coronavirus crisis is concerned, it was downright disastrous: In early 2021, Slovakia experienced one of the worst health emergencies in Europe, largely due to the Matovič government's chaotic management, such as the restrictions, which were sometimes changing day by day or hour by hour, a few nationwide antigen tests, lockdowns with several confusing exceptions, etc.

This paper uses a comprehensive review of secondary data from the resolutions and regulations of national governments, data published by governmental bodies, international statistics and media articles published before March 31, 2021 (e.g. data from WHO, CREC, CERM, IOM, OECD, Ministry of Health of the Slovak Republic, Statistical Office of the Slovak Republic, etc.). The main limitation of this paper is the fact that the official data evaluating the impact of the COVID-19

crisis on local finances were not available at the time of writing of this article. The authors checked existing partial information and collected additional available data in order to cope with this limitation. The article addresses the following critical research questions: What were the most serious impacts of the COVID-19 crisis on local governments and their expenditures in Slovakia? Did the local governments' measures have any negative impact on human rights in Slovakia?

Slovakia fights COVID-19 and the impact of the pandemic on the country

Slovakia is a country of approximately 5.45 million inhabitants with a population density of 111 people/km². Local self-governments are extremely fragmented because Slovakia has almost 3,000 municipalities. In terms of the epidemiologic aspects of the COVID-19 pandemic, the country was in a relatively positive situation according to the officially published data. In particular, Slovakia was doing very well and belonged to the most successful European countries in the fight against the COVID-19 spread (WHO 2020). As of June 26, 2020, 206,362 tests were performed in Slovakia; 1,643 cases, 1,455 recovered patients, and 28 deaths were registered (Koronavírus a Slovensko 2020b). These figures were comparatively good from an international perspective. Available information indicated that no government in the world was fully prepared to cope with the COVID-19 pandemic. However, when the risks became evident, the central government rather swiftly applied various restrictive measures. The first measures were adopted even before the first COVID-19 case was registered (the first case was detected on March 6 in Slovakia). The country had activated its emergency structures (the National Security Councils – BRS) late in February. On February 27, 2020, the BRS transferred the crisis management to the Crisis Crew. Strict anti-pandemic measures were launched in early March and almost immediately countered the first COVID-19 cases.

According to the available data, in terms of the capacity to prevent the COVID-19 spread in the first phase (percentage of deadly outcomes), Slovakia was among the most successful countries in Europe in spring 2020 (Ministry of Health 2020a). The answer to the question why Slovakia was so successful in fighting the first phase of the spread of COVID-19 is probably that Central and Eastern European countries featured a number of commonalities in terms of their substantive policy responses to the unfolding pandemic and contributing to their relative success in handling the 'First wave' of the pandemic. However, we must mention two more factors regarding Slovakia. Firstly, the very fast and comprehensive anti-pandemic measures realized by the government and, secondly, the citizen's compliance with the measures.

As it was mentioned, when the risks became evident, the Slovak government delivered swift and strict responses that had started in Slovakia even before the first case was detected. Already on February 14, 2020, a system was organized at the Slovak borders to identify people who were infected and the health status border

controls started. In early March, schools and universities were closed on a voluntary basis, without a central order. Several other critical measures were implemented very fast, such as restriction of visits in hospitals, social care establishments and prisons, prohibiting any mass activities, closing borders, closing schools, closing shops and services (with exceptions), a special regime in hospitals, limiting non-emergency treatments, compulsory wearing of protective face masks in all public spaces, limiting any kind of mobility, etc. People returning from abroad were requested to stay at home for a quarantine (in state establishments after April 6, 2020). The country applied limited regional lockdowns. As indicated, the speed and scale of measures was supported by the fact that Slovak citizens behaved very responsibly (Ministry of Health 2020b). The slogan 'Stay Home' was promoted and accepted, and face masks were used regularly. The Slovak government's measures against COVID-19 during the 'First wave' produced almost perfect results from the epidemiologic point of view. However, this success came at the cost of a drastic impact of anti-epidemic measures on the national economy. Slovakia tried to implement several measures to limit the negative impact of the pandemic on the national economy and on social welfare, but in fact only an insufficient amount of state subsidies was used. Besides, the anti-pandemic measures were not coordinated with Slovakia's neighbours and other EU member states (Nemec, Spacek 2020).

Probably, one of the most important measures which brought success during the first wave in spring 2020, was publicly informing citizens about the pandemic and all its aspects. Besides, the fact that the Prime Minister Igor Matovič and all other government officials used protective masks when staying in public spaces motivated compliance, as well as the establishment of special COVID-19 telephone lines for first contact. However, the Prime Minister also caused some troubles and brought a kind of citizens' frustration thanks to his frequent appearance in the media. The information provided by the government was frequently chaotic and also did not propose using penalty code sanctions to punish non-compliance. The lack of active cooperation with NGOs, civil society, and self-governments in explaining measures, uniting society, and encouraging compliance with the requirements caused more negative sentiments and reluctance to comply in Slovak society (Chubarova et al. 2020).

The critical negative specifics of Slovakia relate to the second phase of COVID-19 spread ('the second wave') from summer 2020 onwards. Despite the experience with effectively managing the first wave, the government argued by the end of September that everything was under control and the newly growing number of COVID-19 cases (from mid-July) was fully manageable. Before early autumn 2020, Slovakia functioned in relaxed regimes introduced in early summer when COVID-19 almost disappeared. Only when the numbers of infected achieved record numbers, the Prime Minister publicly announced the return to strict anti-pandemic measures, but in a different way. He made the accusation that people's limited discipline was the core source of problems. Due to the restrictive measures starting too late people were not ready to comply. The second

wave was not taken under control, and the numbers of infected and resulting deaths were several times higher compared to spring. In Slovakia, the number of newly infected in late October per day was higher compared to the total numbers for the first wave and it was only the beginning. In February 2021, Slovakia became the world-wide leading country in COVID-19 deaths per day per 100 000 inhabitants (Nemec et al. 2020; Ministry of Health 2021).

This negative change could be the fact that the political support for harsh measures or even the lockdown was much weaker in autumn 2020 compared to spring 2020. Besides, fewer people believed that the threat was real and they were not ready to sacrifice their rights because of COVID-19 any longer. There was something akin to general pandemic fatigue. Another critical element could be the administrative resource capacity. In spring 2020, the country mobilised its administrative capacities over the maximum level. Slovakia, which was occasionally evaluated as one of the least good administrative performers in the European Union (Palaric et al. 2017), managed tasks connected with pandemic spread in spring well. However, the country's capacity to deal with economic and social consequences turned out to be soon exhausted: the Slovak socio-economic reactions turned out to be quite limited, especially from the point of the total sum and correct allocation of resources pumped into the national economy.

A very important question is to what extent the citizens are ready to give up their civil rights during a crisis, such as the right for health care, the right to government services, the right to use public facilities, freedom of movement, equal social opportunities, and equal protection under the law. This question includes time dimension, the scale dimension, personal differences and countries' differences (Hale et al. 2020). Resistance against harsh measures, especially if unexplained or seemingly arbitrary, was becoming increasingly more visible. In some cases, court decisions supported resistance by referring to governmental measures adopted in relation to COVID-19 as illegal (Nemec et al. 2020). A closely connected issue is how to promote compliance with social distancing rules. Many researchers dealing with COVID-19 argue that compliance with the set of anti-pandemic measures by citizens is a critical success factor (for the control of the spread of infection). Slovakia was really successful in spring, but not in autumn or winter 2020 (Nemec et al. 2020).

Regarding the most significant impact of measures taken in response to the COVID-19 outbreak on the rule of law in the country, the Government of the Slovak Republic proclaimed the emergency state on March 16, 2020, and it was extended several times. In respect to the COVID-19 pandemic, the Government of the Slovak Republic also adopted several restrictive measures. While the majority of them are fully acceptable as they contribute to human rights protection, there are also measures that are extremely concerning.

Firstly, the right to health in the context of the right to provision of health care was restricted contrary to the Constitution of the Slovak Republic. According to the Constitution of the Slovak Republic, everyone has the right to

protection of health. The citizens have the right to free health care and medical equipment for disabilities since medical insurance under the terms to be laid down by a law. According to the Constitutional Act 227/2002 Coll. on the Security of the State in Time of War, State of War, State of Emergency, as amended does not allow for the right to health to be restricted (Ministry of Defence 2021). In this regard, the Government of the Slovak Republic and the National Council of the Slovak Republic have not adopted any relevant laws and measures that would endanger the provision of healthcare. However, on multiple occasions, the country's political leadership urged the healthcare and outpatient facilities to prepare for the COVID-19 patients and to stop providing preventive care as well as carrying out any planned surgeries and treatments.

Besides, the Ministry of Health of the Slovak Republic instructed that urgent care should be provided, especially regarding accidents, oncology patients, and deliveries. Unfortunately, this initiative negatively impacted patients who do not require urgent care as neglecting preventive care can have serious health consequences. Moreover, patients requiring exchange of joints, especially hip joints, were restricted from having surgery. The majority of these patients lived in unbearable pain and their mobility was significantly reduced. However, the most questionable practice introduced by the health facilities in respect to the COVID-19 pandemic was complete termination of providing abortion services to women without a health risk (Ministry of Health 2020b).

Borders have always served as a symbolic political leverage in crises. Unsurprisingly, governments have swiftly imposed travel limitations with the view of mitigating the spread of contagion from abroad. As of August 2020, a total of 219 countries or territories (including Slovakia) issued many travel restrictions of various types (IOM 2020). At the beginning of the pandemic, the Slovak government was criticised for closing borders and travel limitations. It caused a really hard time for citizens who worked abroad and had to travel daily or weekly to work and back. However, later, the Slovak citizens accepted the temporary measures regarding the border control.

At the same time, we can say that although the challenges of the pandemic were huge and manifold, COVID-19 cannot be an excuse to close borders at the expense of the most basic rights of migrants and refugees. International human rights law draws a clear-cut dividing line between what states can do and what they must do to protect public health at their borders. While states enjoy a broad margin of appreciation in their response to COVID-19, a minimum standard of absolute guarantees applies in any circumstances, including in times of pandemic (Chetail 2020).

Last but not least, the measures adopted under the COVID-19 emergency posed issues regarding data protection and privacy. Laws allowing the Government of the Slovak Republic to access various data, including data on location sourced by mobile operators and telecommunication companies were passed by the National Council of the Slovak Republic. Thanks to this legal

regulation, the government and its bodies, including the Public Health Authority of the Slovak Republic have access to information about calls and messages sent among citizens and their location, so the citizens are monitored without their permission or knowledge (The Slovak National Centre 2020).

The global pandemic had an extremely adverse social and economic impact on Slovakia. Slovakia's early response to public health issues and disciplined response of the population are the factors that contributed to minimizing impact of the outbreak. The first economic measures that followed thereafter were focused on mitigation of economic consequences caused by the pandemic for companies and individuals. After the stabilization phase, the measures were aimed at restoring economic growth. These measures are backed by strengthening sustainability of public finances, both in short-term and long-term horizons, as it is the basis for economic stability, sustainable economic growth, and development. Despite the government's efforts to stabilize employment, the severe economic downturn was expected to reduce the number of jobs by 88,000 and increase the unemployment rate to nearly 8% in 2021 (Trading Economics 2021). The immediate and severe onset of negative economic effects at the start of the outbreak was associated with considerable uncertainty. However, the prolongation of the pandemic situation in the second half of 2021 substantially amplified the economic downturn.

The COVID-19 outbreak was also expected to uncover risks in public finances. In 2019, the general government deficit reached 1.4% of GDP, considerably above the balanced budget objective (Country Economy 2021). Moreover, the risks for 2020 were further increased by adopting new tax and social expansionary measures. The deficit in 2020 increased to 8.4% of GDP and the gross public debt exceeded the level of 60% GDP (Statistical Office 2021) because of the shortfall of tax revenues and the discretionary measures aimed at stabilization of the economy. Slovak fiscal policy takes into account the existing EU and national budgetary rules, aiming for stabilization of public debt. According to the latest forecast, the deficit of public finance would remain at 6% of GDP and the gross debt would further grow above 66% of GDP under a no-policy-change scenario in 2022. To comply with the existing EU fiscal rules, it was necessary to reduce the deficit to 4.9% of GDP in 2021, 3.7% in 2022 and 2.9% in 2023, which would lead to stabilization of gross debt at the level close to 60% of GDP (Ministry of Finance 2020). Has it happened? It's 2023.

The impact of COVID-19 on local governments and their response to the pandemic

Current local government system in Slovakia

The region of Central Europe is traditionally characterized by a large number of scattered municipalities with small populations (Csachova et al. 2011). Nowadays in Slovakia, the local self-governing level of public administration

has a dual model manifested in state public administration and self-government local administration. There are eight Higher Territorial Units and 2,926 Local Government Units (LGUs), i.e. cities, towns, and villages in Slovakia (European Committee 2020). The rules for the functioning of local self-government are regulated by Slovak legislation, particularly the Act on Municipalities. This law defines in more detail the basic units of territorial public administration.

According to the 2011 census of Slovakia, more than 50 percent of the population lives in 140 towns (Statistical Office 2020). At the same time, more than half of public expenditure (current and capital) was expended in 140 towns. Consequently, not only a substantial part of the population lives in 140 towns in Slovakia, but more than half of public resources also goes to them (Institute for Economic 2017).

An LGU is the basic unit of territorial public administration. Although LGUs are formally equal, in reality there are significant differences between them. Relevant laws define individual competences of local governments, while at the same time competences can be original and transferred (Fandel et al. 2019). The transferred competences for LGUs are in the fields of education, environmental protection or, for example, registry management and healthcare. Original competences include administration of local taxes and fees, ensuring local development, management of local property, administration of local roads, and public services. Currently, LGUs are financed by two sources: share of personal income tax (70% for LGUs and 30% for regional units) and their own local taxes and fees (100%, mostly waste disposal tax, property tax, accommodation (tourist) tax) (Sloboda et al. 2020).

Local government units' budget

The financing of local communities represents an important aspect of relations between the state and local communities, indicating the level of autonomy of local communities in relation to the state (Haček 2020). The Slovak municipalities are autonomous decision-makers, with their own budgets and bodies. They are equipped with the exclusive right to make decisions independently in all matters pertinent to the administration and the development of the municipality and its property, if a special law does not assign such acts to the state or to another legal body or natural person. In Slovakia, the full amount of personal income tax is redistributed by the state to regional self-governments and municipalities. The second most important municipal revenue is transfers. The share of the municipalities own revenues represents less than 25% of the municipal budgets (Placek et al. 2020).

As a consequence of COVID-19, the municipalities have to face problems on both the revenue and expenditure sides of their budgets. According to the existing data, the expenditure increase was less problematic because of the need to finance specific local anti-pandemic measures. According to the Slovak Association of Towns and Municipalities (ZMOS), the extra costs of activities carried out only at the beginning of pandemic (by mid-May 2020) was approximately 70 million EUR in Slovakia. The core problem was the fact that the municipal revenues significantly dropped in 2020 (ZMOS 2020). ZMOS also

estimated a drop in shared revenues. Besides, the municipalities had to cope with other important revenue drops.

The fiscal problems of municipalities are documented in ... (a reference?) To prevent major fiscal problems, the municipalities tried to lobby the central government for extra transfers to compensate for the lost revenues and increased costs due to COVID-19. The municipalities requested an extraordinary transfer from the central budget to reflect the decreased revenues from shared taxes, equal support to municipal companies as provided to private sector businesses, and extra revenues to finance delegated responsibilities in education. However, the central responses to the municipal fiscal needs were non-adequate (CEMR 2020). Only limited partial measures were enacted or promised by central authorities. The Slovak Government enacted few rather non-important measures, such as postponing payments of instalments to the National Building Fund or sending a few million Euros to cover extra educational expenses. In the meantime, Slovakia's final decision was that the municipalities had to borrow from the state to cover their fiscal problems. Taking into account the fact that resources were available, several Slovak experts were very surprised by the limited reaction of the Slovak government to the fiscal problems on the local level.

Given the uncertainty about their financial situations, the municipalities were expected to react by changing their 2020 budgets via cuts of some expenditures. Basically, the Slovak municipalities reacted very visibly. Most municipalities stopped providing sport and culture grants, and almost all the Slovak municipalities stopped the preparation and implementation of new investments. Unfortunately, in Slovakia, the current valid decision to this problem is just to provide cheap loans. Such governmental decisions would mean that the financial 'losses' of municipalities due to COVID-19 would be disproportionate, especially for very small municipalities and municipalities with city transport or other large municipal companies or municipalities located in attractive tourism areas, with a higher impact on the local level than on the central level. Concerning adequacy, the core problem is already apparent in the country. Without the necessary financial help from the central level, the capacity of local governments to address the full scale of their own responsibilities is in danger. Leaving local governments without specific support to cope with COVID-19 consequences would mean that in a short-term perspective, Slovak municipalities might not have enough financial resources commensurate with their responsibilities, and cuts in the 'least painful' areas will become unavoidable. This impact will be most visible in social services, culture, and sport areas (Nemec, Spacek 2020).

Local governments' measures and their negative impact on human rights

In the beginning of the mandate, the Government of the Slovak Republic set requirements for quarantining towns and certain areas of towns (e.g. streets, communities). However, there were mass testing and quarantining

Roma communities regardless of the habitat (whether living in their own settlement or integrated in cities) as they were proclaimed by the Prime Minister of the Slovak Republic as a huge danger (a reference?). More than 6 500 people in multiple locations were put to the quarantine due to 32 Roma tested positive for COVID-19. People who tested positive for COVID-19 were kept together with healthy people. It was reported that the Public Health Authority of the Slovak Republic refused to inform people who were tested about the results and other important information regarding the quarantine, their rights, and next steps. Serious issues concerning supplying people in quarantine with food, basic medicine and other essentials were reported (Centre for the Research 2020). The situation was even more concerning considering low-hygiene standards in Roma settlements, limited or no access to drinking water, lack of sanitation, and overcrowding of dwellings. Quarantining of towns or some areas of towns affected the entire country, but the government was very strict specifically with Roma communities due to their above-mentioned hygiene standards.

Slovak state authorities and local governments took a range of measures aimed to prevent the spread of COVID-19 in Slovak society, including its spread in marginalis ed Roma communities. However, their response in this regard raises serious concerns because some measures may have had a disproportionate negative impact on Roma living in marginalis ed communities. Starting from March 13, 2020, the Central Crisis Staff of Slovak Republic established by the Slovak Government ordered a two-week stay home quarantine for every person with permanent or temporary address in Slovakia and living in Slovakia for more than 90 days, who is returning from abroad (Public Health 2020). Implementation of this order in practice by local governments in respect to marginalis ed Roma communities posed risks of discrimination. Few local governments closed down local Roma settlements and banned all its inhabitants from leaving the settlement in reaction to the fact that some persons who returned from abroad had broken the Government order of compulsory two-week home quarantine (e. g. village Gelnica).

The Slovak Government publicly described the risks of spreading COVID-19 in marginalis ed communities as a public health security threat and resorted to imposing additional specific restrictive measures on persons living in these communities that do not concern the rest of the Slovak population. A targeted sample testing for COVID-19 was introduced in 33 selected Roma communities performed by army physicians and supervised by army soldiers. The goal of the given measures could be considered legitimate as they should protect public health. However, they appear to be clearly disproportionate since they may possibly restrict individuals' freedom of movement and possibly other liberties of thousands of Roma, in addition to being discriminatory as these measures hit only marginalis ed Roma communities. In addition, the way the Government through the media publicly communicated the risks of spreading COVID-19 in these communities could arguably strengthen already

widespread anti-Roma sentiments in Slovak society and potentially escalate local conflicts between the majority and the Roma minority.

Information reported in the media, and monitoring and public reactions of the non-governmental organisations (NGOs) as well as the Public Defender of Rights also indicated that the Government's response to the situation in marginalised Roma communities was insufficient. NGOs and activists called on the Slovak Government to focus on preventing COVID-19 from spreading in marginalised Roma communities and warned that the state of health of people in these communities is such that they could easily succumb to the pandemic (Hlaváčová 2020). The Public Defender of Rights in Slovakia also stressed the importance of protecting these communities who were living in areas with limited or no access to potable water.

The fact is that the Government recommended the local governments to provide unlimited access to drinking water to all persons living in marginalised communities to prevent the spread of infection. It was also important that the state authorities took responsibility and massively supported the local governments in introducing prompt measures that secured equal protection of the rights of marginalised Roma people (Heková 2020). Apart from health risks that disproportionately hit marginalised Roma people, this situation created a range of other inequalities to be addressed. It includes unequal access to information about the pandemic and how to protect themselves from it, or unequal access to technologies and the internet that additionally discriminate against marginalised Roma children in education as the elementary schools that were closed introduced online distance forms of home-schooling requiring PC and internet.

To sum it up, the government's approach was quite passive at the beginning. However, after a call for setting a clear plan for local governments how to proceed in case the infection would emerge in Roma communities, the adopted measures were proportionate and restricted human rights to the extent that was argued as necessary. The thing is that legal restrictions of human rights cannot be applied to one ethnic group if needed be, but only to the whole society without distinction (Durbáková 2020).

Conclusions

The COVID-19 pandemic had a profound effect on national, regional and local authorities in Europe, including Slovakia. Failing revenues undermined the capacity of regions to carry out public investments. Consequently, the COVID-19 pandemic reshaped priorities in development of regional policy, including local governments. Due to the crisis, the Slovak local government encountered a great loss of tax revenues, which impacted a regular functioning of the public services within their competence. This finding is in line with the OECD position and not surprising (OECD 2020).

In addition, regions (local governments) invested significant financial resources in preventive measures. Therefore, the governmental efforts of relieving

some of the financial pressure was very welcomed. At the same time, more effective cooperation between the central government and LGUs was needed because the most significant obstacle was the lack of a central crisis management and insufficient information flow. Although it was managed to negotiate a strengthened position of the self-government within the decision-making process at the national level and the self-governing regions were taken on board of discussions with the central government as a permanent member of the country's Pandemic Commission, certainly an even more coordinated approach at all levels was needed. Improved communication between national government, regions, and municipalities was vital to implement measures taken against the spread of the virus and the simplification of the procedure related to the European funds could significantly improve effective use of the European resources aimed at the post-COVID-19 recovery.

Regarding the response to the pandemic, probably a coordinated European approach to the coronavirus outbreak would be a solution. A coordination among all member states and among all levels of governance is needed when it comes to the major challenges such as the COVID-19 pandemic. A united European response in communication, common pharmaceutical, and vaccination approach coupled with a better understanding of the spread and effectiveness of the response has an added value compared to the national one.

We must say that the Slovak state authorities and local governments undertook a range of measures with an aim to prevent the spread of COVID-19 since the beginning of the pandemic. However, some measures specifically targeted marginalised Roma communities, had a disproportionate negative impact on their guaranteed human rights, and constituted discrimination. Moreover, the already adopted measures did not sufficiently respond to their specific vulnerable position and did not sufficiently address inequalities they faced with regard to the crisis situation.

References

Centre for the Research of Ethnicity and Culture (2020) *Coronavirus COVID-19 Outbreak in the EU Fundamental Rights Implications*. European Union Agency for Fundamental Rights. Available at: https://fra.europa.eu/sites/default/files/fra_uploads/slovakia-report-covid-19-april-2020_en.pdf (accessed 28 March 2021).

Chetail V. (2020) Crisis without Borders: What Does International Law Say about Border Closure in the Context of COVID-19? *Frontiers in Political Science*, (2): 606307.

Chubarova T., Maly I., Nemeč J. (2020) Public Policy Responses to the Spread of COVID-19 as a Potential Factor Determining Health Results: A Comparative Study of the Czech Republic, the Russian Federation, and the Slovak Republic. *Central European Journal of Public Policy*, 14 (2): 60–70.

CEMR (2020) *CEMR Analysis: COVID-19's Impact on Local and Regional Finances*. CEMR, Brussels. Available at: https://ccre.org/img/uploads/piecesjointe/filename/200629_Analysis_survey_COVID_local_finances_EN.pdf (accessed 29 March 2021).

Country Economy (2021) *Slovakia Government Budget Deficit*. Available at: <https://trading-economics.com/slovakia/unemployment-rate> (accessed 24 March 2021).

Csachová S., Nestorová-Dická J. (2011) Territorial Structure of Local Government in the Slovak Republic, the Czech Republic and the Hungarian Republic – a Comparative View. *Geographical Journal*, 63 (3): 209–225.

Durbáková V. (2020) *Response of the Slovak State Authorities and Local Governments to the Spread of COVID-19 and Its Consequences on Roma Living in Marginalised Communities*. Brussels: EC.

European Committee of the Regions (2020) *Division of Powers. Slovakia Policies Area*. Available at: <https://portal.cor.europa.eu/divisionpowers/Pages/Slovakia.aspx> (accessed 30 March 2021).

Fandel P., Marišová E., Malatínek T., Lichnerová I. (2019) Decentralization Policies in Public Administration in Slovakia and the Czech Republic, and Their Impact on Building Offices' Scale Efficiency. *Administrative Sciences*, 9 (4): 89.

Haček M. (2020) Financial Autonomy of the Slovenian Local Government. *Journal of Comparative Politics*, 13 (2): 96.

Hale T., Webster S., Petherick A., Phillips T., Kira B. (2020) *COVID-19 Government Response Tracker*. Oxford: Blavatnik School of Government.

Heková T. (2020) *Slovak NGOs Demand Crisis Plan from Government to Prevent COVID-19 Pandemic in Romani Communities, Ombudswoman Supports Them*. Available at: <http://www.romea.cz/en/news/world/slovak-ngos-demand-crisis-plan-from-govt-to-prevent-covid-19-pandemic-in-romani-communities-ombudswoman-supports-them> (accessed 9 April 2021).

Hlaváčová V. (2020) *Coronavirus Pandemic Can Make Conditions in the Romani Settlements of Slovakia Deadly, Protective Gear Slow to Reach Those Who Need It*. Available at: <http://www.romea.cz/en/news/world/coronavirus-pandemic-can-make-conditions-in-the-romani-settlements-of-slovakia-deadly-protective-gear-slow-to-reach-those> (accessed 10 April 2021).

Institute for Economic and Social Reforms – INEKO (2017) *Hospodárenie miest, obcí a VÚC*. Available at: http://www.hospodarenieobci.sk/metodika/#rok_2017 (accessed 2 April 2021).

IOM (2020) *Global Mobility Restriction Overview*. Available at: <https://migration.iom.int/reports/covid-19-travel-restrictions-output-%E2%80%9424-august-2020?close=true&covid-page=1> (accessed 19 March 2021).

Koronavírus a Slovensko (2020a) Daily Statistics. Available at: korona.gov.sk (accessed 10 December 2020).

Koronavírus a Slovensko (2020b) *Daily Statistics*. Available at: korona.gov.sk (accessed 26 June 2020).

Ministry of Defence of the Slovak Republic (2021) *Constitutional Act No. 227/2002 Coll. on State Security at the Time of War, State of War, State of Emergency, and State of Crisis*. Available at: <https://www.mosr.sk/acts-under-the-competence-of-the-ministry-of-defence-of-the-slovak-republic/> (accessed 25 March 2021).

Ministry of Finance of the Slovak Republic (2020) *Stability Programme of the Slovak Republic for 2020 to 2023*. Available at: <https://www.mfsr.sk/en/finance/institute-financial-policy/strategic-documents/stability-programme/> (accessed 25 March 2021).

Ministry of Health of the Slovak Republic (2020a) *COVID-19 Report*. Available at: <https://covid-19.nczisk.sk/en> (accessed 20 March 2021).

Ministry of Health of the Slovak Republic (2020b) *Opatrenia v súvislosti so šíriacim sa ochorením COVID-19*. Available at: <https://www.health.gov.sk/Clanok?covid-19-24-3-2020-opatrenia> (accessed 27 March 2021).

Nemec J., Drechsler W., Hajnal Gy. (2020) Public Policy during COVID-19: Challenges for Public Administration and Policy Research in Central and Eastern Europe. *The NIS-Pacee Journal of Public Administration and Policy*, 13 (2): 12.

Nemec J., Spacek D. (2020) The COVID-19 Pandemic and Local Government Finance: Czechia and Slovakia. *Journal of Public Budgeting, Accounting & Financial Management*, 32 (5): 837.

OECD (2020) *The Territorial Impact of COVID-19: Managing the Crisis across Levels of Government*. Paris: OECD.

Palaric E., Thijs N., Hammerschmid G. (2017) *A Comparative Overview of Public Administration Characteristics and Performance in EU28*. Brussels: European Commission.

Placek M., Ochraňa F., Pucek M., Nemec J. (2020) *Fiscal Decentralisation Reforms*. Springer: Cham.

Public Health Authority of the Slovak Republic (2020) *Act no. 387/2002 Coll. on State Management in Crisis Situations Outside the time of War and State of War. Overview of measures of the Central Crisis Staff in Response to the COVID-19*. Available at: http://www.uvzsr.sk/index.php?option=com_content&view=category&layout=blog&id=250&Itemid=153 (accessed 4 April 2021).

Sloboda M., Kollárik M., Poláková Suchalová A., Trutkowski C. (2020) *Training Needs Analysis of Local Government in Slovakia*. Ministry of Interior of the Slovak Republic and the Institute of Public Policy. Bratislava: Centre of Expertise for Good Governance.

Statistical Office of the Slovak Republic (2020) *Population and Migration*. Available at: <https://slovak.statistics.sk/wps/portal/ext/themes/demography/population/indicators> (accessed 26 March 2021).

Statistical Office of the Slovak Republic (2021) *Reporting of Government Deficits and Debt Levels by the Slovak Republic to the European Commission (Eurostat) for 2016–2020*. Available at: https://slovak.statistics.sk/wps/portal/ext/products/informationmessages/inf_sprava_detail (accessed 24 March 2021).

The Slovak National Centre for Human Rights (2020) *Slovakia*. Brussels: European Network of National Human Rights Institutions.

Trading Economics (2021) *Slovakia Unemployment Rate – 1994–2021 Data*. Available at: <https://tradingeconomics.com/slovakia/unemployment-rate> (accessed 24 March 2021).

Verseck K. (2021) COVID-19: Slovakia Mired in Chaos. *Deutsche Welle*, 1 March 2021.

WHO (2020) *COVID Statistics*. Available at: <https://www.who.int/data/gho/data/countries>

ZMOS (2020) *Aktuality COVID-19*. Available at: <https://www.zmos.sk/aktuality-covid-19.html> (accessed 28 March 2021).