Leadership and power dynamics in crisis management: a brain-drain effect – the Trump and US experience

A brain-drain effect

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Abstract

Purpose – Crises are moments when citizens are beckoning on the political leaders for necessary action. As a president, one is expected to change the narratives during the pandemic that split the world. This analysis aimed at investigating the American government's response to the critical crisis of COVID-19 and its policy implementation. **Design/methodology/approach** – The study explored a case point method using a narrative and qualitative analysis to diagnose the USA's response to the COVID-19 crisis. An exploratory approach was further adopted to finetune the case study report.

Findings – The analysis demonstrates that Trump's power dynamics were weak in the USA and lacked crisis control even as the President that the entire nations of the world were looking up to. The case study report also showed that Trump did not possess the audacity of resilience to manage the crisis. The analysis provides us with how presidential leadership under Trump placed the USA in a state of colossal failure enmeshed with high rates of COVID-19 cases, deaths and unending incapacity to create a fundamental consensus in the fight against the COVID-19 pandemic today. This report shows Trump aged prolonged inability to drive governance mechanisms in the US and illustrated pockets of failures in decision analysis and information dissemination as a leader.

Originality/value – The study revealed how incompetent Trump was in responding to the crisis. This study has provided academia with an understanding of leadership dynamics and behaviour through a Nigerian scholar lens and a sociological perspective.

Keywords Leadership, Brain-drain effect, Power dynamics, Communication, Power and influence, Politics, COVID-19, Crisis management, USA

Paper type Case study

1. Introduction

The eruption of the COVID-19 pandemic engulfed the entire world starting in November 2019 from the city of Wuhan in China and still ravaging the whole world today in various variants and forms was one of the most dramatic public health issues in the 21st century. It is deadlier than the Ebola virus that damaged a few countries in Africa about a decade ago. The pandemic dealt a big blow to the continents of the world. It never left anyone in its spread and its malicious attack on human health, challenging governments across the world's continents. It severely threatened global public healthcare systems in a manner they have never experienced in the past. Apparently, the crisis

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LBS Journal of Management & Research Vol. 20 No. 1/2, 2022 pp. 57-72 Emerald Publishing Limited e-ISSN: 0974-1852 pr. 185N: 0972-8031 DOI 10.1108/LBSJMR.05-022-0008 demonstrates that leadership in several zones, regions and cultures is critical in curtailing the pandemic.

The case study report is an illustration of the leadership model and power dynamics during the early period of COVID-19 crisis management in the USA. The case study was a class discourse among doctoral students in INSEAD business school. The case study showcases effective and ineffective management of the ongoing pandemic situation in America among the leadership of the USA specifically during the leadership of President Donald Trump. The COVID-19 pandemic situation was a test of commitment and resolution for all political leaders across all continents. To safeguard their citizens, it became imperative for governments to meet increasing needs in the healthcare system as well as the economy. A lot of political leaders struggled to understand and cope with the attendant pressure that the crisis unleashed on the world. The crisis was a premeditated ploy for leaders in governance to influence political authority and strengthen power with their process of handling the crisis. COVID-19 apprises how best to handle such a moment, emphasising major challenges that leaders experience during this period.

In this case study analysis report, the study investigated the role of leadership played during the Wuhan COVID-19 pandemic response. The report illustrates the main phases of the pandemic and assesses how the actions and decisions taken during each stage fulfil peculiar crisis leadership tasks in the USA. The case incident was viewed through the lens of securitisation theory, contingency theory and value-base leadership approach to understand how leadership power and relations transformed during the crisis and grasp how leadership approaches evolved in reality in the face of a pandemic, resulting in attention to various tasks, relations and behaviours. The American case assists to produce a model that the ability to adopt different leadership approaches was contingent on the crisis. However, to advance the understanding of how the USA provides leadership and its power dynamism during the COVID-19 pandemic, the following few questions serve as a guide to investigating its leadership approach to the spread of the pandemic:

- (1) What are the leadership roles played by the US government during the COVID-19 pandemic?
- (2) How did the US government curtail the spread of the COVID-19 pandemic and manage the death cases in the country?
- (3) What are the actions taken by the US government in the wake of the COVID-19 pandemic to fight the spread of the crisis?

2. Literature review and theoretical review

This study is grounded in securitisation theory, contingency model of leadership and valuebased leadership approach. All these highlighted theoretical underpinnings have relevant bearing with the study of the leadership paradigm and ultimately with this study.

2.1 Securitisation theory

Therefore, one of the underpinning theories, as explained above, is securitisation theory as advanced by Copenhagen philosophy, developed in the 1990s in the area of international relations and security studies. The theory's emphasis was on increasing the significance of security in diverse ways impacting human lives and conceptualising it as "securitisation" (Gozdecka, 2021). Wæver (1995) put forward that securitisation can be applied to any area of national life and declared particular areas of public interest to be security challenges, and it must be taken as such (Van Rythoven, 2015). The challenge of securitisation is its propensity to extend, proliferate and establish a normal footing at the expense of unacceptable trade-offs, which increasingly involve human rights (Watt, 2017). Securitisation speech affecting public health has been noticeable in the language surrounding the response to COVID-19 and

confirms that health is gradually shifting towards growing securitisation (Gozdecka, 2021). Cucinotta and Vanelli (2020) argued that on March 11, 2020, the World Health Organisation (WHO) made a pronouncement of COVID-19 as a pandemic constituted the initial declaration that sensitises a security-oriented response and persistent references to the circumstance as the war against the coronavirus (Serhan, 2020). And the challenges lie ahead of the virus to justify a securitised model allowing for a long period of trade-offs in the area of human social and physical rights. This declaration of global lives as securitisation by the WHO is the aspect that the Trump-led government had been neglecting. He never wanted to accept the securitisation model, and Trump perceived it as a conspiracy theory from Wuhan. The securitisation theory is to appropriately regulate human rights in terms of social distance, lock-down, use of nose masks and quarantine and health-wise.

Further study has enumerated the importance of health preparedness as a common transformation of social well-being during COVID-19 and post-COVID-19 (United Nations, 2020). It is this health concern preparedness that the Trump-led government was not ready to saddle itself with. Trump did not want any restriction on human lives and human rights. The question then is whether this securitisation is for the short term or the long term. Taking heed to the clarion calls of WHO would have benefited the USA as this securitisation is not for the long term and possibly it would have reduced death cases recorded in the USA during the COVID-19 period. Securitisation of a response, to be clear, is not necessarily an issue amid the spreading pandemic. Rather, the challenging aspect of securitisation is embedded in its power to become a long-term approach to certain phenomena like war, lock-down, migration and internally displaced citizens among other turbulent situations. This will justify stringent approaches that will permanently restrict fundamental freedoms and deter subjects of rights during normal times. It may not be certain to understand the exact moment the extent to which the securitisation approach may last, a tendency to maintain areas securitised, once declared so, for a certain period suggests that the danger it portends is high, and securitised health response is real and may affect particular human rights if care is not taken for an indefinitely long period. Hanrieder and Kreuder-Sonnen (2014) claimed that the legal and institutional magnitude of securitisation needed to be strictly adhered to whenever it is declared as such due to the logic of emergency, which as posited is not a short-lived mode of political decision-making, but a form of exceptionalism that brings-up enduring, often continuous institutional impacts. Such impact includes the empowerment of the leadership in the political ecosystem and other transformations that calls for using positive leadership discretion when facing such a security threat (Robinson, 2017).

2.2 Contingency leadership theory

The second underpinning theory relevant for this study analysis is contingency theory. Studies have addressed the issue of what makes leadership effective in groups, organisations and even in society (Park, 2020; Williams, Ashill, & Naumann, 2017). One classic theory and philosophy that gained prominence till today is the contingency theory of leadership. This theory holds that leadership effectiveness is the interplay of a leader's trait or behaviour and situational elements (Childs, Turner, Sneed, & Berry, 2022). Contingency theory opposed the conventional classical theories of managing organisations and society. The theory proposed that the suitable organisational structure and management approach were determined by a set of contingency variables, typically the uncertainty and instability of the ecosystem (Cheng & Fisk, 2022). Generically, the contingency approach is situational in positioning but more thorough and rigorous in practice. The contingency leadership theory is described as recognising and establishing practical and efficient interactions between environmental management and performance factors (Shaker et al., 2020). This is, however, where the government led by Trump in the USA lost the motion. Trump failed to switch to existing solutions available within his purview during the COVID-19 pandemic. Trump never believed in the prevention and control of the virus even in the face of the declaration by the WHO, which is another tendency to adopt contingent variables upon the situation on the ground. At a point when healthcare personnel and authorities in the medical fields were advocating for a vaccine that will curb the spread of the virus surge, the president of the USA. Trump, was having a casual attitude to the solutions of prevention and control of COVID-19. Behaviourally, Trump did not believe in the existence of the global COVID-19 pandemic as he claimed that it is a conspiracy theory from the city of Wuhan. One cogent point to note in managing society and governance is that whenever the leader who is saddled with the responsibility of providing effective and efficient leadership does not key into the philosophy or objectives of the group even if such an idea is laudable, the effort would be thwarted, and the idea will not possibly thrive. To buttress this foregoing discourse, Maak, Pless, and Wohlgezogen (2021) argued that it is the responsibility of a leader to impart to the citizens a sense of hope for future goodness and dignity, to be guardians of radical hope and have a better insight into future. In the same dimension, an effective leader who has the knack for situational approach must be able to take responsibility for his subordinates. What has become clearer during the global pandemic is that several leaders have not only failed to infuse hope but also inculcate a self-serving attitude and destructive and utterly toxic leadership tendency at the expense of a large number of their followers around the world. This indicates a faulty line of leadership provision which was evident in the Trump-led administration (Maak et al., 2021). However, naturally, Trump was not weak but lacked the character of a leader with a design thinking mentality that will take initiative for different situations at hand.

2.3 Value-based leadership theory

Successful and forward-thinking leadership communicates compelling values and standards to the subordinates (von Eiff, von Eiff, & Ghanem, 2022). Valued-based attitude describes what is intention and aim of leadership actions and what drives such actions and thoughts in a turbulent, volatile, uncertain, complex and ambiguous world. This describes for whom the leader should offer validly legal (whom do the leader provide added value and in what quality or measure) leadership and knows how to transform plans into successful corporate development. Leaders are supported by the model of value-based leadership during the COVID-19 pandemic. This was evident in one of the African countries, Madagascar, where the president of the country adopted the value-based leadership approach with reduced cost by using effective COVID-19 organics to cure and ameliorate the spread of the global pandemic. Value-oriented leadership functions as action-based leadership and provides direction for management and leaders during COVID-19, especially in the healthcare provider to the masses. Basically, it constitutes connecting the cultural and behavioural features of a firm with organisation and decision-making frameworks that produce clarity and unambiguity, control apparatus and proven leadership practices.

Leadership values are feasible by designing the dimensions of meaningful and purposeful driven life for the followers. It is characterised by leadership responsibility, and everybody must develop the habit of solving one issue or the other at any point in time (Lin, Jhang, & Wang, 2021). Value-driven leadership ideology is commonly acknowledged as effective for organisational performance throughout cultures (Della Corte, Del Gaudio, Sepe, & Zamparelli, 2017). It is expressed as a leadership approach premised on robust philosophical values such as compassion and high ethical standard championed by a leader (Karakas & Sarigollu, 2013). This demonstrates a leader's ability to encourage, motivate and drive his/her subordinates through the axis of magnanimity, integrity, morals and emotional stability (Prasad, 2016). Value-based leadership is a value-oriented and complete value chain responsibility (Hester, 2019). This is the kind of attribute that should have characterised the Trump-led government in the fight against COVID-19 in the USA.

On the contrary, Trump was negatively persuading the US citizens against any possible solutions that could control the pandemic. Value-based leadership must focus on certain values that are attractive to the people and citizens, and then the populace will be highly geared towards accomplishing goals (Tan, Zawawi, & Aziz, 2016). This emphasises internalised motivation in employees' beliefs, and the inspiration of such drive provoked value-driven leaders on performance, as it is much greater than the influence of other kinds of leadership phenomena (Bao & Li, 2019). Value-based leaders express a significant role in the practice of shaping peoples' stimulus to function as a team (Niculescu, 2014). It has become conspicuous that the US government, Trump, has not offered value-based leadership in his fight against the attack of the COVID-19 pandemic that ravaged the world.

3. Methods

The study utilised a systematic approach to analysing the leadership capability of Trump and his power dynamics during the pandemic in the USA. It adopted a narrative discourse approach to evaluate the good and the bad side of a coin of the Trump-led administration during the COVID-19 incident. The rationale for utilising a systematic review approach is its ability to unearth relevant studies and events concerning the leadership pattern of the Trump-led government in the USA. It fosters the potential to critically evaluate each situation as they were unfolding. It enables the researcher to synthesise the findings with an objective approach and present a balanced but accurate vital summary of findings with due consideration of any error in the evidence (Gopalakrishnan & Ganeshkumar, 2013).

4. The current situation/problem analysis - COVID-19

The US Center for Disease Control (CDC) on January 8, 2020, made its first pronouncement and warned the U.S. in a public statement regarding the severity of the COVID-19 outbreak. Assuring the US nations that the leadership of the Trump-led administration is monitoring the situation and that citizens should be wary when they were travelling to Wuhan, China. The CDC also monitors major airports for passengers arriving from China and screens those arriving from Wuhan (Abutaleb, 2020a, b). On January 22, 2020, President Trump made his first-ever address to the US nation regarding the COVID-19 pandemic, saying he was not concerned about the future pandemic, and his administration had it totally under check. The statement of President Trump was just a mere false hope without adequate plans to curtail the spread of the pandemic among US citizens.

On January 27th, 2020 White House officials and the American presidency met to discuss the rising concerns after the third month of the spread of the novel virus. Secretary of health and human services, Alex Azar, struggled to get President Trump involved in the discourse, but the President was preoccupied with maintaining an interim trade agreement with the Chinese government signed earlier in the month. After a trade disagreement that spanned through one year, China and USA had just agreed and signed a long protracted trade deal. Joe Grogan, head of the White House Domestic Policy Council, retorted that the action of Trump might cost him his second term re-election if the COVID-19 outbreak spread in the US and Trump remained indifferent to this warning (Harris, 2020). On January 29th, 2020, Peter Navarro, Trump's trade advisor, released the pandemic memo, reiterated that over 500,000 Americans might die and said that the outbreak was likely to be much more severe than the seasonal flu. He added that it will be transformed into a full-blown pandemic of what it is today and could affect 100 million Americans with a loss of life as many as 1-2 million (Haberman, 2020). This was an indication that President Trump was not concerned about COVID-19 as it illustrated that Trump felt that it was a conspiracy theory between WHO and China.

As the case numbers increased, a senior official in the Trump-led administration collaborated to advocate for strict travel restrictions. This involved the Director of the National Institute of Allergy and Infectious Diseases, Anthony Fauci, and National Security Advisor, Mathew Pottinger. At the same time, the treasury secretary, Steven Mnuchin repelled the stern measures of the travel ban on the ground that he was concerned with maintaining a robust trade alliance which might be jeopardised if a travel restriction were promulgated (Lipton, 2020). Experts had argued that every day, during the early stage of the pandemic, the administration of President Trump was busy discussing measures against taking decisive and corrective actions that would curtail and flatten the curve. However, an estimated 14,000 travellers arrived in America from China (Eban, 2020). While about 400,000 citizens and emigrants had arrived from China since the beginning of the pandemic (Eder. 2020), Trump's leadership administration failed to take action that will gradually ameliorate the spread of the COVID-19 pandemic to the entire US. His attitude was utterly indifferent in the fight against the pandemic and took the struggle with levity. It was after three months of the global pandemic that President Trump announced a travel ban from China and that was when three major airlines in the US (American, Delta and United Airlines). President Trump now declared on January 31st, 2020 that non-residents who had visited China in the last 14 days would be denied access to the USA (Blake, 2020).

On February 25th, 2020, CDC had prepared the minds of the US due to the nonchalant attitude of the President that the citizens should anticipate the worst moment consequent upon the COVID-19 pandemic. Dr Nancy Messonnier, Director of the National Centre for Immunization and Respiratory Diseases, cautioned on the dangers of COVID-19 and how it will disrupt normal life and standard mode of living (McLaughlin & Steve, 2020). While on February 26th, 2020, Trump appointed his Vice President Mike Pence to chair the US government response to COVID-19 by inaugurating a task force that will manage quick and efficient vaccine developments (BBC, 2020). Trump's leadership approach here was utterly poor, the appointment of Vice President Mike Pence was another poor leadership and the pandemic situation was mismanaged by the Trump administration. Mike Pence was criticised for prior healthcare poor management and serial blames in his home state. Anthony Fauci, among his critics, maintained that vaccine is not to be prepared in no time than expected by Trump's leadership as this required years of medical research before materialised (BBC, 2020). This is another blunder that Trump's leadership made in the management of the COVID-19 pandemic. After several months of neglect of the pandemic, he was focusing on the means of developing the vaccine. Meanwhile, vaccines take a longer period before they will be manufactured and the citizens needed immediate solutions to curb the pandemic.

The first COVID-19 associated death was confirmed on February 28th, 2020 in the US. The first death case was a woman in her 50s from Seattle, Washington (Oprysko & Kyle, 2020). Yet, Trump maintained his stand by weakening the significance of COVID-19. He addressed the ferocious of the virus as fraud and deception from both WHO and Chinese authorities during his re-election campaign in South Carolina and condemned his political opponents by overstressing the brutality of the pandemic situation. Trump again admonished the US citizens that the COVID-19 outbreak will soon disappear without definite action to dispel the severity, and its spread in the US Trump leadership chided the country and took to Twitter by reassuring the US that the risk remained low. The news of the threat and the first death case had circulated in the White House. At this period, the virus had spread to the entire American states. All the intelligence-gathering experts, as well as Senate Intelligence Committee Chairman, addressed a luncheon that the pandemic was more destructive in its spread than any disease experienced in the anal history of the USA. As White House officials' concern was growing, Trump continued reproaching the audience that it will disappear without taking action (Dale, 2020).

At the beginning of the fifth month of the eruption of COVID-19, March 2nd 2020, the Trump-led administration dedicated £34.2m to assist countries with a high risk of pandemic and neglected the US healthcare equipment and facilities' upgrade and support (Torres, 2020; Epstein & Sonam, 2020). Trump's leadership failed to provide COVID-19 test facilities for doctors and healthcare centres in the USA, but was concerned about rolling out funds for other weak nations that he considered as high risk of the outbreak. Trump leadership also failed to take responsibility and blamed his immediate predecessor's administration, Barak Obama, for the delay in the provision of the testing materials to detect those citizens with cases of COVID-19 (Flaherty, 2020). Trump denounced that Obama's administration decided on the testing procedure that became detrimental to what the leadership of Trump was experiencing. US healthcare professionals furiously argued that it would take weeks to increase testing capacity and quick response against a false promise of a ramping-up test exercise by President Trump. Another challenge was that US CDS had mismanaged its previous attempt to embark on mass-producing test kits to test those who were with cases of COVID-19 virus (Steinhauer, 2020). Trump leadership was also emphasising the production of vaccines and announced a stimulus package for funding research for the vaccine which gulped whooping amount well above £7.7 bn.

Trump's leadership model was majorly on economic prosperity as earlier stated against the concern for healthcare and mental fitness of the US citizens. He emphasised more on the economic focus that had been thwarted by the outburst of the COVID-19. He announced again flippantly that it is not a financial crisis, but a transient period that the US nation will outlive. Experts and analysts again once criticised Trump that his attention to maintaining economic benefits was in connection with his re-election bid, in his quest to maintain America's reputation as a world economic leader even in the face of the global health crisis (Orr, 2020). Another appalling blunder that Trump's leadership embarked on was to engage Google company in creating an online website that would foster COVID-19 testing on a national level. The website's development had been utterly managed and the Google organisation responded that the testing coordination was still at its infant stage and would only be available in Northern California to kickstart and not the whole USA (Ordonez, 2020).

Trump leadership made serial mistakes in the management of the pandemic. Trump tried to lure the German firm, CureVac, with a financial incentive to shift and relocate the vaccine production organisation to the USA to monopolise the production of vaccines. However, the German government contended that no country has total influence over a future vaccine, and it should be made available to the whole world immediately after it is prepared and finalised and not just the US citizens alone (Carrrel & Andreas, 2020). On March 16th 2020, Trump leadership exhibited the magnitude of the COVID-19 outbreak and encouraged the US that efforts to curb it were in top gear, but Trump never believed in the virus and perceived it as fake and connivance from Wuhan and WHO (Paton, 2020). He declared further social distancing mechanisms to control the spread of the pandemic which, to some extent, indicated Trump's level of seriousness after the hitherto spread of the virus into the USA. Meanwhile, Trump's cabinet members continued to jettison social distancing measures themselves.

5. Trajectory of Trump's leadership mismanagement during COVID-19 crisis in the USA $\,$

Overall, Trump was pushing on all fronts using reactive responses rather than being proactive in his leadership fight against the pandemic COVID-19. Early at the start of the outbreak, Trump was not aggressive in his leadership style towards curtailing the outburst; he was using slow and diluted actions in the fight against the COVID-19 response. He enacted lacklustre and loose COVID-19 policies. Clearly, Trump never understand the necessary steps

to take between either centralising or decentralising COVID-19's associated decision-making responsibilities to state governors in the USA. He never allocated the responsibilities to experts but relied on his conventional elected inexperienced leaders in the management of the COVID-19 pandemics. An example was when he appointed Mike Pence to chair the Vaccine production committee, which was once criticised for being a failure at such an instance in his home state. He was deflecting blame to his past predecessor prioritising political plans above the COVID-19 crisis and focusing on maintaining world economic power which led to a tussling of power between China and America on economic performance.

He prioritises offering support for international aid and implementing antagonistic diplomatic responses. Trump's leadership style failed to provide emergency preparedness on healthcare infrastructure such as enhancing the capacity of intensive care units in the US Trump's leadership credibility was poor and inadequate. His leadership fails to adopt top-down enforcement of COVID-19 compliance measures and no clear communication to the US citizens on the outbreak rather than offering them false reassurance. In several instances, Trump has downplayed the COVID-19 crisis and made malicious addresses and denial of the outbreak's severity and have chided several times the threat about COVID-19 that it will soon disappear. This was captured in the Washington Post and other media outlets in the USA. There was no transparent communication to inspire trust and solidarity in US citizens. Trump never communicated on COVID-19 decisive measures and roadmaps on curtailing future outbreaks. Trump's leadership approach was a lassiez-faire, gambled early and several times believed that the COVID-19 outbreak would not turn out to be nearly severe as health experts had warned it could be. The momentum of Trump's speeches regarding COVID-19 was obstinately hopeful, which is noted in contrast to some of the health and medical experts who warned that people should be overly prepared rather than underrating the threat of the virus. At a point, on Oct 1st 2020, Trump tested positive to COVID-19, even as he continued to underestimate the severity of the pandemic and suggested that the US is winning the battle against COVID-19.

6. Presidential crisis leadership in the USA

Managing emergency and crisis response has notably become a significant role of effective and efficient government in any forward-looking country (Waugh, 2000) as crises and disasters are bound to occur in any given society. The primary function of government is to ensure its citizens are not open to risk and vulnerability (Ansell, 2019). Anticipations of citizens on the presidential role in managing crises and disasters before 1950 were negligible and increased gradually, growing since the days of President Bill Clinton in the US Presidents, other elected personalities, and public leaders are progressively seen for protecting the lives and business life of the citizens in the USA (Kapucu et al., 2011). Crises are considered uncertain, changing and complex experiences and situations that give tangible tests for leaders to shape their led-government. Leadership failure to curb the influence of crises will largely slow down recovery and a transformation of life back to normalcy (Kapucu & Van Wart, 2008).

Before the eruption of the COVID-19 pandemic, presidents in the USA are proactive crisis managers except for the ones who has no competence and lacked time and experience to manage crises. Instead, they delegate it to their experts and appointees to manage the crises. The interactions and level of trust that must exist between the professional experts and the presidents are essential in the successful crisis response and recovery, and this can determine the variance between successful and unsuccessful presidential responses to natural disasters and crises (Kamarck, 2016). During the time of President Bill Clinton, the Federal Emergency Management Agency (FEMA) was one of the efficient agencies both nationally and globally via its effective administrator, James Lee Witt, but was in bad shape under President Bush.

Presidential crisis leadership demands a high level of competence to decide the requisite and urgencies of unanticipated shocks of crises; selection and appointment of adequate and qualified emergency and crisis managers with robust capacity and needed experience and the implementation of programs, roadmaps and structures in facilitating federal coordination (Kapucu *et al.*, 2011). Successful implementation of crisis response has an unswerving connection with reputation public perception and expert opinion.

Goss (2016) argued and highlighted the following in establishing the responsibilities of presidents in emergency and crisis response – personal experience, knowledge base, vision, appointments, address, personal time, dedication and compassion. Experiences of presidents either as elected personalities at the community level or as a citizen can influence their effectiveness in crisis management. Presidents who were formerly saddled with governorship experience in dealing with crises and emergencies typically performed well as presidents. Presidents may likely possess knowledge of emergency and crisis response, but they should equally understand the knowledge of emergency preparedness at the national level and key policies and practices. These are some basic experiences that President Trump lacked and makes his administration fail in the response to COVID-19. Consideration and emphasis on the appointment of competent public expertise and technocrats to life-threatening emergency and crisis response predict accomplishment for emergency governance. A president should have a roadmap and envision for emergency and crisis management situations.

In the time of Trump leadership era in the USA, a lot of federal agencies lost their reliability, particularly the Federal Bureau of Intelligence (FBI), the centre for disease and protection control (CDC), and the FEMA. President Trump appointed people that were hostile to the mission of the federal government into senior positions. These are people with no basic knowledge and competence to direct the agency and often time keep the positions unfilled and make the agency redundant. Trump used to advantage in office, resources and administrative fiats to destroy the federal bureaucratic system (Talbot, 2020) and defamed the reliability of public service professionals (Moynihan & Roberts, 2021). All of this offered an ominous framework for COVID-19 pandemic management.

The responsibility of the President in managing the crises is paramount in the country. His effectiveness in managing the crises is fundamental to his reputation and accomplishment in office (Sylves & Zoltan, 2007). Several incompetencies of Trump demonstrated above spell doom for his administration and thwarted his reputation as he was rather not effective in handling major crises. Possible solutions that would have salvaged Trump Leadership will be discussed in the next section of this analysis reporting.

7. Solution analysis and possible panacea to Trump's mismanagement in the $\ensuremath{\mathsf{USA}}$

Courageous crisis leaders have emerged for decades which portend that real leaders are both born as well as made through certain circumstances. The leadership skills to assist others to prevail and succeed over hard times are ever found in their deoxyribonucleic acid (DNA). Real leaders have the potential to forge ahead in the crisis period across the globe. Crisis leaders are crystallised when they manifest a few core behaviours that inspire and motivate others through adversity period. The following germane points are necessary but not sufficient points to note for real leaders who wanted to forge ahead in crisis moments and tribulations.

(1) Crisis decision-making: Decisive and informed decision-making is the core competence of an effective leader during a crisis period (Blondin & Boin, 2020). Inadequate and incompetent decision-makers will spur the adverse influence of the crisis response situation. A competent leader will often draw experiences from previous crises and disasters to better prepare policies, plans and execution of roadmaps and frameworks (Kamarck, 2016). President Trump has no competence to draw such experience and lessons taken from prior disasters in the USA.

Such experience learned was not apparent in the federal government's fight against COVID-19 in the USA.

Making an informed decision is not susceptible to only gathering data by the government but ability and possession of foresight to gather essential data albinitio and the professional expertise that will positively influence the decision-making procedure to impact the delivery of good governance to the citizens in the time of crisis. The Obama leadership planned a pandemic and crisis preparedness blueprint for President Trump-led administration and conducted a handing-over pandemic training programme. Out of 30 officials selected in Trump's cabinet for participation in the training, only eight endured when the COVID-19 pandemic erupted, and none of them had public health experience or knowledge to fight the crisis. This shows a reflection of instability within Trump's appointments (Goodman & Schulkin, 2020). Crisis leadership requires prompt recognition of the threat and intellectual capacity to its severity (Comfort, Kapucu, Ko, Menoni, & Siciliano, 2020; Weick & Sutcliffe, 2011). Prompt attention to take decisive decisions by President Trump would have led to coordination with executive agencies in focusing on the essential roles of crisis response in the fight against COVID-19. However, Trump's leadership misfired and failed to exploit pointers regarding the seriousness of COVID-19, including intelligence reports passed in late November 2019 which informed and cautioned that the virus could be catastrophic (Moynihan, 2020). Nevertheless, the National Security Council was not positioned adequately for the task of this cautioning, Trump's National Security Advisor, John Bolton, disrupted the National Security Council Directorate for Global Health Security and Biodefense and dumped members of the National Security Council with professional ideas in global health security and emergency preparedness. The quality decision involves rationality which has to do with evidence-based process and premise on the application of scientific frameworks where appropriate (Ansell, Boin, & Keller, 2010). Such frameworks were not found in Trump's leadership style. For Trump to be successive in his fight against COVID-19, he needs to employ rationality in his decision-making process.

The quality of decision mirrors the extent to which skill and competence are appreciated in relation to several values like political loyalty. Trump's leadership response to the COVID-19 pandemic would have been improved if it did not occur at a time when his re-election campaign was visible (Lipton *et al.*, 2020). The preceding year that COVID-19 erupted was an electioneering year for Trump, but the pandemic surfaced at the critical period when his first term was about to be rounded off and at the same time when his first impeachment issue was concluded. Real leaders in the crisis moment must acknowledge peoples' fear and ensure to encourage them on how to resolve it in a tangible manner, not just mere or false hope. The USA has strength in meeting the COVID-19, which should be another advantage for President Trump to manage the crisis. It can never be resolved by just talking about it, but act and act spontaneously on the crisis response. Trump's quality decision-making is essential during the crisis period. One possible corrective measure that Trump would have trailed was to apply the poliheuristic model of decision-making. Poliheuristic theory of decision-making is an integration of cognitive and rational methods to make an informed decision.

(2) Criss communication: Communication brings together leaders and followers in the public in a shared platform. Effective communication exists when the sender of information reels out the messages to receivers without disruption or distortion in any form. Thorough communication and feedback platforms encourage multiple actors in crisis to establish collective mental patterns or philosophies, learn and familiarise themselves with changing situations, and a rigid network (Littlefield & Quenette, 2007). Skills and competence to communicate in public are important for crisis leadership. Some information can communicate empathy while some may send

wrong and negative signals to the public, especially to presidential crisis leaders (Goss, 2016). The ability of a real leader to deliver communication that will positively impact the public perception in the time of crisis response is essential which is what President Donald Trump is needed to possess during COVID-19 in the USA (Ciulla, 2010). This involves gathering critical information, arranging it and disseminating it with core agencies saddled with responsibilities in the pandemic moment. At the same time, it is important to communicate with the public in other to ameliorate the effect of the risk involved in the pandemic (Boin, t'Hart, McConnel, & Preston, 2010). By decisive communication during the pandemic, it will build public confidence in President Trump and also convince US citizens to take action to jettison adverse outcomes of the pandemic (Ulmer, Sellnow, & Seeger, 2007). Effective and intensive crisis communication in the fight against the pandemic offers chance for the President to communicate to the US citizens in political persuasion. The reliability of the information and the sender is equally quintessential to positively relieving the people of the pandemic. This is the point at which Trump lost the battle; the communication approach to COVID-19 was actually where Trump notably failed. A president that can command the attention will engage the public to edge the threat, establish a means of national unity and joint sacrifice, and organise uncomplicated public health communication. Trump would have encouraged and stimulated positive information dissemination concerning how to flatten the COVID-19 curve.

Coordination and collaboration: Coordination and collaboration are described as the promotion of several meaningful courses of actions embarked upon concurrently to accomplish a common goal in crisis response. Collaboration skills are fundamental for effective crisis leadership, exclusively for a novel crisis in a geopolitical and international system and collective governance approach (Blondin & Boin, 2020; Moynihan, 2009). President Trump needed to engage in partnership with international foreign experts in his response to the COVID-19 fight. This would have facilitated resource sharing, responsibility assignments and task alignment within corporate organisations for the Americans in the wake of COVID-19 (Crosby & Bryson, 2010; Moynihan, 2009; Sadiq, Kapucu, & Hu, 2021). Coordination and collaboration will equally attract non-profit and private organisations (Kapucu & Hu, 2020; Kapucu & Moynihan, 2021). In managing COVID-19, each nation was challenged for their prompt decisions in terms of implementing national roadmaps and policies and aligning their country's responsive approach to unparallel requirements of the pandemic to reduce it or curtail the spread of the virus and assist the global community (Comfort et al., 2020). Foreign transboundary crises/pandemics need alliance and partnership at a cross-national stage. Such procedures of strategic alliance ran at odds with Trump's independence culture in the global perspective. Trump massively criticised the WHO, tasked with organising the global response, blaming the health organisation for conniving and bowing to Chinese government interest and formally removed the USA from the WHO in July 2020. This was an indication that Trump did not believe in the WHO as a health organisation, and he ceased collaboration with the body.

Protracted coordination with the US federal government agencies, states and local governments for allocation of medical resources, supply chain stability and the quest for vaccinations instead of immediate remedy led to failure in Trump's leadership response against the COVID-19 pandemic struggle. Trump often was seen having conflicts with governors, particularly ones from the democratic states. He did not only promote protests of their strict lockdown, but he also criticised them for a whirlwind spread of the virus. An example to buttress this is when Trump said, "I do not take responsibility at all" when he

was queried concerning the dragging test capacity. He rather blamed democratic governors for inadequate testing resources, speaking to frustrate the US with the prevailing illness ad deaths. Trump appointed his son-in-law, Jared Kushner, to be placed in charge of the shadow task force that worked with states and procured protective health items and speed-up testing. While those who have unfettered access to Kushner was the one who attended and the process was in transient mode (Abutaleb, Parker, Dawsey, & Rucker, 2020). Trump himself seemed to hinder and oppose national COVID-19 testing, saying at one of his rallies, "You're going to find more cases, so I said to my people, slow down the testing, please".

(4) Crisis control: Leadership in crisis communication, strategic alliance and partnership lead to accomplished crisis control. Control entails an increased capacity by coordinating the existing capacity and resources to reduce the threat and sustain societal normal life operations. The pandemic response called for legal justice, global management and partnership to curb the spread of the virus. Control prescribes obtaining more reasonable homeostasis between lessening the spread of the virus, building healthcare facilities and maintaining a level of saved economic and social pursuits (Comfort et al., 2020). A firm emergency management system would have been efficiently encouraged in controlling the spread of the pandemic. However, this was not put into use by Trump's leadership. He never had control over the pandemic but was flippantly talking from the White House. Towards the expiration of his tenure, a lot of citizens than usual were dying at geometric progression in the US every day. This lack of control mechanism was deepened by White House Officials downplaying federal public health directives by having mass movement campaign activities with the multitude of American citizens by coming out en-mass, failing to adhere to COVID-19 protocols and rules, and having indoor White House activities. This led every member of Trump's family to test positive to COVID-19 and also several other staff members in the White House as well as some people in Trump's campaign team. A reception in the White House to nominate Supreme Court and an election night party seems to super spread activities for the pandemic.

8. Conclusion

President Trump got it wrong ab-initio, although with fair and good intentions. He was courageous to have escaped the impeachment saga in the US but lacked the audacity of resilience that would have probably helped him in surviving the crisis moment, especially the pandemic period. His belief was to do away with those he perceived as foes in America while he never had the understanding that in politics, a political leader needed to bring together both his enemies, allies, friends and opponents if successful tenure is to be achieved. He was found culpable of several irregularities in electing people to head or chair peculiar political positions. Appointments of personalities that were never fit as professionals to manage the crisis reigned supreme during the Trump leadership era. Crisis communication of President Trump was utterly poor to the US citizens, and in terms of crisis control, he was not in full control of the situation. There is no challenge that cannot be surmounted in life; Trump needed to acknowledge the fears of the US citizens and encourage them to resolve them promptly. The responsibility of Trump as a leader is to give the US citizens brutal honesty, an obvious record of the issues that the Americans were experiencing, credible shared optimism and required resources to fulfil the threats of the pandemic. Finally, not only Trump but leaders and crisis leadership needs resilience, willpower, cohesion, strength, collective drive, kindness and humanity to sustain the crisis.

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9. Implications for practice

Several takeaways learnt from the pandemic will be useful for the government of the world. The first practical implication is that there is no single response approach to crisis management. Responses and strategies differ based on the environment and region, even within the government, there will be no one best approach. The second implication is that responses may be required to modify over time. As the COVID-19 surge progressed, certain responses had to be introduced. Responses and strategies that seem effective at the start of the crisis may prove to be a failure at later stages. Monitoring and knowledge sharing are important in managing a crisis. Lastly, the COVID-19 global pandemic has showcased the value of having a variety of response strategies available. Value-based leadership and contingency theories point out that diversity is required in other allow selection that will maintain fit with the environment.

References

- Abutaleb, Y. (2020a). The US was beset by denial and dysfunction as the coronavirus raged. *The Washington Post* (4 April).
- Abutaleb, Y. (2020b). Denial and dysfunction plaqued the US government as coronavirus raged. *The Washington Post* (4 April).
- Abutaleb, Y., Parker, A., Dawsey, J., & Rucker, P. (2020). The inside story of how Trump's denial, mismanagement, and magical thinking led to the pandemic's dark winter. *Washington Post* (December 19).
- Ansell, C. (2019). The protective state. New York, NY: Palgrave.
- Ansell, C., Boin, A., & Keller, A. (2010). Managing trans-boundary crisis: Identifying the building blocks of an effective response system. *Journal of Contingencies and Crisis Management*, 18(4), 196–207.
- Bao, Y., & Li, C. (2019). From moral leadership to positive work behaviours: The mediating roles of value congruence and leader-member exchange. Frontiers of Business Research in China, 13(1), 6–15.
- BBC (2020). Trump names VP Pence to lead coronavirus response. available from: https://www.bbc.com/news/world-us-canada-51654494 (accessed 24 January 2020).
- Blake, A. (2020). 5 takeaways from coronavirus whistleblower Rick Bright's testimony, *The Washington Post.* available from: https://www.washingtonpost.com/politics/2020/05/14/3-takeawayscoronavirus-whistleblower-rick-brights-testimony/
- Blondin, D., & Boin, A. (2020). Cooperation in the face of transboundary crisis: A framework for analysis. Perspectives on Public Management and Governance, Cambridge University Press, 3(3), 197–209. doi: 10.1093/ppmgov/gyz031.
- Boin, A., t'Hart, P. T., McConnell, A., & Preston, T. (2010). Leadership style, crisis response and blame management: The case of Hurricane Katrina. *Public Administration*, 88(3), 706–723.
- Carrrel, P., & Andreas, R. (2020). Germany tries to halt US interest in firms working on coronavirus vaccine. Reuters. 15 March.
- Cheng, Y., & Fisk, A. (2022). Contingency theory informs relationship management: Exploring the contingent organization-public relationships (COPR) in a crisis of Mainland China. *Public Relations Review*, 48(2). doi: 10.1016/j.pubrev.2022.1021.
- Childs, M., Turner, T., Sneed, C., & Berry, A. (2022). A contingency theory approach to understanding small retail business continuity during COVID-19. Family and Consumer Science Research Journal, 50(3), 216–230. doi: 10.1111/fcsr.12434.
- Ciulla, J. B. (2010). Being there: Why leaders should not 'Fiddle' while Rome burns. Presidential Studies Quarterly, 40(1), 38–56.
- Comfort, L. K., Kapucu, N., Ko, K., Menoni, S., & Siciliano, M. (2020). Crisis decision making on a global Scale: Transition from cognition to collective action under threat of COVID-19. *Public Administration Review*, 80(4), 616–622. doi: 10.1111/puar.13252.

- Crosby, B., & Bryson, J. M. (2010). Integrative leadership and the creation and maintenance of crosssector collaboration. The Leadership Quarterly, 21(2), 211–230.
- Cucinotta, T., & Vanelli, G. (2020). WHO declares COVID-19 a pandemic. *Acta Bio-Medica: Atenei Parmensis*, 5(3), 157–165.
- Dale, D. (2020). Fact check: Trump tries to erase the memory of him downplaying the coronavirus. CNN (17 March).
- Della Corte, V., Del Gaudio, G., Sepe, F., & Zamparelli, G. (2017). The role and implications of values-based leadership. *Journal of Organisational Transformation and Social Change*, 14(3), 187–213.
- Eban, K. (2020). As the Trump administration debated travel restrictions, thousands streamed in from China. Reuter, 5 April.
- Epstein, K., & Sonam, S. (2020). A timeline of how years of missteps and budget cuts undermined the Trump administration's preparedness for COVID-19. Business Insider. 7 April.
- Eder, S. (2020). 430,000 people have travelled from China to US since coronavirus surfaced. *New York Times* (4 April).
- Flaherty, A. (2020). Trump faslely blames Obama admin for hurting rollout of coronavirus test kits: Fact check, ABC News (5 March).
- Goodman, R., & Schulkin, D. (2020). Timeline of the coronavirus pandemic and U.S. response. available from: https://www.justsecurity.org/69650/timeline-of-the-coronavirus-pandemic-and-u-s-response/ (accessed 24 January 2020).
- Gopalakrishnan, S., & Ganeshkumar, S. (2013). Systematic reviews and meta-analysis: Understanding the best evidence in primary healthcare. *Journal of Family Medicine and Primary Care*, 2(1), 9–14.
- Goss, K. C. (2016). Importance of presidential leadership in emergency management. available from: https://www.domesticpreparedness.com/commentary/importance-of-presidential-leadership-in-emergency-management/ (accessed 20 January 2022).
- Gozdecka, D. A. (2021). Human rights during the pandemic: Covid-19 and securitisation of health. Nordic Journal of Human Rights, 39(3), 205–223. doi: 10.1080/18918131.2021.1965367.
- Haberman, M. (2020). Trump adviser Peter Navarro wanrned of coronavirus pandemic in January. New York Times (6 April).
- Hanrieder, T., & Kreuder-Sonnen, C. (2014). WHO decides on the exception? Securitization and emergency governance in global health. Security Dialogue, 45(4), 331–348.
- Harris, S. (2020). Us intelligence reports from January and February warned about a likely pandemic. The Washington Post (21 March).
- Hester, J. P. (2019). Values-based leadership in a time of values Confusion. The Journal of Values-Based Leadership, 12(1), 7–15.
- Kamarck, E. (2016). Why presidents fail: And how they can succeed again. Washington, DC: The Brookings Institutions.
- Kapucu, N., & Hu, Q. (2020). Network governance: Concepts, theories, and applications. New York, NY: Routledge.
- Kapucu, N., & Moynihan, D. (2021). Trump's (mis)management of the COVID-19 pandemic in the US. Policy Studies, 42(5-6), 592–610. doi: 10.1080/01442872.2021.1931671.
- Kapucu, N., & Van Wart, M. (2008). Making matters worse: Anatomy of leadership failures in catastrophic events. Administration and Society, 40(7), 711–740.
- Kapucu, N., Van Wart, M., Sylves, R., & Yuldhasev, F. (2011). U.S. Presidents and their roles in emergency management and disaster policy 1950-2009. Risk, Hazards & Crisis in Public Policy, 2(3), 4–10.
- Karakas, F., & Sarigollu, E. (2013). The role of leadership in creating virtuous and compassionate organizations: Narratives of benevolent leadership in an Anatolian tiger. *Journal of Business Ethics*, 113(4), 663–678.

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- Lin, C., Jhang, C., & Wang, Y. (2021). Learning value-based leadership in teams: The moderation of emotional regulation. Review of Managerial Science, 1–22. doi: 10.1007/s11846-021-00483-8.
- Lipton, E. (2020). He could have seen what was coming: Behind Trump's failure on the virus. The Washington Post (11 April).
- Lipton, E., Goodnough, A., Shear, A., Twohey, M., Mandavilli, A., Fink, S., & Walker, M. (2020). The CDC waited "its entire existence for this moment." What went wrong? New York Times, June 3.
- Littlefield, R. S., & Quenette, A. M. (2007). Crisis leadership and hurricane Katrina: The portrayal of authority by the media in natural disasters. *Journal of Applied Communication Research*, 25(1), 26–47.
- Maak, T., Pless, N. M., & Wohlgezogen, F. (2021). The fault lines of leadership: Lessons from the global Covid-19 crisis. *Journal of Change Management*, 21(1), 66–86. doi: 10.1080/14697017.2021.1861724.
- McLaughlin, E., & Steve, A. (2020). CDC officials warn Americans it's not a question of if coronavirus will spread, but when. available from: https://edition.cnn.com/2020/02/25/health/coronavirus-us-american-cases/index.html (accessed 24 January 2022).
- Moynihan, D. P. (2009). The network governance of crisis response: Case studies of incident command systems. *Journal of Public Administration Research and Theory*, 19(4), 895–915.
- Moynihan, D. P. (2020). Populism and the deep state: the attack on public service under Trump. 21 May 2020. doi: 10.2139/ssrn.3607309. available from SSRN: https://ssrn.com/abstract=3607309.
- Moynihan, D. P., & Roberts, A. (2021). Dysfunction by design: Trumpism as administrative doctrine. Forthcoming in Public Administration Review. doi: 10.1111/padm.12717.
- Niculescu, D. C. (2014). The learning experience in a value-based leadership. Business Excellence and Management, 4(4), 58–69.
- Oprysko, C., & Kyle, C. (2020). Recordsing shows senate intel warned of coronavirus distruption in private weeks ahead of time. Politico. 19th March.
- Ordonez, F. (2020). Watch: President Trump declares national emergency amid the coronavirus pandemic. NPR. 13 March.
- Orr, G. (2020). Trump ratchets up coronavirus battle with European travel ban. Politico, 11 March.
- Park, S. (2020). Size matters: Towards a contingency theory of diversity effects on performance. Public Performance and Management Review, 43(2), 278–303.
- Paton, J. (2020). The US likely to get Sanofi vaccine first if it succeeds. Bloomerg. 13 May.
- Prasad, M. G. (2016). Study of an extant of applicability of leadership theories in different culture clusters: An analysis through the lens of GLOBE Project. African Journal of Business Management, 10(21), 522–528.
- Robinson, C. (2017). Tracing and explaining securitization: Social mechanisms, process tracing and the securitization of irregular migration. Security Dialogue, 48(6), 505–523.
- Sadiq, A., Kapucu, N., & Hu, Q. (2021). Crisis leadership during COVID-19: The role of Governors in the United States. *International Journal of Public Leadership*. doi: 10.1108/IJPL-08-2020-0071.
- Serhan, F. (2020). The case against waging 'war' on the coronavirus. The Atlantic, (31 March 2020). available from: https://www.theatlantic.com/international/archive/2020/03/war-metaphor-coronavirus/609049/ (accessed 18 August 2022).
- Shaker, M., Oppenheimer, J., Grayson, M., Stukus, D., Hartog, N., Hsieh, W. Y., ... & Greenhawt, M. (2020). COVID-19: Pandemic contingency planning for the allergy and immunology clinic. The Journal of Allergy and Clinical Immunology: In Practice, 8(5), 1477–1488.e5. doi: 10.1016/j.jaip. 2020.03.012.
- Steinhauer, J. (2020). US will drop limits in Virus testing, Pence says. New York Times (3 March).
- Sylves, R., & Zoltan, I. B. (2007). Presidential disaster declaration decisions, 1953-2003: What influences odds of approval. State and Local Government Review, 39(1), 3–15.

- Talbot, C. (2020). Populists in power: The impact on public administration. Civil Service World, available from: https://www.civilserviceworld.com/in-depth/article/populists-in-power-the-impact-on-public-administration (accessed 21 August 2022).
- Tan, J. X., Zawawi, D., & Aziz, Y. A. (2016). Benevolent leadership and its organisational outcomes: A social exchange theory perspective. *International Journal of Economic Management*, 10(2), 343–364.
- Torres, E. (2020). A timeline of Cuomo's and Trump's responses to the coronavirus outbreak. ABC News (3 April).
- Ulmer, U., Sellnow, T., & Seeger, M. (2007). Effective crisis communication: Moving from crisis to opportunity. Thousand Oaks, CA: Sage.
- United Nations (2020). Comprehensive response to COVID-19: Saving lives, protecting societies, recovering better. WHO, 'COVID-19 Preparedness and Response Progress Report 1 February to 30 June 2020'.
- Van Rythoven, E. (2015). Learning to feel, learning to fear? Emotions, imaginaries, and limits in the politics of securitization. Security Dialogue, 46(5), 458–475.
- von Eiff, M. C., von Eiff, W., & Ghanem, M. (2022). Value-based leadership in turbulent times: Lessons from the corona crisis and recommendations for post-pandemic management in the health sector. *Leadership, Education, Personality: An Interdisciplinary Journal*, 3, 157–169. doi: 10.1365/s42681-022-00029-w.
- Wæver, O. (1995). Securitization and desecuritization. In Lipschutz, R. D. (Ed.), On Security (pp. 46–86).
 NY: Columbia University Press.
- Watt, G. (2017). The right to privacy and the future of mass surveillance. *The International Journal of Human Rights*, 21, 773–781.
- Waugh, W. L. (2000). Living with hazards, dealing with disasters: An introduction to emergency management. Armonk, New York: M.E. Sharpe.
- Weick, K. E., & Sutcliffe, K. M. (2011). Managing the unexpected: Resilient performance in an age of uncertainty. Hoboken, NJ: John Wiley.
- Williams, P., Ashill, N., & Naumann, E. (2017). Towards a contingency theory of CRM adoption. Journal of Strategic Marketing, 25(5-6), 454–474.

Further reading

- Abutaleb, Y., & McGinley, L. (2020). Ousted vaccine official alleges he was demoted for prioritizing "science and safety". *The Washington Post.* available from: https://www.washingtonpost (assessed 20 January 2022).
- Kapucu, N. (2006). Interagency communication networks during emergencies: Boundary spanners in multiagency coordination. *The American Review of Public Administration*, 36(2), 207–225.
- Moynihan, D. P. (2012). Extra-Network organizational reputation and blame avoidance in networks: The Hurricane Katrina Example. *Governance*, 25(4), 567–588.

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