





Build Back Better: Toward a Visual Strategic Plan for Successful Emergence from COVID-19 The Case of Israel

Part I

A Survey of 'Build Back Better' Research

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Contents

Contents
Abstract
Introduction: Predicting the Pandemic
Predicting the Pandemic
Build Back Better: A Survey of Research on Disaster Recovery
Origins of "Build Back Better"7
Debt Phobia
It Takes a Village11
Disaster Capitalism
Risk Reduction & Risk Management14
Economic Impact15
Summary & Conclusions16
References17

"For a healthy politics to flourish, it needs reference points outside itself – reference points of truth and a conception of the common good."

> Prof. Moshe Halbertal, Dept. of Philosophy, The Hebrew University of Jerusalem

Abstract

This three-part research paper proposes a strategic long-run plan for Israel, as it emerges from the COVID-19 pandemic. It is based on three key sources: (a) a landmark pre-pandemic UN report, on how nations can build back better after natural disasters, along with related research,³ (See Part I), (b) a new book by Ruchir Sharma, 10 Rules for Successful Nations¹ which includes extensive global historical data, (See Part II) and (c) in Part III, a visual approach for benchmarking economic, social and political performance of Israel, relative to other nations, which we call the SNI Wheels of Life.²

Currently, Israel and other nations focus single-mindedly on dealing with the public health crisis caused by COVID-19, as well as on the short-term economic crisis it has brought. This is understandable, with widespread unemployment and even hunger. The resulting crisis, however, has the potential for initiating powerful long-term reforms.

In this report, Part I, we conduct a survey of recent research on the theme of 'build back better' – how capable nations bounce back and rebuild after natural disasters, with the overarching theme of Build Back Better.

Introduction: Predicting the Pandemic

The global pandemic that began in late December 2019 caught most of the world's nations unprepared. Israel is no exception. This occurred, despite numerous warnings. (See Box).

A crucial element in "build back better" is the degree of preparedness for the crisis, in advance of its occurrence. Consider, for example, the hurricanes that regularly strike the Atlantic coastline and inland regions of the United States. The official hurricane season for the Atlantic Basin is from June 1 to November 30; the peak of the season is from mid-August to late October. It is known with certainty that powerful hurricanes will occur during this period.

Yet when Level 5 Hurricane Katrina occurred in August 2005, it caused over 1,200 deaths and \$125 billion in damage, particularly in the city of New Orleans

and the surrounding areas. The emergency response from federal, state and local governments, led by FEMA – Federal Emergency Management Agency, was widely criticized, and its head was forced to resign as a result. FEMA simply was not prepared.

With 1.4 billion international arrivals (trips) per year, and with a global ecosystem in which goods, services, people, information, and money flow freely from country to country, it was not difficult to predict that a highly contagious virus would spread rapidly from country to country. Yet in large part, no nation was fully prepared for the resulting pandemic.

Hence, an important part of any emergence strategy must be to (a) debrief, analyzing lessons learned from the pandemic, specific to each country, and (b) implement plans to deal with future such pandemics, if and when they occur, with emphasis on rapid reaction.

Predicting the Pandemic



We were warned. Here is the proof:

Bill Gates, TED talk, 2015: If anything kills over 10 million people in the next few decades, it's most likely to be a highly infectious virus rather than a war," Gates said. "Not missiles, but microbes." Gates noted that many countries worked for years to reduce the risk of nuclear war, and needed to give similar attention to a massive mobilization against a killer virus. "We've actually invested very little in a system to stop an epidemic," he said, echoing warnings in recent years from infectious disease doctors. "We're not ready for the next epidemic."

Vaclav Smil, "Global Catastrophes and Trends" (book), Sept. 2012: "Consequently, the likelihood of another influenza pandemic during the next 50 years is virtually 100 percent" Preparing for the Next Pandemic, By Michael T. Osterholm, Foreign Affairs, July/August 2005: "This is a critical point in our history. Time is running out to prepare for the next pandemic. We must act now with decisiveness and purpose." And in "Deadliest Enemy: Our War Against Killer Germs", he warned, the US is not properly prepared for a pandemic.

Robert G. Webster, "Flu Hunter: Unlocking the secrets of a virus": "Nature will again challenge mankind with an equivalent of the 1918 influence virus. We need to be prepared."

In 2018, the US intelligence community's Worldwide Threat Assessment team warned that "a novel strain of a virulent microbe that is easily transmissible between humans continues to be a major threat".

In the 2019 threat assessment: "We assess that the United States and the world will remain vulnerable to the next flu pandemic ...that could lead to massive rates of death and disability, severely affect the world economy, strain international resources and increase calls on the US for support." [The Trump administration, without explanation, postponed the DNI's annual Worldwide Threat Assessment which warns that the U.S. remains unprepared for a global pandemic. The office of the DNI was scheduled to deliver the Assessment to the House Intelligence Committee on February 12].

US AID Director Jeremy Konyndyk, Politico, 2017: "At some point a highly fatal, highly contagious virus will emerge, like the 1918 Spanish flu pandemic, which infected one-third of the world's population and killed between 50 and 100 million people". He added that President Trump is unprepared for such a pandemic.

US National Security Council, Dr. Luciana Borio, director of medical and biodefense preparedness: in 2018: "The threat of pandemic flu is the number one health security concern. Are we ready to respond? I fear the answer is no". (John Bolton disbanded the NSC team).

2006: Massachusetts Flu Pandemic Preparedness Plan: public health officials predicted as many as 2 million people could become ill. [4.25 million people have so far been ill with the coronavirus in the US and the numbers mount].

Stephen Soderberg's movie Contagion, released in 2011, is about a fictional virus called MEV-1, which became a global pandemic after a bat spread it to a pig, who spread it to a person.... The fictional virus had a 72-hour incubation period and high fatality rate.

Albert Camus' 1947 novel The Plague described an epidemic in Algeria....

Few listened to the modern-day prophets. There were far more of them than the few listed above. Indeed, fake news/conspiracy mongers blame Bill Gates for the pandemic (along with George Soros), even though the Bill and Melinda Gates foundation has donated, by some reports, over \$350 million to COVID-19 mitigation and innovation.

We have consistently turned a deaf ear to wise experts who warned of impending disaster and urged us to prepare. Perhaps after the pandemic, we may listen more closely.

Build Back Better: A Survey of Research on Disaster Recovery

Origins of "Build Back Better"

The bureaucracy of the United Nations is not often seen as a wellspring of innovative, pathbreaking ideas. "Build back better" is an exception. The United Nations Office for Disaster Risk Reduction employed this mantra, and a set of action items to implement it, in 2017³. But the origins of "BBB" go back to 2005, when former US President William (Bill) Clinton was appointed special envoy for tsunami recovery, by the UN Secretary General, and issued a report in 2006, titled *Key Propositions for Building Back Better*⁴.

Clinton's 10 key propositions for building back better are shown below, in the box, slightly shortened.

>>> Build Back Better: Clinton's 10 Propositions

1. Families and communities drive their own recovery. 2. Recovery must promote fairness and equity. 3. Governments must enhance preparedness for future disasters. 4. Local governments must be empowered to manage recovery efforts, donors should devote more resources to govt. recovery institutions. 5. Good recovery planning depends on good information. 6. UN, World Bank, and other multilateral agencies must clarify their roles and relationships. 7. The expanding role of Red Cross/Red Crescent carries great responsibilities for quality in recovery efforts. 8. From the start, governments must create the conditions for entrepreneurs to flourish. 9. Beneficiaries deserve agency partnerships that move beyond rivalry. 10. Good recovery must reduce risks and build resilience.

Clinton's 10 propositions refer specifically to natural disasters, such as the 2004 Indian Ocean tsunami, among the deadliest natural disasters in human history, with at least 230,000 people killed or missing in 14 countries. As we write this, the novel coronavirus pandemic has killed 823,000 people worldwide and infected over 23 million. All of Clinton's BBB propositions apply to the current pandemic, which is itself a kind of natural disaster, to a greater or lesser degree. For example, efforts to develop a vaccine are national in nature. But individuals and families are being forced to rely on their own resilience and resourcefulness, as government relief efforts often fall short. And while efforts are focused on 'flattening and lowering the curve' (of those infected), there must be ongoing efforts to learn how future pandemics can be dealt with, and future recoveries managed, with far greater competence.

The follow-up UN report³ offers a four-stage program for BBB -- also highly relevant to the pandemic emergence and recovery – defining BBB in concrete terms as this staged process:

> Reconstruction – restoration of resilient critical infrastructures, servicing, housing and livelihoods required for the full functioning of a community

> Recovery – Restoring and improving livelihoods and health, as well as economic, physical, social, cultural and environmental assets

> Recovery Framework – Establish a common platform for the whole community to build, sustain and coordinate delivery of recovery capabilities (not a plan but a "strategy outlining long-term goals and the way progress is measured".

> Rehabilitation - Restoration of basic services and facilities for the functioning of a community or a society.

Again, there is strong emphasis on community. Again and again, we have seen national governments struggle to manage the pandemic, issuing country-wide edicts that do not meet the needs of specific communities – those less affected by the pandemic and those extremely impacted by it. for example, many months after the onset of the pandemic, authorities in Israel are working to adapt localized strategies, with a "stoplight" system that defines communities as red, green or orange, in degree of infection.

Debt Phobia



The lockdowns implemented to curtail spread of the coronavirus impacted the economies of the world disastrously. Second quarter 2020 data show declines of 20-25 % in Gross Domestic Product, followed by slow recoveries. With massive unemployment, and widespread fear and uncertainty, personal consumption collapsed; this component comprises some 70% of GDP in many Western countries, and its decline led to bigger falls in gross capital formation. So with two key components of GDP in free fall, a huge shortfall in spending and in demand occurred. Only government has the ability to offset it, and prevent catastrophic unemployment and bankruptcies.

The last comparable macroeconomic shock of this magnitude occurred in the 1930's. Many important lessons can be learned from this episode, especially the policies of President Roosevelt and his New Deal, beginning with his election in 1932.⁵, ⁶ (See Box).

The US, Israel, EU and other countries have spent heavily on pandemic relief. The result has been soaring budget deficits. Many elected officials have become alarmed, a phenomenon known as debt phobia. This could lead to sharp cuts in relief spending, precisely when such spending is desperately needed. The paradox is that if governments stop stimulating the economy, the debt burden will in fact grow, because even if the numerator of the debt/GDP ratio (public debt) remains constant, the denominator (GDP) may shrink. Many European Union nations learned a bitter lesson, in the wake of the 2008 financial collapse, that austerity (slashing budget deficits in the face of debt phobia) is counterproductive and destructive.

>>> Lessons from the 1930's



I asked Harvard historian Prof. Lizabeth Cohen, whether a premature cut in US government relief spending could be damaging, based on the 1930's: Here is her response⁵:

"A pull-back too soon is indeed a real danger. The Republicans in Congress and the White House are already working to curb national spending. Given that this pandemic is not fading any time soon, we will not be able to get back to a normal economy and people will continue to face unemployment, evictions, hunger, ill health, and much more. Many mayors and governors have been exemplary in their efforts to put people before budgets, but only the federal government can take on debt. These lower levels of government will soon need to balance their budgets. Many policy makers and economists, in fact, feel that had the federal government spent more in response to the 2008 financial crisis the nation's recovery would have been quicker. Will that lesson be learned? I hope so, but a lot will depend on the November election."

Well before the pandemic, Prof. Manuel Trajtenberg⁷ made an exhaustive study of Israel's underinvestment in government services and proposed sharply raising Israel's public consumption-to-GDP ratio, to repair longstanding infrastructure decline, while maintaining the ratio of public debt-to-GDP at around 60%, lower than OECD levels. The pandemic caught Israel's health services unprepared, with too few doctors, nurses and hospital beds. A build-back-better approach following the pandemic should apply Trajtenberg's systematic model, while using the randomized controlled trials approach to test the most effective ways to spend public money. Randomized controlled trials, the method used to test safety and effectiveness for vaccines and drugs, has been applied by Economics Nobel Laureates Duflo, Banerjee and Kremer to test and implement evidence-based approaches for public policy. ⁸, ⁹

Trajtenberg's approach can overcome chronic debt phobia, while meeting vital needs and overcoming shortfalls in public services.

It Takes a Village



A strong theme in the BBB literature is the crucial role played by family, community and village.

> Zhao et al.¹⁰ study the aftermath of the Wenchuan earthquake in China, in 2008, which over 69,000 people lost their lives in the quake, including 68,636 in Sichuan province; 374,176 were reported injured, with 18,222 listed as missing.

> Goulding et al.¹¹ review the recovery efforts following the 2011 Tohuku earthquake and ensuing tsunami in Fukushima, that decimated a nuclear power plant. Press reports show a disastrous aftermath: The tsunami swept the Japanese mainland and killed over ten thousand people, mainly through drowning, though blunt trauma also caused many deaths. The Japanese National Police Agency report confirms 15,899 deaths, 6,157 injured, and 2,529 people missing across twenty prefectures, and a report from 2015 indicated 228,863 people were still living away from their home in either temporary housing or due to permanent relocation.

> Aryal et al.¹² review disaster relief in Nepal, in the wake of the Ghorka earthquake in Nepal in April 2015; it killed nearly 9,000 people and injured nearly 22,000.

> Francis et al.¹³ survey 'build back better' efforts in New Zealand, following the 2011 Christchurch earthquake The earthquake struck the Canterbury region in New Zealand's South Island and was centred 6.7 kilometers (4.2 mi) south-east of the centre of Christchurch, New Zealand's second-most populous city. The earthquake caused widespread damage and killed 185 people.

> Yang et al.¹⁴ review the work of a Korean NGO, implementing a DRR program (disaster risk reduction) in Myanmar, in the wake of a disastrous cyclone.

Cyclone Nargis was an extremely destructive and deadly tropical cyclone that caused the worst natural disaster in the recorded history of Myanmar during early May 2008. The cyclone made landfall in Myanmar on Friday, 2 May 2008, and sent a storm surge 40 kilometers (24 miles) up the densely populated Irrawaddy delta, causing catastrophic destruction and at least 138,373 fatalities.

These five natural disasters between 2008 and 2015 disrupted the lives of millions and caused almost a quarter of a million deaths. While there are major differences between a global pandemic, and a local or regional natural disaster, many important lessons were learned by scholars, in the wake of these earthquakes and storms.

"Most activities were responsive (to the disaster) rather than preventive (preparing in advance)¹⁴. Even though typhoons in South Asia are common, and with global warming, are growing more frequent and more intense; and even though earthquakes are frequent in Japan, and to a lesser degree, elsewhere, preparedness is quite limited. Japan is an exception: every citizen there has a 'go-bag', in readiness for evacuation, for example.

This applies to pandemic preparedness as well. Despite experts' prediction that a pandemic was inevitable (see above), personal protective equipment (PPE), ventilators, masks, and other equipment were in short supply for months, in most countries.

Effective disaster relief was community-based. For example, in the Fukushima disaster, a discipline known as community based operations research was implemented – defined as "emphasizing place, space, community... to real life problems...[to] prioritize the needs and concerns of disadvantage human stakeholders"¹¹. The global pandemic has shown enormous variance in its impact on communities. In the US, poorer areas, indigenous Americans, Black and Latino populations, factory workers, etc. have been disproportionately affected. Each community has different needs and concerns, and they must be addressed at the community level.

'Build back better' has been employed for well over a decade. In the Chinese Wenchuan disaster, it was applied at the village and community level. The mantra itself inspires hope by specifically and directly tackling local needs and concerns, that existed *before* the disaster, and leveraging the disaster as an opportunity to confront and eliminate them.¹⁰

Disaster relief is often managed 'top down' – from national agencies, who bring relief to communities. The literature shows that a 'bottom up' approach must also be integrated and strengthened. Communities know their own needs best, can articulate them, and should be empowered and enlisted to help meet them.¹¹

Disaster Capitalism



For some, capitalism is itself a disaster. ⁱNaomi Klein¹⁵ notes how in the aftermath of the 2008 global financial crisis, itself caused by greed-is-good unrelated capital markets, credit swaps and junk mortgages, the new capitalist system restored the playing field for Wall St., banks, hedge funds, etc., in some ways more favorably than before.

But the term disaster capitalism has an opposite, utterly different employment¹⁶. The authors studied the aftermath of the disastrous L'Aquila earthquake in Italy on April 6, 2009.

The earthquake was felt throughout central Italy; 308 people are known to have died. Seven members of the Italian National Commission for the Forecast and Prevention of Major Risks were accused of giving "inexact, incomplete and contradictory" information about the danger of the tremors prior to the main quake. Six scientists and one ex-government official were convicted of multiple manslaughter for downplaying the likelihood of a major earthquake six days before it took place and each was sentenced to six years' imprisonment -- however the verdict was overturned on appeal. Criticism was also applied to poor building standards that led to the failure of many modern buildings in a known earthquake zone: an official at Italy's Civil Protection Agency, Franco Barberi, said that "in California, an earthquake like this one would not have killed a single person". [Wikipedia].

The authors note that disaster risk reduction (DRR) and the resilience paradigm have existed since the 1980's. The focus is on "building community resilience."

ⁱ See Naomi Klein, The Shock Doctrine: The Rise of Disaster Capitalism. Picador; 1st edition (June 24, 2008). "Disaster capitalism operates by delivering massive shocks to the system and then using the ensuing period of anarchy, fear and confusion to reassemble the pieces of what it has broken into a new configuration. This is what was done in the aftermath of the financial crisis (of 2008)."

Disaster capitalism involves "a shift from centralized civil protection to decentralized inclusive community empowerment systems".

Klein focused on how unscrupulous individuals extract private advantage from disasters. This has been widespread in the pandemic, with panicky governments throwing money at anyone who promised masks, PPE, ventilators, etc. In the top-down centralized relief effort after L'Aquila, the authors conclude that "despite expenditure of around 22 billion euros 11 years after the earthquake, red zones still exist (areas that suffered intense damage during the earthquake and are deemed unsafe to build on) and over 10,000 people live in temporary housing..... [The top down approach resulted in] rent-seeking, elite capture, corruption, and organized crime infiltration, instead of enabling inclusive social learning and socially sustainable transformation" (¹⁶ p. 18).

This disaster capitalism is being repeated in governments' desperate race for a coronavirus vaccine. Billions are invested up-front in pharma companies, big and small, on weak promises that a vaccine will emerge, removing any risk from the companies themselves. Will the public trust the result, even if an effective vaccine does emerge, when profit rather than public health drives the process?

Risk Reduction & Risk Management



The definition of 'build back better', according to its originator the United Nations¹⁷ is: "the use of the recovery, rehabilitation and reconstruction phases after a disaster to a) increase the resilience of nations and communities through integrating disaster risk reduction measures into the restoration of physical infrastructure and societal systems."

The core of build back better is DRR – disaster risk reduction – simply, as the Boy Scouts say, "be prepared". Preparing in advance reduces the risk of massive disaster and loss of life. Dube studies BBB and DRR in the context of efforts in Zimbabwe.

Amaratunga¹⁸ reports on a global survey of DRR, at the local level, conducted under the UN in Latin America, Asia, Africa, Europe and Arab states. Although a wide variety of tools exist for reducing disaster risk and mitigating disaster – such as local government self-assessment, and Disaster Resilience Scorecards, and many others – "a majority of local governments did not use any tools to support DRR".

Saya et al.¹⁹ argue that "countries and communities are much better equipped to 'build back better' when they have taken actions to strengthen recovery capacity and decision-making effectiveness *prior to the onset of disaster*". An essential component of BBB is BP: Be Prepared. But few do so.

Fernandez et al.²⁰ summarize BBB research and observe, expectedly, that "numerous experiences have proved that it is *easier said than done*".

lyengar et al.²¹ emphasize the key role of entrepreneurship, as a way to build adaptive capacity in community-based healthcare organizations. Local community-based entrepreneurship – initiating and implementing creative ideas, often without major resources, to improve wellbeing – is a vital part of any BBB program.

Economic Impact

The pandemic has had a massive impact on local, national and global economies²²,²³. The core trade-off has proved very difficult to optimize -- between saving lives (public health) and saving jobs (economy). A bitter argument rages. Lock down severely, diminish the spread of virus, and *then* open the economy? Or open the economy, with public health measures, as a priority? As second and even third waves sweep over nations that had previously thought they had overcome the pandemic, uncertainty mounts.

Maital & Barzani²⁴ survey recent efforts to simulate the impact of the coronavirus pandemic. This is a necessary first step to simulating the economic impact of the pandemic. They note that there is considerable confusion in the metrology of COVID-19 – the particular measures used to track and assess the pandemic. These simulations are crucial, because they are widely used by public health officials in designing current and future policies.

Botzen et al.²⁵ provides a useful survey of economic modelling of natural disasters. They make an important distinction between direct effects, on GDP, employment, unemployment and incomes, and indirect effects – short and long-term losses, arising from disasters, that are not directly measured. The latter include, for the pandemic, mental health and post-trauma disorders, and

disruption of the movement of people, goods and information. The indirect effects for the current pandemic may be particularly large.

Summary & Conclusions

In this study, Part I of three parts on Build Back Better, we have surveyed the literature on disaster recovery, focusing on 'build back better'. This three-word mantra, now adopted even in the US presidential election campaign, is seductive, logical, but rather poorly implemented. A key theme of our survey has been the crucial role of local communities and neighborhoods.

Disaster relief is generally assumed to be national, international and top-down. Again and again, we have seen scenes of well-meaning aid pouring in to disaster-stricken areas, aid which often is inappropriate and unusable. With climate change, for example, communities face a growing need to organize and prepare. Yet the pressing problems of short-term needs often push aside longer-term considerations, such as the risk of natural disaster, which includes pandemics.

The global pandemic has caught the world largely unprepared, lacking key resources that could have saved lives. It may occur that stockpiles of ventilators, PPE's, masks and other equipment will in future be set aside. But this is insufficient. Strategic preparedness plans are needed, trickling down all the way to local communities and neighborhoods. And as we emerge from the pandemic, a key part of recovery efforts must be to repair all the deficiencies, inequalities, shortages and mistakes that made the pandemic far worse than it had to be. In our real-time diary of Israel's stop-start approach to COVID-19, we observe how little we understood about COVID-19 and how slowly, haltingly, we learned (²⁶ Maital and Barzani).

We <u>can</u> build back better. To do so, we will need to enlist every possible ounce of creativity and innovation²⁷. And we will need to figuratively open our windows and implement best-practice benchmarking, observing what other countries have done and adapting their innovations to our needs and situation ²⁸, ²⁹. It remains to seize this mantra, which everyone can embrace, and translate it into detailed, effective, pragmatic action plans.

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