The Slovak Republic - the first country in the world to undergo mass population testing for the COVID-19 disease.

A triumphant success and an experiment worth repeating, or a risky political ploy?

The advantages, disadvantages and risks of mass testing using antigen tests.
MASS COVID-19 TESTING IN SLOVAK REPUBLIC
The tale of a risky political ploy
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The Slovak Republic, with its nearly 5 and half million people, is a relatively small central European country with an open and export-oriented economy. Since 2004 it has been a member of the European Union and the North Atlantic alliance, and thus belongs to the wider international community of free, developed and democratic countries. In spring 2020, Slovakia, as much as any other country, was hit by the coronavirus SARS-CoV-2 pandemic, known to cause the COVID-19 infectious disease, and was forced to seek the most effective means of fighting this new threat. It became the first country in the world to attempt mass population testing for this disease, as the last resort before a final, country-wide lockdown. On top of the pandemic itself, the situation from the outbreak had been made more difficult by the fact that on February 29th Slovakia held its National Council elections. These resulted primarily in the creation of a coalition government made up of liberal and conservative right-wing political parties led by the controversial figure of Igor Matovič, and the end of the former political hegemony of the social democratic Smer-SD political party. As a result of these elections, the era of dominance of the former three-time prime minister Robert Fico also came to an end.
The first confirmed case of the SARS-CoV-2 coronavirus appeared in Slovakia on March 6, 2020, under the previous government of the social democratic prime minister Peter Pellegrini of the centre-left Smer-SD political party. This party had been in power since 2016, in a coalition with Andrej Danko’s right wing Slovak National Party (SNS) and the liberal-conservative Most-Híd party. On March 16th, 2020, the first radical measures to prevent the spread of the novel coronavirus were adopted by Peter Pellegrini’s government. These included: the declaration of a state of emergency; closure of all stores except grocery stores, pharmacies and internet stores; the obligation for shopping mall operators not to close the exempted stores and a ban on visiting catering venues. The adopted epidemiological measures initially received the wide support of the Slovak population, well-aware of the epidemiological threat and its potential consequences.

In March 2020, the interest of the Slovak Republic nationals living or finding themselves abroad in returning to the homeland grew rapidly, mainly caused by the increase in positive cases and the cancellation of flight, road and rail connections. Therefore, during a session on March 15th, 2020, the government of the Slovak Republic decided to repatriate them. People returning to Slovakia from abroad had to enter a 14-day state-mandated quarantine on premises designated by the Ministry of Interior of the Slovak Republic. Since the outbreak and spread of the pandemic, Slovakia had been carrying out SARS-CoV-2 coronavirus PCR laboratory tests across the entire country. Their number had increased in line with the worsening of the epidemiological situation.

Strict epidemiological practices and nationwide measures adopted from the onset of the pandemic kept the number of confirmed cases, from the spring to the end of August 2020, relatively low. This was supported by strict compliance driven by the general trust of the people, statutory bodies and other public and municipal organisations. Consequently, Slovakia has gained international recognition for the actions of its government and other public and state authorities during the first wave of the pandemic. Considering the favourable epidemiological situation, on June 13th, 2020, the state of emergency, declared by the government on March 16th, 2020, was suspended. However, the emergency situation in Slovakia has remained extant.

Compared to its neighbouring countries, the epidemiological situation in Slovakia has been very favourable, stabilised, sustainable and under control of the epidemiological authorities and the public health prevention system. The number of confirmed positive cases and deaths per 100 thousand people has been very low in Slovakia, compared to other developed countries in Europe and the rest of the world. During the summer months, the epidemiological situation in Slovakia was not overly serious, as a result of the lower foreign demand in industry, especially in the automotive sector. However, the economic and social situation in tourism, gastronomy, culture and sport worsened and the Slovak economy this year is expected to shrink by 7.5% as a result of the pandemic, according to the current European Commission prognosis.

At the beginning of September 2020, the epidemiological situation in Slovakia began to gradually deteriorate. With a gradual loosening of the measures (e.g. free movement of people across the borders etc.) before and during the summer season, confirmed positive coronavirus cases have started to rise rapidly and dynamically. The rise is inline with the warnings of the epidemiologists prior to the summer about the likely coming of a second pandemic wave, due predominantly to the open external borders, the beginning of the school year and the return of people from summer vacations abroad.

Since September, the government has not adopted any nationwide measures to prevent the spread of the pandemic in Slovakia. Towards the end of September, new records in the daily increases of positively tested people were being reported; these had, however, not yet crossed the threshold of 1000 positive tests per day. The failure to adopt preventive measures during the summer has now...
become one of the main sources of recrimination for such a strong second wave hitting the country.

On October 1st, 2020, the government therefore once again declared a state of emergency and new epidemiological measures have come into effect. The epidemiological situation began to deteriorate rapidly deteriorating at this time. On October 7th, 2020, the threshold of 1000 new positive cases per day was crossed for the first time (with 9518 PCR laboratory tests being carried out). Only one week later, on October 15th, 2020, the next threshold of 2000 new coronavirus cases per day was crossed (with 14,010 PCR tests being carried out), and 10 days later the threshold of 3000 people tested positive for COVID-19 per day was also crossed. Along with the increasing number of people testing positive in Slovakia, the number of deaths from the pulmonary form of COVID-19 likewise begun to increase rapidly. This was the greatest cause of concern about the spreading pandemic and the underprepared health care system had been sounding the alarm not only due to insufficient hospital equipment, but also due to a lack of qualified personnel.
The tale of the SARS-CoV-2 coronavirus pandemic in the Slovak Republic has its own political dimension, which is key to understanding the overall, current social situation. On February 29th, prior to the arrival of the pandemic in the country, Slovakia held its National Council elections. These parliamentary elections brought about a complete change in the structure of the partisan system and consequently a relatively radical redistribution of power in the country. The liberal-conservative party of Igor Matovič OĽaNO won the elections and created a coalition government with additional right-wing parties: (1.) SME RODINA; (2.) Sloboda s Solidarita and (3.) ZA ĽUDÍ.

While the winning party OĽaNO did not have a clear and constructive political platform or ambitions, general frustration and weariness from politics, dissatisfaction with the previous political representation (primarily Smer-SD a SNS) and their corrupt behaviour were key factors that led to contributing to the victory of OĽaNO in these elections. The party leader and the prime minister Igor Matovič has become the main figure in the fight against the spread of the SARS-CoV-2 coronavirus pandemic in Slovakia.

Responsibility for the adopted economic measures resulting from the ongoing pandemic in Slovakia lies with the deputy prime minister for economics, and the neoliberal economist Richard Sulík, leader of the Sloboda a Solidarita party. These two primary actors, responsible for mitigating the consequences of the pandemic, are in an open political conflict. This fact, among others, lowers public confidence in the government.

On October 17th 2020, prime minister Igor Matovič announced at a press conference that mass testing of the entire population of the Slovak Republic, using the SARS-CoV-2 coronavirus antigen test, had been (supposedly) under consideration by the government for the previous three weeks; this information had, however, been kept secret. This course of action in relation to the pandemic was to be conducted for the first and (probably) the last time on a nationwide level.

This experiment, under the name of operation „Mutual responsibility“ took place on two consecutive weekends, from October 31st to November 1st and from November 7th to 8th 2020. The mass testing was logistically organised by the Armed Forces of the Slovak Republic in cooperation with the Police Force, the Government of the Slovak Republic and departments of the regional and local governments. Nearly 5000 testing sites throughout the entire country were set up for the purposes of mass testing.

The government of the Slovak Republic, via the Administration of the State Material Reserves, ordered 13 million antigen tests at €4 per unit (without VAT) for the purposes of the testing. In total, the state paid €52.3 million for the tests (without VAT). The testing was free for everyone, results were available within 15 to 30 minutes of the test and the result was printed on a certificate in a sealed envelope handed directly to the testee.

Mass testing of the entire population was preceded by pilot testing from October 23rd to 25th in the regions most severely hit by the pandemic in terms of the highest rate of confirmed coronavirus cases among the population. The pilot testing was carried out in 4 smaller districts in terms of population (Tvrdošín, Námestovo, Dolný Kubín and Bardejov), out of a total of 79 districts. 140 945 people were tested during the pilot testing, of which 5 594, (3.97 %), tested positive. Following the testing, an estimated 10 % of members of the Armed Forces of the Slovak Republic were put into quarantine.

The first round of the mass testing (October 31 and November 1 2020) faced many challenges. There was the unwillingness of the people to undergo testing voluntarily, but also social media hoaxes that went as far as to claim, for instance, that the goal of the operation was to implant the population with microchips. The concern was not only about the many organizational and logistical complications (the lack of medical personnel, insufficient tests, certificates, protective equipment and inadequate disinfection etc.), but also from the willingness of the people to get
tested. This situation resulted in a switch from voluntary testing to what is known as conditional testing. The prime minister not only restricted workplace presence but also freedom of movement in the general population, to those with a negative test result (nicknamed „the blue card“). The people were given a choice to either get tested or enter a 10-day quarantine otherwise they would not be allowed to enter their workplace or move freely in public. Violations of this regulation were met with a €1,659 penalty. A number of legal issues have been raised in relation to this situation, from the suppression of personal freedom to personal data protection because of the requirement to share the test certificate with an employer. Despite these issues and concerns about the social boycotting of the operation, nearly 3.6 mil. out of the expected 3.8 mil. people took part, approximately 95% (with an exception for children under 10 and people over 65 years of age).

Almost 40 thousand people were involved in organizing the first round of mass testing, including 50 Austrian and 200 Hungarian military medical personnel because Slovakia had not managed to secure sufficient personnel in such a short preparation period. A significant number of the medical staff involved went into quarantine following the first round of mass testing. This was because the testing had not been carried out under ideal hygienic, laboratory conditions.

The government has proclaimed the result of the testing „an outstanding success“ and certain ministers of the Matovič government have given it a populist grade of „A+“. It is questionable whether it can be called a triumphant success, however, it is true that the concerns of opposition politicians (mainly Robert Fico and Peter Pellegrini) and the president of the Slovak Republic Zuzana Čaputová, did not come true. One day before the testing on October 30th, 2020, they had called the mass testing impossible due to insufficient preparedness in terms of the number of testing sites and lack of medical personnel.

The second round of mass testing (November 7 and 8, 2020) was not carried out throughout the entire Slovak Republic as had been announced initially. It only took place in districts that had recorded more than 0.7 % positive cases during the first round. These 45 districts (out of a total of 79), were marked as „red“. The testing sites were provisioned in the same way as during the first round of testing. The second round did not take place in the other, „green“ districts; however, 20 testing sites were set up in these for people to get tested on a voluntary basis.

This change went into effect after a council of experts advised the government against the second round of mass population testing and recommended testing using the antigen tests only in the districts with the highest confirmed positive rates, i.e. 1.5 % and above, during the first round of testing. Prime minister Igor Matovič, despite the expert advice, pushed through with the 0.7 % cut-off. The council of experts recommended targeted testing in local epicentres of the pandemic spread and testing of population groups at risk of possible infection spread, as an alternative to the second round of mass population testing. 2044855 people took part in the second round of mass testing and 13,509 positive cases were identified. The positive rate was 0.66 %. The minister of health Krajič called the testing a success following the second round, considering it managed to stop the uncontrolled spreading of the virus. In the week right after the second round of testing, the estimated number of the infected was projected to be approximately 4000 per day, while the re-testing has maintained the number of daily increases to circa 2000.

In general, the mass testing initiated by Igor Matovič garnered low support from the general public and experts alike. Representatives of the Slovak Medical Chamber, at a press conference on October 28th, 2020, asked the government to stop the mass testing as the reason behind it was not an expert one, but a political one. They likewise labelled the mass testing as „extortion“ because the people had not had a choice.

One day later, on October 29th 2020, the Society of General Practitioners of Slovakia, wrote in an open letter addressed to the minister of health of the Slovak Republic, Marek Krajič, that the actions of the government of the Slovak Republic, including the constantly changing conditions, under-preparedness and the visibly elevating pressure on the Slovak people, raised many questions and lowered the level of trust towards the leadership of the country. According to a statement by the society, they are concerned with the medical significance of travel, the test result reliability, as well as the legal framework of protecting citizens’ rights. Other professional authorities have also spoken against the mass testing.

The political opposition likewise voiced concerns over the mass testing process. The centre-left Hlas-SD party mainly appealed people to avoid participating, not only due to the inefficiency of the tests, but also due to issues related to the legitimacy of the obligation to participate, as it was under threat of sanctions.
The mass testing of the entire population using the COVID-19 antigen tests carried out in Slovakia over two consecutive weekends succeeded in removing almost 45,000 infectious cases from circulation. If we consider that the accuracy of the antigen tests is comparable to one third of all the infected cases, it is truly controversial to speak of a success or a failure. The cost effectiveness of the whole operation has also to be considered as each positive result has cost approximately € 10,000.

Mass population testing thus carries many risks, including a relatively high probability of spreading the virus causing the COVID-19 disease at the testing sites and the low reliability of the antigen tests because the low sensitivity and specificity of the testing method can lead to inaccurate results. Also to be considered are the health and safety risks, the large organizational and logistical requirements, the staffing of the testing sites with qualified medical personnel, the financial costs of the project and the legally contentious issues surrounding the voluntary nature of the testing. In addition, there are wider social issues such as the radicalisation and fragmentation of the society.

According to epidemiologists, the results of the antigen tests, although inexpensive and quick, are more accurate in areas with a higher concentration of infected individuals, while in areas with a lower incidence rate (the number of new cases), they prove to be ineffective. The testing of people should be a means to fight against the spread of the pandemic, not an end in itself. Unless antigen tests are used concurrently with PCR tests, their application for mass testing is not recommended by the World Health Organization.

By using antigen tests for mass testing, there is a high risk of false positive and false negative results that could lead to infected people spreading the disease and others being needlessly kept in quarantine, or in isolation. This fact causes frustration, fear, resistance and discontent among the population. Additionally, there was a complete absence of clear, constructive and credible communication between the political representation and the general public about the strategy, goals and procedures of the mass testing in Slovakia.
In the case of the Slovak Republic, this was a risky political ploy by prime minister Igor Matovič. He is currently facing the growing distrust of the Slovak general public and decreasing popularity. Matovič gambled his chance of remaining as prime minister on the success of the mass testing experiment, which was in response to his falling voter popularity. The project was not only affected by internal political circumstances, but also by his efforts to improve his image and reputation on the international stage. The public mood, determined largely by the pandemic itself, was also reflected in the voter preference polls, in which the party of the prime minister Igor Matovič has fallen from the 23% at the onset of the pandemic in March to circa 15% in October. The party of the former prime minister Peter Pellegrini, Hlas-SD, established in September, has been enjoying great popularity, jumping to the top spot in the polls with almost 19% over the course of two months.

The experience with the COVID-19 pandemic shows us that simple, miraculous solutions do not exist. A key role in the fight against the spread of the pandemic is played by the discipline and responsibility of the people, based on trust in the political representation, the national epidemiological authorities and the wider scientific community (doctors, virologists, social psychologists, respiratory disease experts, public health management experts, etc.).

A constructive and predictable approach by the government and regional and local authorities (local governments) based on scientific knowledge and available data is also essential. As we have already pointed out, clear, professional and credible communication between the government and the population is crucial. This in turn leads to the willingness of citizens to comply with the epidemiological measures implemented by the government. What is important at this point is that the government must not only fight against the spread of the ongoing pandemic, but also against the hoaxes, lies, half-truths and conspiracy theories generated by it. The government should regularly and transparently publish epidemiological data on the extent and pathways of the virus spread and on testing capacity, contact tracing and other indicators (e.g. the number of patients in intensive care units, the number of deaths, etc.).

The Slovak experiment has not gone unnoticed in other countries, where the second wave of the pandemic is entering out-of-control proportions. England has sent observers to the mass testing in Slovakia tasked with assessing the project for their own purposes. Austria took a note later, with the chancellor S. Kurz announcing pilot mass testing in December. Even if the idea of mass testing might appear legally problematic and medically inefficient, it can be expected that other small countries, even outside the EU, will follow suit.
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