Health salience and positions before and after the pandemic: a regional party manifestos analysis

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Abstract. To what extent have there been changes in the way parties address health after the COVID-19 pandemic? This article aims to answer this question by analysing 59 party manifestos from Spanish regional elections. Using manual coding, we examine two dimensions: the salience of the health section in each manifesto and the specific topics addressed, measuring their orientation. Surprisingly, our findings indicate that the pandemic has not altered the importance parties give to health in their manifestos, nor has it led to significant changes in their proposals. The results also indicate that left-right ideology does not explain general health salience, either before or after the pandemic. When it comes to the specific proposals, there are only two subtopics in which ideology is significant: Sanitary Rights and Public Health and Prevention, in which parties have differences depending on their left-right placement. Therefore, this paper presents two major findings: the pandemic has not increased the importance of health issues in party manifestos, and ideology is not a significant factor in explaining party positions on health, except in certain specific areas.

1 Introduction

The level of public services provision has been and continues to be one of the main areas of political discussion, with very different positions across the political spectrum. However, at certain moments, there may be a programmatic alignment between the different parties or a change of trend as a result of exogenous factors (see Shepsle, 2001). In this sense, it is proposed to analyse how the COVID-19 pandemic has changed the way parties approach one of the main public services: public health.

Given that the health crisis is relatively recent its medium- and long-term political implications remain somewhat uncertain. Thus, this article provides information on an emerging field of study, with both the subject matter and the cases selected being novel. In the analysis undertaken here, we analyse the health sections of the manifestos from parties that obtained parliamentary representation in the regional elections held in Spain during or immediately after the pandemic (Basque Country, Galicia, Catalonia, Madrid, and Castile and Leon). In Spain, regions hold the competencies for health administration and played a crucial role in managing the pandemic, making them the appropriate unit for analysis.

The article has two main objectives. Firstly, we assess the salience of health-related matters within the manifestos of distinct political parties. Simultaneously, we explore the particular topics that they address. Therefore, the goal is to analyse whether any shifts have occurred in the level of importance attributed to these subjects by the respective parties in terms of salience but also in terms of position.

Hence, the main question this article explores is: To what extent have there been changes in the way parties address health after the COVID-19 pandemic?

In contrast to our hypotheses, the findings show that the pandemic did not have a significant effect on the salience of health issues. Furthermore, we observe that ideology does not account for health salience, either before or after the pandemic. However, some differences emerge when examining the proposed policies. Left-wing parties are significantly more likely to advocate for policies related to healthcare rights, whereas right-wing parties tend to propose more prevention policies. For the other policies analysed, ideology does not play a significant role.

2 Health salience and party positions

Traditionally, one of the main axes of programmatic division between different political families has been the question of state intervention in the economy and services provision. In this sense, the classic left-right distinction is often used for party analysis on this issue (Ennser-Jedenastik, 2021).

There are two main approaches when studying party competition and positioning, which are complementary (Meguid, 2008). On the one hand, it is possible to measure the salience of an issue by analysing how much importance parties are giving to it without delving deeply into the content (Robertson, 1976; Budge, 2015). The frequency with which an issue is mentioned serves as a crucial indicator of a party's priorities and stance.

On the other hand, following Down's spatial theory (1957), it is also common to find studies analysing not only the importance given to different issues but also their ideological orientation or positions. In this sense, analyses of party manifestos analysing the ideology of different parties are frequent (Volkens, et al. 2022; Gómez, et al. 2022), providing a useful way to distinguish between the left and the right (see Gabel & Huber, 2000).

However, it is important to note that there are issues relating to the welfare state that generate more ideological division than others. In line with this hypothesis, Green-Pedersen & Jensen (2019) conclude that there are significantly different positions between parties in the labor market, for example, but not significantly different positions on healthcare. On the other hand, Falkenbach et al. (2019) conclude that there are clear partisan effects on the expansion of the welfare state and, in particular, on the public health system. From a demand-side perspective, there is evidence that the issue of health generates more homogeneous positions among people of different ideologies than other public services and benefits (Jensen & Petersen, 2017).

This consensus on health policy is connected to the literature on "valence" and "positional" issues. According to this framework, some policy areas can be labelled as "valence" issues when voters are generally in favour or against, but with similar positions (Stokes, 1963). Therefore, when addressing these topics, parties will compete to show that they are the most competent when managing the area, instead of emphasising differentiated positions. To explore also positions, besides measuring salience, this paper addresses to what extent can health be considered a valence issue in the Spanish context and whether the pandemic has changed this dynamic.

3 The COVID-19 crisis and its political responses

To date, there are no studies measuring the COVID-19 pandemic effect on parties' positions on health. However, there is some literature on the reactions of specific parties, most notably the Populist Radical Right Parties (PRRP's), which, to some extent, continued to use their anti-immigration discourse when talking about health (Falkenbach and Greer, 2021; Zanotti and Turnbull-Dugarte, 2022).

On the other hand, some studies address what explains the variation in health policies since COVID-19, reaching different conclusions. Some authors argue that party dynamics, the economic structure, and the states' historical conditions influenced responses to the pandemic (Egger et al., 2021; Rovny et al., 2022).

On the other hand, some articles conclude that, despite some changes (necessary given the gravity of the situation), there have been no structural transformations in the way health is addressed (Ramesh et al., 2022). According to these theses, path dependency plays an important role regarding this; an exogenous phenomenon such as a pandemic may not be sufficient to transform the foundations of a health system that has been in place for decades, and that parties are less relevant to explain policymaking.

Finally, complementing these findings, there is evidence showing that, despite the existence of more debate about health, this has not translated into an increase in the number of public policy proposals related to it (Knill & Steinebach, 2022). However, we argue that health policies are time-consuming to develop, involve multiple levels of government, and are complex to measure. In contrast, party positions, particularly as expressed in party manifestos, are more straightforward to analyse. Manifestos better reflect how parties respond to recent phenomena, as their development involves only the parties themselves. Moreover, party manifestos have an impact on policy making (Brouard et al., 2018), even in internationalised areas (Knill et all., 2010).

When it comes to citizens' behaviour, the literature shows that health in the pandemic context was a salient issue among voters, despite differences between countries (Acharya et al., 2020). Moreover, studies exploring the polarising effect of the sanitary crisis, as well as the importance of ideology and partisanship role shaping attitudes towards it, show an important role of ideology and party support, especially in the United States (Becher et al., 2021; Ruisch et al., 2021).

To date, there are no studies analysing party positions on health after the pandemic, specifically in party manifestos. While there is some relevant evidence on how states responded to the pandemic, the discourses used, and the proliferation of populism during this period, there is a gap in research on whether there has been a shift in how parties address health issues in their manifestos.

4 Regional party manifestos and the welfare state

The most relevant databases to compare party manifestos are the Party Manifesto Project (Volkens, et al. 2022) and the Regional Party Manifesto Project (Gómez, et al. 2022). The latter is based on the analysis of regional manifestos, so its data allows one to draw up working hypotheses based on the results it offers. Although this database does not contain specific information on the position of the parties on the public healthcare system, it does provide data on: (a) the positions on the welfare system as a whole; and (b) the position of the manifestos on the left-right axis (see Regional Party Manifesto Manual Code).

The data offered by the Regional Party Manifesto project does not allow to identify significant jumps upward in the references towards the expansion of the welfare system (see: Figure 1). It does not even do so in critical points such as the economic crisis of the early nineties or the great recession of 2008. Also, it is not possible to identify significant differences between manifestos according to their position on the left-right axis.

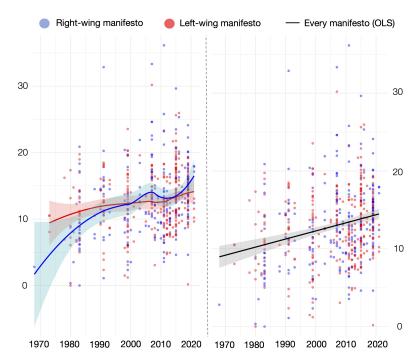


Fig. 1. Evolution of the percentage of expressions in favour of the growth of the Welfare State by manifesto (by year). Source: Regional Party Manifesto Project Database (Gómez, et al. 2022)

Taking this data into account, one might conclude that there are not only intuitive but also counterintuitive expectations that one must consider while hypothesising about the pandemic's effect on party manifestos. Moreover, this small ideological effect on positions towards the welfare state might be even more discreet when it comes to health, due to its potential valence component.

However, given the impact that the sanitary emergency had on the political agenda we expect an increase in the importance given to public health after the pandemic (H1). On the other hand, we also expect more salience among left-wing parties (H2a) as well as differences across the topics with right-wing parties (H2b), with this relationship being less evident after the pandemic when we expect more ideological convergence (H3).

5 Metodology and case selection

To test our hypotheses, we manually coded the electoral manifestos of all parties that ran in Spanish regional elections and secured parliamentary representation during or immediately after the pandemic. For this reason, we analyse the cases of Madrid, Catalonia, Castile and Leon, Galicia, and the Basque Country. In Spain, studying regional contexts is particularly relevant for

several reasons. First, the Comunidades Autónomas (Spanish autonomous regions) are responsible for healthcare administration. They manage approximately one-third of total public spending, including highly visible areas such as health and education (Herrero-Alcalde and Tránchez, 2015: 3). Thus, regional politics in Spain are the ones that most immediately affect the welfare system (see Palau et al., 2011).

Moreover, Spain is a multiparty democracy (Gray, 2020), which allows us to capture different ideological tendencies. In this sense, it is possible to collect manifestos from 15 parties/coalitions (see Figure 1) in 10 different elections. And, lastly, Spain was one of the most affected countries by COVID-19, with one of the highest mortality rates in Europe (see Soriano & Barreiro, 2020). The fact that the Spanish health system has been extremely tense because of the pandemic makes it an interesting case to analyse.

Region	Election	Parties
Basque Country	25/09/2016 12/07/2020	Bildu, C's, PNV, Podemos, PP, PSE-PSOE, and VOX.
Castille and Leon	26/05/2019 $13/02/2022$	C's, Por Ávila, PP, PSOE, Unidas Podemos, UPL, Soria Ya, VOX.
Catalonia	21/12/2017 $14/02/2021$	C's, CUP, En Comú Podem, ERC, JxCat, PP, PSC, VOX.
Galicia	25/09/2016 12/07/2020	BNG, En Marea (Podemos), Unidas Podemos, PP, PSOE.
Madrid Community	$\frac{26/05/2019}{04/05/2021}$	C's, Más Madrid, PP, PSOE, Unidas Podemos, VOX.

Table 1. Regional Elections in Spain

In order to analyse the programmatic content of the different parties, we carried out a manual using MAXQDA software, applying an inductive method to obtain the codes. Based on a preliminary reading of the different documents, we established the following codes:

(A) Public health expansion

- More personnel and resources: this includes all appeals in favour of increasing resources, personnel, and expanding the health system.
- Against privatization: incorporates all the proposals against externalizations and also all the calls for more public management.
- Research and education: this includes all proposals relating to health research, as well as references to education (universities, training of doctors and nurses, etc.).

(B) Efficiency:

 Efficiency, governance, and coordination: this includes proposals for improvements in waiting times, coordination between departments, quality of care, transparency, and citizen participation.

(C) Public health and prevention:

- Public health and prevention: includes all proposals related to the field of prevention, such as awareness-raising campaigns or epidemiological surveillance services (COVID-19, HIV, etc.).

(D) Health rights:

- Health rights and minorities' protection: includes everything related to health rights and the protection of vulnerable groups. This includes proposals relating to euthanasia, abortion, palliative care, specific rights of the elderly, and gender equality.
- More health rights for immigrants: includes calls for the inclusion of immigrants in the public health system.

(E) Mental health:

- Mental health: this incorporates all proposals related to mental health.

(F) Others:¹

- Fewer health rights for immigrants: includes all proposals against the inclusion of immigrants in the public health system.
- Urban-rural inequalities: includes all demands for improved health care in rural areas, as well
 as all calls for health issues in less populated settings.
- Socioeconomic inequalities: includes all health appeals that take into account economic and social inequalities.
- More regional competences: includes all calls for increased regional competences and resources.
- More regional-national coordination: this includes proposals for greater coordination between regions or between regions and the State.

Each code is related to a specific proposal. In this sense, it should be noted that no preambles or texts outside the specific proposals of the different parties have been taken into account in the codification process. In other words, in order to attribute a code to a phrase, it must be part of a proposal. Thus, in some cases, different codes have been included within a specific proposal or point.

As highlighted above, an inductive method was used to establish the categories. This has ensured that there is no proposal without a code. However, the codes that appear less frequently have not been used in the analysis, as their infrequency makes this analysis impossible². Also, as it can be seen, some of them have been unified because of their similarity.

¹ Here are some codes with little salience, which makes it difficult to analyze them.

² It is the case of "less health rights to immigrants", "urban - rural inequalities", "socioeconomic inequalities", "more regional competences" and "more regional-national coordination".

To perform the OLS, we control for region (with a dummy for each "Comunidad Autónoma"), as well as for incumbency (a dummy for incumbent parties). We also control for the number of words of the manifesto.

6 Results

6.1 The volume of health sections in the manifestos

The first element we explore is the proportion of words out of the total number of words the health section represents in each program before and after the pandemic. As can be seen in Table 2, there has been a slight absolute increase of 0.76% in the importance given in words to the health section, which is a 10.64% in relative terms. However, when measuring the number of mentions to "health" relative to the overall word count we find a slight absolute decrease (-0.03%), which is a 27% relative reduction.

Hence, based on these initial data points, there appears to be a slight increase in health sections' salience after the pandemic, both in absolute and relative terms. On the other hand, the number of mentions to health is lower. Nonetheless, it is important to point out that there are other ways to refer to health, especially in relation to COVID-19. However, as elections before the pandemic are also analysed, we haven't counted the number of mentions of concepts related to the sanitary crisis.

This descriptive data should be treated with caution, given that these results don't necessarily mean that more proposals are being made. Thus, in the following lines, we analyse the content of the proposals and we show statistical controlled models to assess the actual impact of the pandemic.

	% of words in the health section in relation to the total N of words	% of mentions to health in relation to the total N of words	N (Manifestos)
Before	7.24%	0.11%	28
After	8.01%	0.08%	31
Change	$0.76 \ (+10.64\%)$	-0.03 (-27.27 %)	-

Table 2. Volume of sanitary sections in the regional manifestos. **Source**: elaboration with authors' own data.

Even though at the pure descriptive level there is a small increase in the relative importance of health sections, the results obtained in the OLS model (Table 3) show that it is not possible to determine that there has been an effect of the pandemic on the volume of the health sections within the electoral programs. Moreover, the volume seems not to be more determined by ideology, regardless of when the electoral program was published. Thus, it can be concluded that the pandemic has not affected the health sections' salience (in terms of relative volume) of the regional electoral programs and that left-right⁴ ideology doesn't explain salience neither before nor after the pandemic, which allows us to reject H1.

³ The concept "health" includes the next words: "sanidad", "salud", "sanitate", "salut", "sanidade", "sanidade",

⁴ Taking the parties' average placement in post-electoral regional barometers of the Spanish Sociological Research Center (CIS). Corrected with the average self-placement.

Table 3. Changes in the health section importance (linear model).

Pred: Health section volume	(M1)	(M2)	(M3)
Before/After	0.643	0.933	0.803
,	(1.073)	(1.067)	(1.057)
Total n of words		-0.00003*	-0.00002
		(0.00002)	(0.00002)
Left-Right (1-10)			0.386
			(0.251)
CyL	5.032***	4.098**	3.658**
	(1.525)	(1.591)	(1.597)
Euskadi	1.665	2.000	1.862
	(1.699)	(1.679)	(1.660)
Galicia	2.842	2.436	2.839
	(1.823)	(1.805)	(1.801)
Madrid	4.395***	3.611**	3.335**
	(1.614)	(1.648)	(1.637)
Constant	4.487***	6.133***	4.182**
	(1.221)	(1.530)	(1.972)
Observations	59	59	59
AIC	341.67	340.37	339.70
BIC	356.22	356.99	358.40
Pseudo R2	0.21	0.25	0.29
Log Likelihood	-164.837	-163.186	-161.849

Note: p < 0.1; p < 0.05; p < 0.01

6.2 Code analysis: assessing the impact of both the ideology and the pandemic

Figure 2 shows on an aggregate basis (including pre and post-pandemic manifestos), how frequently each manifesto mentions a code (that is, words needed for a code to appear). The higher the concentration of dots in the bottom bar, the more frequent the issue is. We find that the most recurrent proposals are those related to more staff and resources, those related to improved efficiency, management, and transparency, and those related to prevention and public health.

Figure 3 shows the codes' frequency within the manifestos before and after the pandemic before and after the pandemic, existing some observable differences between periods. However, there are no notable changes. When analysed by codes, apparently, those that show some changes are "Efficiency and governance", "More public health system" and "Health and prevention".

Firstly, after the pandemic, there is less emphasis on efficiency in the healthcare sector. In this code, references to waiting times, resource management (both financial and material), transparency, and citizen participation have been included. In other words, everything that can be considered "management". In this sense, it is not surprising that there are less mentions of this code. Although there is a wide margin for interpretation and one has to be cautious with the (descriptive) results, one possible explanation for this change is the fact that, at a time when there is talk of expanding services, and precisely in the pandemic, these have been scarce, the political messages are not directed towards the issue of efficiency and transparency. However, a counter-argument could be used: in times of crisis and emergency, the need to make resource management more efficient and to scrutinise results may be more present. Even so, the observed change is insignificant and there are several outliers.

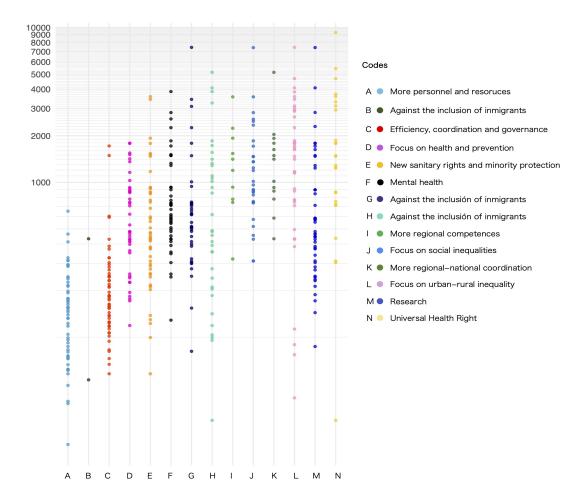


Fig. 2. Words needed per code to appear in the manifestos. Source: own elaboration with author's own data.

Also, there is a slight increase in the number of "more public health" proposals, which includes different policy proposals aimed at expanding the health care system. This code includes everything that has to do with increasing the number of staff, improving working conditions, more resources (material or financial), or more research. A subtle alteration is observable: within post-pandemic manifestos, there is a higher presence of proposals under this code.

There is a diminished number of programs situated at the lower extremity of the distribution. In other words, there has been a slight homogenisation in the proposals of the different manifestos in relation to the expansion of the health system. The fact that this trend is noticeable is not surprising, since the health emergency has brought the issue of public health to the forefront. As this is a regional competence, the parties contesting these elections have had to address the issue, with increased resources proposals being one of the main ways of doing so.

Another topic exhibiting disparity is public health and preventive policies. This encompasses disease surveillance, prevention strategies, and contingency planning, all of which have been systematically documented under this category. These little differences are not surprising, since the pandemic has evidenced the need for adequate epidemiological surveillance systems. In this

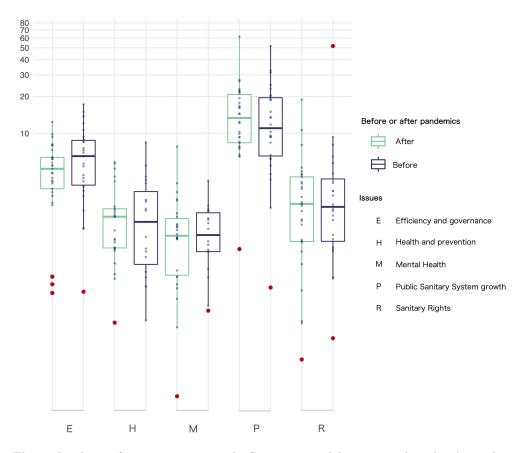


Fig. 3. Incidence of issues per 1000 words. Source: own elaboration with authors' own data.

sense, many parties have incorporated this type of proposal into their programs, in most situations, linking it to COVID-19 and thinking about possible future pandemics. There has been a generalised slight increase, and after the pandemic there are fewer programs at the bottom of the distribution, again producing a slight homogenisation.

Despite the substantial impact that the pandemic had on mental health, particularly among young people (Talevi et al., 2020), we observe that there has not been a notable shift in the frequency of policy proposals addressing this matter. In fact, as shown in the graph, prior to the pandemic, the concentration points of the topic were more pronounced towards the upper end compared to the post-pandemic period.

In addition to the descriptive analysis, controlled statistical models indicate that the pandemic has no significant impact on any topic's salience (Table 4). As a result, we can reject our first hypothesis. We find that neither the allusions to the expansion of the health system (P), nor those referring to mental health (M), nor those that are aimed at improving management and making it more efficient (E), nor those that appeal for prevention and for focusing on Public Health (H), nor those referring to the increase in health rights and protection of minorities (R) have been significantly affected by the incidence of the pandemic (see: Table 4). This does not have to be due to parties having not been very responsive to the pandemic, since it can be considered that the volume and importance of health in the Spanish regional manifestos were already very high before the pandemic.

 Table 4. Regression Results

	Bef	ore	After		Total		
	Coef.	SE	Coef.	SE	Coef.	SE	Pred
Ideology (1-10) Npal Incumbency	-1.481 -0.001**	(0.921) (0.0005)	-1.286 -0.001 3.597	(1.431) (0.001) (7.210)	-1.274 -0.001**	(0.782) (0.0004)	P
Before/After (0-1) Intercept	52.738***	(5.292)	50.432***	(8.591)	3.25 50.463***	(3.97) (4.986)	
N AIC BIC Pseudo R2	28 219.94 230.59 0.55		31 269.22 282.12 0.30		59 481.79 500.49 0.36		-
Ideology (1-10) Npal Incumbency Before/After (0-1) Intercept	-0.262 0.0001 4.477**	(0.309) (0.0002)	-0.417 0.0001 1.249	(0.342) (0.0002) (1.722)	-0.307 0.0002 0.76	(0.207) (0.0001) (1.03) (1.220)	M
N AIC BIC Pseudo R2	28 158 169 0.3	.86 .52	31 180.43 193.34 0.33		4.913*** (1.320) 59 325.00 343.69 0.32		-
Ideology (1-10) Npal Incumbency Before/After (0-1)	2.470 -0.003	(3.306) (0.002)	5.402* -0.002 -17.649	(3.011) (0.002) (15.167)	3.357 -0.003** -5.61	(2.032) (0.001) (8.82)	Е
Intercept	29.952	(18.996)	13.198	(18.074)	25.689*	(12.961)	_
N AIC BIC Pseudo R2	28 291.51 302.17 0.17		31 315.33 328.23 0.25		59 594.51 613.20 0.17		
Ideology (1-10) Npal Incumbency Before/After (0-1)	0.384 0.001***	(0.394) (0.0002)	0.722 0.001* 2.576	(0.477) (0.0003) (2.405)	0.673** 0.001*** 0.79	(0.293) (0.0002) (1.38)	н
N AIC BIC Pseudo R2	-0.042 (2.264) 28 172.39 183.05 0.53		3.055 (2.866) 31 201.15 214.05 0.38		1.283 (1.772) 59 366.80 385.50 0.37		-
Ideology (1-10) Npal Incumbency Before/After (0-1) Intercept	-2.110*** 0.0001 19.651***	(0.533) (0.0003) (3.062)	-0.931* 0.0005 -2.535 12.957***	(0.487) (0.0003) (2.452) (2.922)	-1.585*** 0.0001 -1.91 17.502***	(0.348) (0.0002) (1.68) (2.218)	R
N AIC BIC Pseudo R2	28 189 199 0.6	8 .31 .97	3: 202 215 0.4	1 .34 .25	59 386 404 0.4	9 .20 .90	

Note: p < 0.1; p < 0.05; p < 0.01

However, the descriptive analysis (Figure 3) shows some differences between the pre- and post-pandemic manifestos. This is probably because of many reasons, among them the fact that there are some outliers. Also, it is noteworthy that the distribution has changed. In some topics, there are fewer points concentrated at the bottom of the distribution. So, even though it is not possible to find statistical significance, there's an apparent change in the trend. However, as the different graphics show, these differences are very weak. On the other hand, when taking into account ideology's impact on salience and the proposals made, we find that a significant relationship cannot be established between ideology and the number of allusions to the growth and reinforcement of the public healthcare system (P), to mental health as a problem to be treated (M) and to the improvement of management and the efficiency of the system (E) (see: Table 5).

Nonetheless, at a purely descriptive level, a tendency can be observed for left-wing parties to have a greater impact on the reinforcement of public health and on the need to address the problem of mental health. On the other hand, we find that pandemics have had a greater impact on left-wing parties regarding the improvement of management and efficiency.

We observe a significant ideological effect for the "Sanitary rights" and the "Health and Prevention" codes. Left-leaning parties propose significantly more policies related to the development or reinforcement of health rights. Usually, it's because they call for universal healthcare, including immigrants to the sanitary system . On the other hand, non left-wing parties tend to mention more proposals related to prevention and public health.

In any case, one might not rule out that pandemics have favoured the convergence between left- and right-wing parties, especially if one takes into account that the importance given to each issue on both sides of the ideological spectrum was already quite similar before the pandemics. This means that our hypothesis 2b is only partially accepted and our hypothesis 3 is rejected.

However, as said before, there are some codes that, because of their low frequency, have not been considered for the analysis. For example, some parties talk about the "urban-rural" issue when addressing health. It is the case of the Spanish provincial candidatures (such as "Soria ya" or "Por Ávila"), that focus their messages on the demographic question. Even so, as it is not that frequent, we don't have not enough data to sustain that this tendency is produced by the pandemic or by their ideology.

7 Conclusions

This article has sought to provide data on the impact of the COVID-19 pandemic on the way in which political parties address the issue of health in their manifestos. Through a process of manual coding and its subsequent analysis, we show that there haven't been major changes in the importance that the different parties give to the issue of health nor in the issues they address. Nonetheless, we find that left-wing parties propose more policies related to sanitary rights, while right-wing parties propose more public health and prevention policies.

Moreover, we have also shown that after the pandemic, there has not been an increase in the importance given to public health and it has not produced a higher convergence between left and right-wing parties. As other studies show, exogen shocks such as the COVID-19 pandemic are not enough to end with the "path dependency". To a point, these results can be considered surprising. However, there are some possible explanations for these outcomes. One possible explanatory factor for the non-increasing salience is that the pandemic has not only had consequences in the field of health but has also had a major economic and social impact. Therefore, the parties have had to divide their attention between different issues.

Connected to this matter, it's noteworthy to mention that the health concern held significant relevance within electoral agendas even prior to the pandemic. To clarify, preceding the health crisis, it already held a position of considerable importance. Hence, it's likely that political parties have upheld the significance attributed to this subject while also elevating the prominence of other issues that previously had lower visibility prior to the crisis.

These findings hold significance both academically and in the broader societal context. The pandemic stands out as one of the most significant crises of the current century, exerting its impact on nations globally. Generating insights into the political implications arising from this health-related crisis becomes necessary to comprehending how political parties and public policies address extreme emergencies, such as pandemics.

8 Limitations and future research questions

This study has several limitations. Firstly, it only takes into account the Spanish case, which, although particularly interesting, is different from the other national contexts. Nevertheless, unpublished and relevant data have been presented in the current academic and social context, opening the door to further research in this line. Among other aspects, future lines of research could address other national cases, use other methodological approaches, and understand the impact of COVID-19 in other areas of the welfare state. Also, it is necessary to analyse how parties have linked health with freedom and how radical right parties used their criticism to COVID-19 restrictions to improve their electoral performance.

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