Consistent monitoring of the developments of the pandemic was the right thing to do when the coronavirus crisis began. The enormous risk potential of the impending disaster, the gruesome and disturbing images from Bergamo in Italy, and the exponential spread, in conjunction with the insufficient knowledge of the virus at the time, all ethically and constitutionally justified the political measures that have been taken thus far, including the massive, nearly all-encompassing encroachment on basic rights. The state was obligated to act quickly and consistently in order to protect the health of its citizens in this state of emergency.

The rate of infection has since slowed down drastically. The situation in the health care system has been consolidated such that the intensive care units are not expected to be overwhelmed.

Although the further development of the pandemic can never be predicted with complete certainty, the initial state of disaster has clearly turned into an increased epidemic state of risk, which constitutional and higher administrative courts have used as the basis for their decision-making. Policy makers must use this second phase to focus on lifting the inhibitive measures or at least alleviating the severity thereof. As we learn more about the virus and its spread, the government's obligation to withdraw the encroachments on basic rights and pave the way toward responsible normalcy increases wherever it appears epidemiologically justifiable. Compared to the state of disaster, the burden of proof has reversed: state measures for restricting basic rights can only be justified for urgent epidemiological reasons.

The retraction of restrictions on social and public life must still be done with particular caution in light of the risk potential of a second wave of the infection. For the foreseeable future this requires that all citizens adhere to hygiene and distance regulations. Yet the shared societal goal is not just to prevent a second wave of infection in the form of an uncontrollable spread of the virus but also to reduce the negative effects of a lockdown in all areas of our society. The immediate medical crisis has been followed by a socio-economic crisis in which the extent of the suffering of those directly and indirectly affected has yet to be completely determined. This damage is not visible in daily reproduction numbers nor in times of doubling.

There is an understanding that a general lockdown need not be required a second time, because the experience, the learning process, the investments in
and around the health care system, as well as the changes in society’s habits have made it possible to create a strategy based on nuanced responses (following infection chains at regional, sectoral levels) that may take effect if the infection rate increases again.

The lack of knowledge and uncertainty with regard to the infection require a risk-adapted approach as well as a structured scientific monitoring of measures taken in order to close existing knowledge gaps and improve the ability to appraise and avoid risks. The infection rate must be monitored and recorded through extensive testing for the occurrence of infections and for the assessment of immunity (which is itself laden with uncertainty), thus facilitating the ability to adapt necessary measures. Accompanying psychological, sociological and economic research is required in light of the expected far-reaching and long-lasting ramifications, so that the upcoming challenges can be overcome for the public good.

Against this backdrop, a cohesive approach is called for that, despite the uncertainty, considers the complexity of this entire situation as well as the mid- and long-term effects of the crisis. This includes the incredible burdens that the coming generations will carry as a result of the need to continuously update emergency programmes.

The government must accept responsibility for carefully deliberating its approach and must present this process of deliberation, as well as any decisions that result from it, in a transparent, well-justified and comprehensible manner to the public - especially in this highly complex situation. This also helps reduce the risk of polarisation within the population and a loss of faith in the government. That is why economic and social ramifications must be considered alongside epidemiological and medical developments, and why conflicting goals must be identified. Furthermore, facts must guide political decisions made to avoid medical, economic and social hardship.

A broad information base is required to steer the gradual process of return to social and public life in a comprehensive, risk-based manner. It should therefore not be one-dimensional.

The Coronavirus Expert Committee of the State Government of North Rhine-Westphalia came to this conclusion in its statement released on 11 April 2020. It said, "Task forces should be established at the federal and state level to collect and evaluate all relevant information under consideration of medical, social and economic risks in order to then be able to recommend suitable measures. A data and fact (dashboard) must be created that allows for continuous monitoring, namely by providing all decision-related indicators (e.g. epidemiological, economic, psychological, social) and by revealing conflicting targets, all on the basis of constant data retrieval."

In order to be able to provide such a dashboard quickly, policy makers must first agree on relevant and meaningful indicators, as well as on the specific criteria that are to be established and monitored. The preparation of operative measures for acquiring missing
data and for researching and observing social behaviour, particularly with regard to risks of infection in areas that have been opened up, must be considered.

The list of indicators created by the Coronavirus Expert Committee of the State Government of North Rhine-Westphalia in this initial step shall serve as the basis for the continued development of a dashboard.

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Dr. Udo di Fabio, Bonn;
Stephan Grünwald, Cologne;
Dr. Otfried Höffe, Tübingen;
Dr. Michael Hüther, Cologne;
Monika Kleine, Cologne;
Dr. Renate Köcher, Allensbach;
Dr. Nicola Leibinger-Kammüller, Ditzingen;
Dr. Armin Nassehi, Munich;
Claudia Nemat, Bonn;
Dr. Christoph M. Schmidt, Essen;
Dr. Hendrik Streeck, Bonn;
Dr. Christiane Woopen, Cologne.

The consultations by the Coronavirus Expert Committee took place with the participation and cooperation of Minister President Armin Laschet and Deputy Minister President Dr. Joachim Stamp.