



MSc Public Health and Social Care in Practice

Health Care System, Organisation and Leadership (LCHS7002)

Case Study Analysis Report: Comparative report on COVID19 leadership
Responses

Student Name- Krish Sanjaybhai Patel

Student ID- 2426744

Lecturer Name- Dr Fahad khan

Executive Summary

This report is a critical analysis of the leadership responses adopted by Spain, South Korea, and Canada in response to the COVID-19 pandemic guided by the contingency and path-goal theories. It makes comparisons between the effect of centralised and decentralised decision-making structures on the outcomes of crises. The adaptive contingency leadership was manifested in the data-based decentralised model of South Korea which allowed quick containment. The initially centralised and reactive system of Spain exhibited structural inflexibility and channels of communication. Canada has used a hybrid system whereby the federal direction and provincial liberation are put into action demonstrating transformational characteristics. In these comparisons, the report has identified how the flexibility of leadership, articulateness of communication, and institutional trust have been the factors that have defined how each country was effective in solving a changing global crisis.

Table of Contents

1. Introduction	4
2. Critical Analysis of each countries Centralised or decentralised approaches to the pandemic	4
2.1 Introduction to Centralised and Decentralisation in Crisis Governance	4
2.2 Centralised Command and Its Challenge in Spain	5
2.3 Decentralised and Data-driven coordination in South Korea.....	9
2.4 The Hybrid Federal Approach in Canada.....	11
3. Critical Analysis of the Leadership Styles taken in each Country.....	13
3.1 Leadership Styles in Spain	13
3.2 Leadership Style in South Korea	16
3.3 Leadership Style in Canada	19
4. Comparative discussion.....	22
4.1 Comparative Discussion	22
4.2 Learned Lessons and Theoretical Implications.....	23
5. Conclusion	24
References.....	25

1. Introduction

The COVID-19 pandemic posed a crisis that had never been witnessed globally and put the stability and flexibility of political and administrative leadership in different countries to the test. Crisis management in such a manner demanded medical preparedness along with strategic coordination, communication and trust-building (Hamada, 2025). COVID-19 is an infectious disease caused by the SARS-CoV-2 virus, first identified in late 2019. It spreads primarily through respiratory droplets, causing symptoms ranging from mild flu-like illness to severe respiratory failure. Centralisation refers to a governance or management structure where decision-making authority is concentrated at the top level. Policies, resources, and strategies are controlled by a central authority with limited local autonomy. Conversely, Decentralisation is the distribution of decision-making powers to lower or local levels of authority. It allows quicker, context-specific responses and greater flexibility for regional or organisational units. Leadership style describes the behavioural approach a leader uses to guide, motivate, and manage people. It includes patterns like authoritarian, democratic, transformational, or situational leadership depending on context and goals.

This report looks at the leadership reactions of Spain, South Korea and Canada with reference to their differences in the organizational structure and the style of leadership. It analyses the role of contextual factors in the way each country responded to the situation and managed the crises, based on such models as the Contingency Theory, Path-Goal Theory and the Centralised-Decentralised leadership model. The extremely centralised command-based system in Spain, the decentralised response in South Korea and the hybrid system of a federal system in Canada offer a varied comparison perspective. The report will uncover the factors of adaptive, transformational and participative leadership behaviours that affected the outcomes of the pandemic and the level of people compliance. The analysis provides an idea of effective governance and leadership in a huge global crisis by connecting theory with practice.

2. Critical Analysis of each countries Centralised or decentralised approaches to the pandemic

2.1 Introduction to Centralised and Decentralisation in Crisis Governance

The governance of a crisis in a pandemic requires rapid coordination and flexibility and trust. Leadership models such as centralised, decentralised or hybrid models play a significant role in defining how quick, coherent and inclusive policy implementation will be. A centralized

organisation has the advantage of being uniform in its decisions as the central authority and decision-making is concentrated at the national level, at the expense of responsiveness to local circumstances (Ergenc and Yuksekkaya, 2024). The decentralised model, on the other hand, gives power to the local or regional authorities which is flexible but exposes the lack of coordination (Ohrling *et al.*, 2022). The hybrid model tries to strike a balance between the guidance at the national level and the regional level. As postulated by Fielder (1967), the Contingency Theory assumes that no ideal approach to leading exists with leadership efficacy contingent on the situational variables which are the nature of work, the relationship between the leader and members of the team and the system authority (Ujunwa and Danbeki, 2022). Using this lens in the context of pandemic governance, the countries that matched their approach to leadership with the specifics of the situation, were more successful in reducing the impact of the crisis.

This section is a critical analysis of Spain, South Korea and Canada, three domestic countries with different models of governance to determine the presence of a relation between the structural differences and the outcome of the pandemic.

2.2 Centralised Command and Its Challenge in Spain

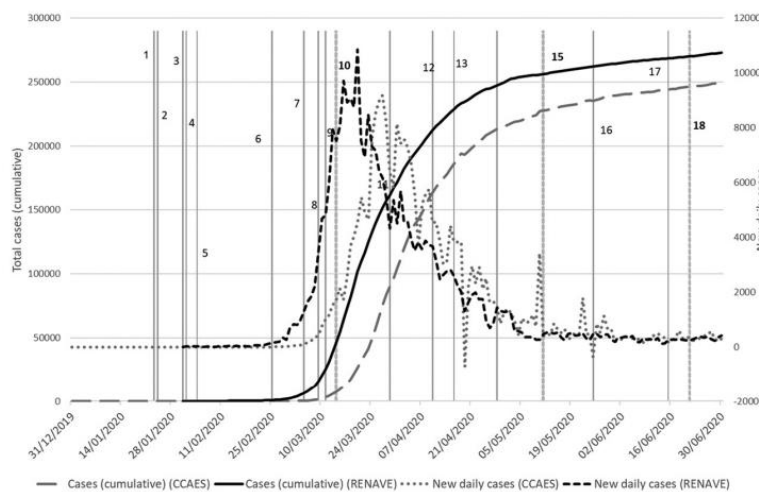


Figure 1: COVID-19 detected cases in Spain until 30 June 2020.

(Source: Rodríguez-Teruel *et al.*, 2022)

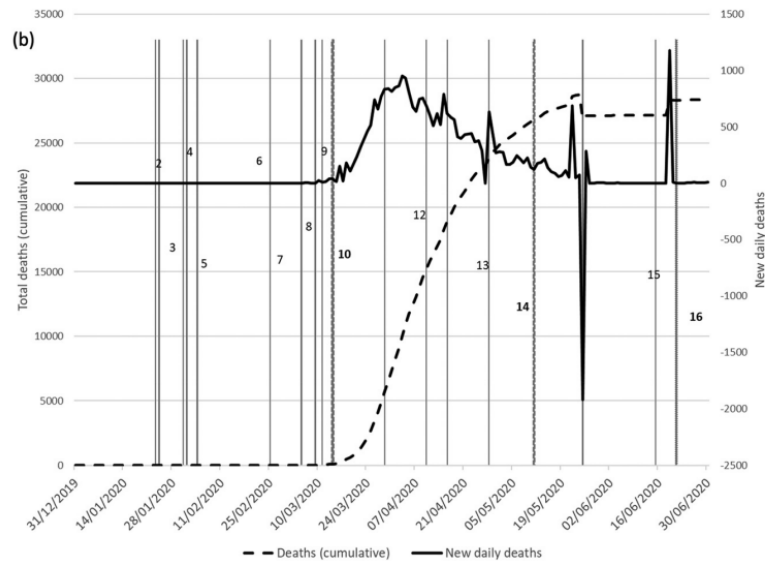


Figure 2: COVID-19 detected deaths in Spain until 30 June 2020

(Source: Rodríguez-Teruel *et al.*, 2022)

The initial reaction of Spain to the COVID-19 showed a very centralised strategy of crisis management that was based on the declaration of the National Health Emergency on March 14, 2020 (Rodríguez-Teruel *et al.*, 2022). During the state of Alarm, the decision-making authority was centralised in the central government and more so in the Ministry of Health. The regional governments that are supposed to take charge of healthcare services were put under National directives. This strict centralisation in the Contingency Theory lens could not fit well with the Spanish complicated, autonomous system of the regions. The efforts of the central government to make all different regions such as Madrid, Catalonia and Andalusia similar in terms of their policies caused tensions. As an example, local responses to differentiate when they were necessary due to different infection rates were restricted by the centralised command.

The centralisation was firstly explained by the necessity to provide uniform measures across the country including lockdowns, travel restrictions and mask mandates. Nevertheless, slower testing and the lack of coordination and the presence of bureaucratic bottlenecks became factors in the slow delivery of medical supplies, unstable data reporting and logistical failure. Investigations found that the early centralised form of Spain had problems with the clarity of communication and the lack of compliance with the regions which created a rather fragmented landscape of trust with the population (OECD., 2024). This leadership rigidity is demonstrated in the Tannenbaum Schmidt Continuum. The model is between autocratic and participative as the decisions made,

implying that the leaders are expected to move along the line as the situation demands (Rajan, 2022).

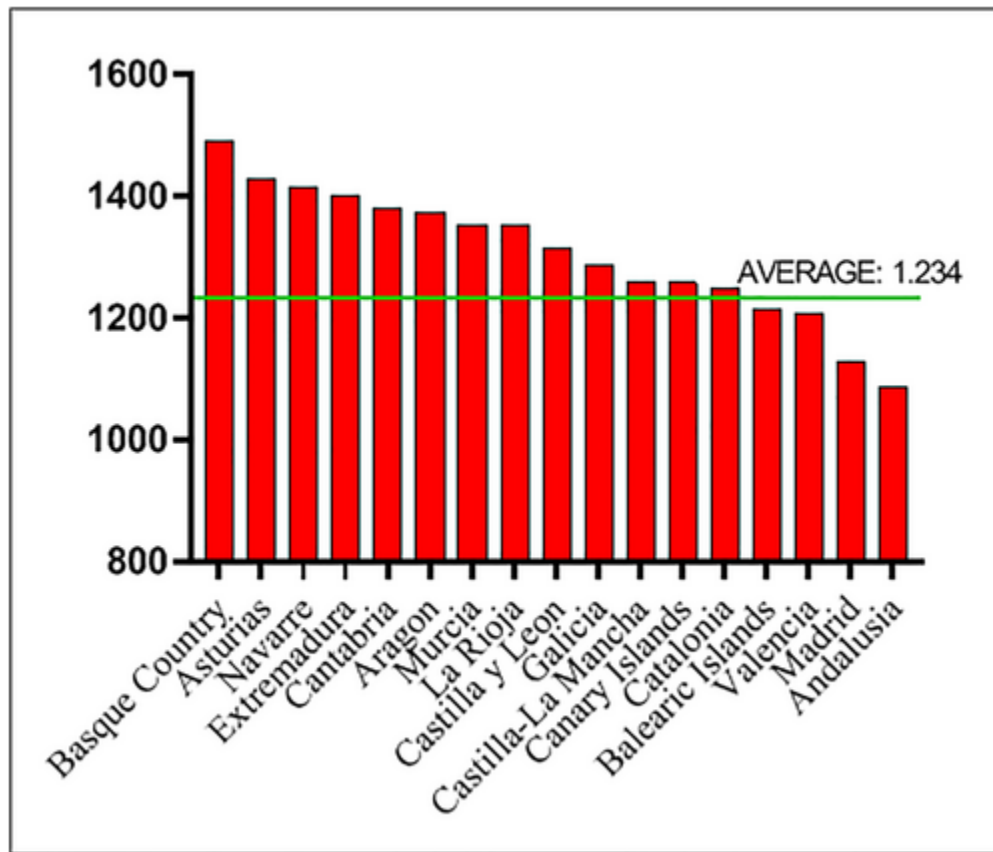


Figure 3: ACs average annual public health expenditure per capita (EUR) (2002–2019).

(Source: Government of Spain, Ministry of Health. Own elaboration)

It is a bar chart of comparing values in various areas in Spain. The red bars are used to denote each region, with Basque country being the first on the left side and Andalusia on the second right. The length of the bars represents the measured value of the regions and Basque country has the highest value (nearly 1500) and Andalusia the lowest one (exclusively over 1000). An average horizontal line represents the general average value, which is denoted as AVERAGE: 1.234, and one can easily compare the performance of each region with the nationwide performance. In general, the chart graphically presents regional differences with a number of regions in the north doing better than expected and most of the regions to the south doing worse than expected.

In summer 2020, Spain had shifted to a hybrid model with more power in hands of the regional authorities as infections became localised (Vampa, 2021). This move was a reactive response that was in line with Contingency Theory which is recognising that stringent centralisation would no longer work. But the lag in embracing such flexibility meant that it would not be able to contain regions consistently and would create a lasting economic disruption. In general, the experience of Spain demonstrated that the problem of over-centralisation in complicated federated settings may lead to the decrease in agility, particularly where the local differences in healthcare capacity and social behaviour are significant. The mistrust between the central and regional governments also scaled down the compliance and people cooperation.

2.3 Decentralised and Data-driven coordination in South Korea

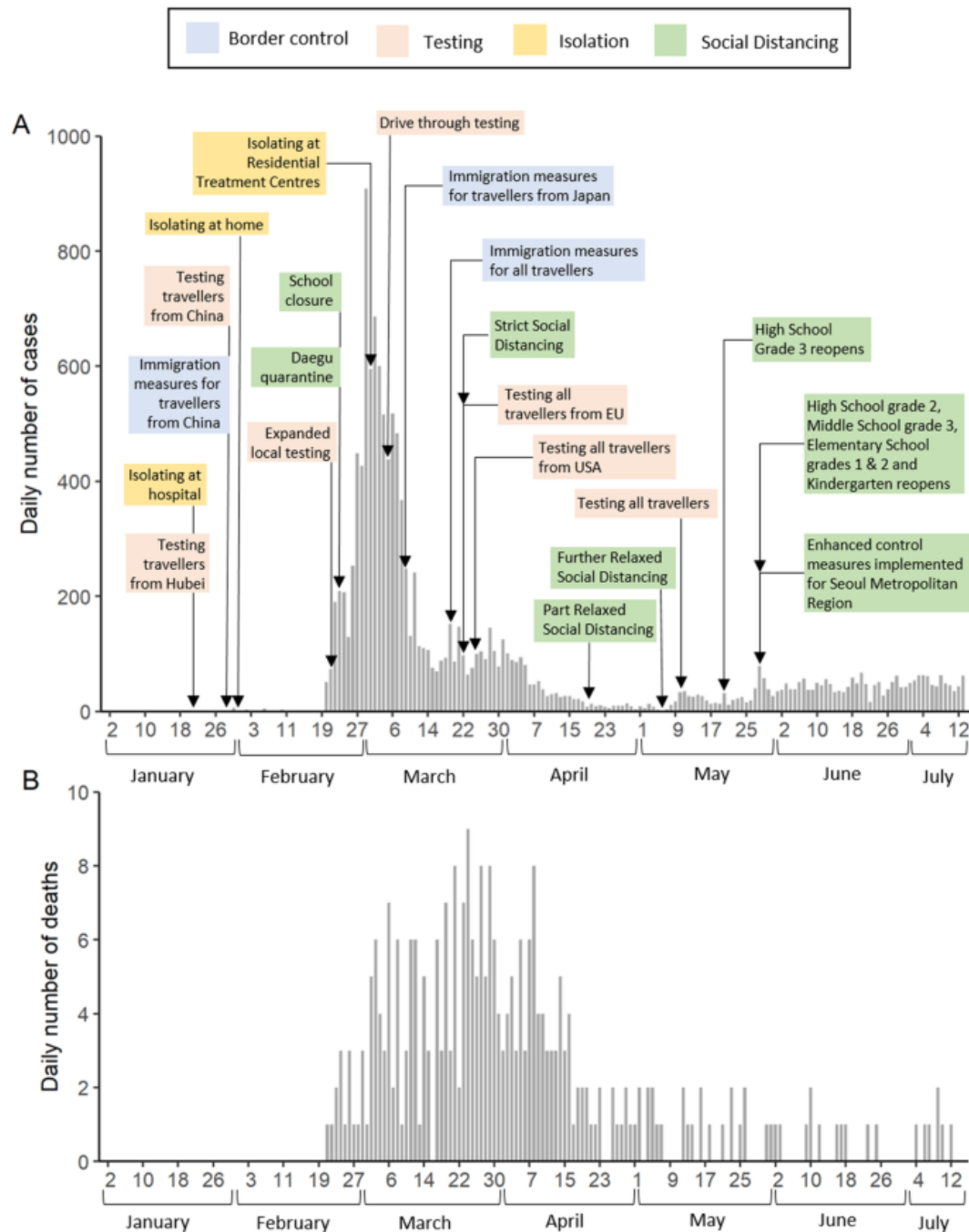


Figure 4: Incidence of confirmed cases by date of the report from daily KCDC press releases with key intervention timings (a) and deaths (b). Interventions are separated into

border control, testing, isolation and social distancing. Sources of interventions: KCDC press releases, Ministry of Health and Welfare, and Ministry of Education

(Source: Dighe et al., 2020)

The picture has two bar charts illustrating the number of COVID-19 cases daily (Panel A), and the number of deaths daily (Panel B) in South Korea between January and July. In Panel A, key interventions by the government are superimposed in a colour-coded range of border control, testing, isolation, and social distancing. The chronology displays the alignment of policies like testing travellers, quarantines, drive-through testing, strict social distancing, and gradual school reopenings to the changes in the number of cases. The trend of daily deaths can be observed in panel B, with the highest number of deaths observed slightly after the cases. Generally, the figure shows numerous layers of public-health approaches timed according to the modification in case and death rates.

However, South Korean leadership structure portrayed a decentralised but co-ordinated response which is cited as one of the most effective in the world. The Korea Centers of Disease Control and Prevention (KCDC) was highly autonomous and was aided by local governments, technology vendors and civil societies (Chu, 2025). The power of decision making was decentralized and this enabled fast decision making and open communication. The system of South Korea fits well with the Contingency theory that proposes adaptability and situational leadership. Instead of a top-down approach to power centralization, the government developed a flexible system that incorporated scientific knowledge, technological development and local adoption. Real-time data, massive testing and contact-tracing technologies were used to inform leadership decisions.

Regarding path and goal-based approaches, the leadership style of South Korea did away with obstacles and offered the citizens clear direction. House (1971) developed the path-goal theory which indicates that the leaders can support performance by making the paths to the goals clear, eliminating the obstacles and providing support (Ferrari, 2024). The South Korean government was successful in communicating guidelines, testing facilities and availability of information which is consistent with directive and supportive leadership style. Moreover, the Tannenbaum and Schmidt Continuum would be useful in explaining the participatory governance of South Korea. The government, the private sector, and the citizens worked together, which was closer to the democratic spectrum of the continuum encouraged by the leadership. There was high public trust created through transparency, regular communication, and voluntary compliance.

The decentralised structure was backed by a powerful legal and institutional base that has been developed since the 2015 MERS outbreak. The new Infectious Disease Control and Prevention Act allowed the local authorities to make timely actions without central authorization (Kim, 2021). The adaptability fits in this structure as the relationship between leadership and environmental complexity increased resilience in South Korea. Nevertheless, the issue of decentralization also proved to be a challenge. At the beginning of the pandemic, the authorities acted inconsistently at the local level which resulted in a certain confusion with quarantine measures. However, tolerance and balanced hybrid structure was proven as these problems were rapidly solved by means of centralised coordination and information exchange instead of the strict decentralisation. The case of South Korea highlights the fact that decentralised structures can be very effective when they are based on trust, transparency and institutional preparedness (Hong, 2024). A good example of a successful contingency-based adaptation is the capability of the leadership to incorporate local autonomy and central oversight.

2.4 The Hybrid Federal Approach in Canada

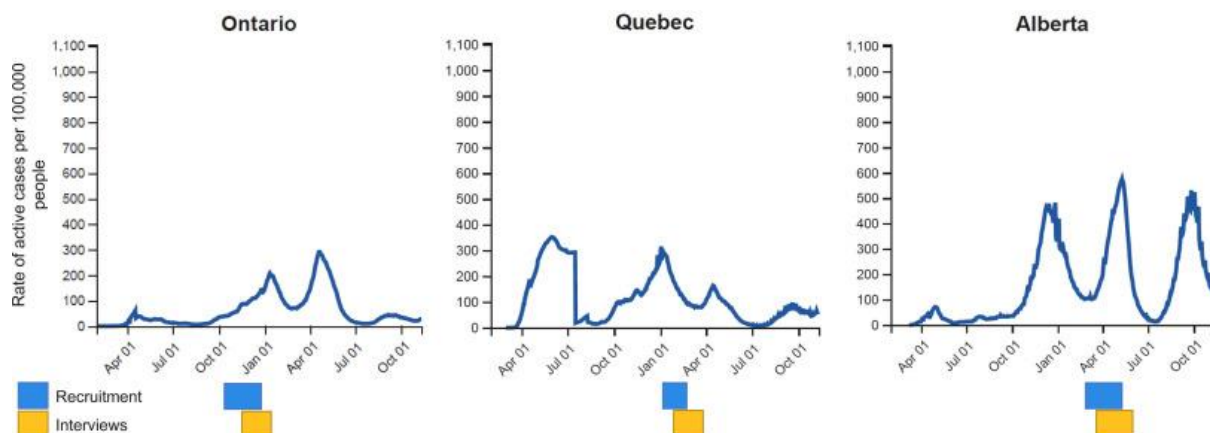


Figure 5: Recruitment and interview timeframes in relation to the rate of active cases (per 100,000 people) in Ontario, Quebec, and Alberta from February 2020 to October 2021

(Source: Smith et al., 2022)

The figure shows three line graphs of the rate of active cases of COVID 19 in 100,000 population in three Canadian provinces namely Ontario, Quebec and Alberta with time. All graphs exhibit numerous waves of the infection with peaks at various points in the month of April to October. Ontario and Quebec are characterized by a few moderate peaks, whereas Alberta has sharper and more pronounced waves.

Under the graphs, color-coded markers show Recruitment (blue) and Interviews (yellow) and hint at when the activities involving the study will occur, in respect to the waves of infections. In

general, the figure shows that the rate of COVID-19 cases varied unevenly between the three provinces and report activities were adjusted to these dynamics.

The federalism of Canada has to strike a balance between national coordination and provincial autonomy. The national response was guided by the Public Health Agency of Canada (PHAC) though the delivery of healthcare and management of emergencies was mainly the responsibility of the provinces. Consequently, the hybrid model was adopted in Canada which embraced the centralisation and decentralisation aspects. This hybrid model is a dynamic response to socio-political conditions in Canada. The government of Prime Minister Justin Trudeau was based on the principle of collaborative federalism which coordinated with provincial premiers by means of constant communication, data sharing and contractual funding (Dinan and Béland, 2025). As the federal government provided nationwide guidelines and financial aid, provinces remained in charge of lockdown, vaccine distribution and institutional shutdowns.

This joint leadership is consistent with the participative style of the path-goal theory, according to which the leaders facilitate decision-making and empower the regional authorities to meet common goals. Trudeau showed understanding communication and articulation of goals, which contributed to the unity of the country through the local differences. An example is that Ontario and Quebec had more stringent lockdowns compared to other provinces, with the federal government facilitating the acquisition of vaccines and controlling the borders (Allin *et al.*, 2022). The Tannenbaum and Schmidt Continuum once again explain how Canada has been gradually shifting its directive and participative leadership, based on the pressures in a situation. In the first outbreak, the leadership was more of centralisation and there was powerful federal direction on any restrictions on travelling and economic support. Following the changes in the conditions, the provinces acquired a larger latitude of decision-making, which is reflective of adaptive hybridisation.

However, the models had drawbacks that presented coordination problems as there was no consistency in the collection of data, communication between federal and provincial health agencies was delayed and, in some provinces, there was politicisation of the health measures. The Public Health Agency of Canada can be under attack due to the lack of first testing materials and confusing information about masks. Regardless of these flaws, the leadership of Canada enjoyed great public trust as opposed to most of the Western counterparts. Transformational leadership qualities were evident with the focus on transparency, empathy and inclusiveness which encouraged the development of resilience in the group (Kathmandu, 2024). In the

contingency perspective, the hybrid model succeeded as it could fit the federal system of governance in Canada and cultural demands of collective responsibility.

3. Critical Analysis of the Leadership Styles taken in each Country

3.1 Leadership Styles in Spain

The response of Spain to the COVID 19 pandemic has been marked through a combination of the centralized crisis governance, political fragmentation, and a leadership approach which shifted within a long time period. President Pedro Sánchez and his government primarily depended on a centralized command structure that declared a national state of alarm and temporarily restricted regional autonomy (Rodríguez-Teruel *et al.* 2024). This links with the Tannenbaum and Schmidt Continuum, where Spain has moved towards the autocratic/leader-centred side at the critical stage. In situations of national emergency, this shift is understandable and consistent with the view that the high-pressure environments need centralized, decisive control for minimizing the ambiguity. The leadership of Spain during early 2020 might be interpreted through the Fiedler's Contingency Model that argues effectiveness of leadership relies on the match between a style of a leader and the situational favourableness. Spain deals with highly unfavourable conditions such as rapid infection rates, an overstretched healthcare system, and conflicting regional political identities. The leadership in Spain led by Prime Minister Pedro Sanchez was more aligned to the autocratic spectrum in the initial stages of the pandemic with a focus on control and authority. This strategy kept the national discipline but restricted the innovation of leaders of the various regions and the health agencies which had the important local intelligence.

In this context, Sánchez, who is sometimes demonstrated as a consensus builder with a relationship-based leadership style that found himself forced into the task-based directives. This mismatch also contributed to late communication, improper restrictions as well as public confusion. Here, the contingency theory notes that a suitable situation for relationship-based leaders needs a stable environment and a high leader member trust conditions absent in Spain's largely decentralised political context. On the other hand, Path Goal Theory also explains limitations in Spain's early crisis response (Garcia Calvo and Coulter, 2022). The theory recommended that leaders must adapt their styles such as directive, supportive, participative, or achievement-based depending on the task complexity and subordinates. Spain primarily takes a directive approach such as strict lockdowns, national curfews. Therefore, considering the complexity of Spain's regional governance and the cultural expectations of decision-making, a

highly participative approach that includes regional presidents earlier should have improved the overall compliance and the policy adherence.



Figure 6: Path Goal Theory

(Source: Garcia Calvo and Coulter, 2022)

The complex decentralized system of Spain where the autonomous communities control the healthcare, clashes with the temporary re-centralisation imposed by Madrid. This hybrid structure neither totally centralized nor entirely decentralized that led to some coordination problems. The literature on the centralised vs. decentralised leadership recommend that the centralisation enhances the overall speed and uniformity, while the decentralization improves the responsiveness of the local peoples. Spain experienced both the extreme initial strong centralization that was followed by the rapid decentralization once the infection curves fell (Navarro and Velasco, 2022). This oscillation described the shortcomings of the inconsistency and further emphasized through the situational leadership theory that states the effectiveness of leadership decreases when the leaders shift styles without readiness of the stakeholders. On the other hand, the leadership of Spain also has advantages in the COVID 19 situations. Centralization helped slow the overall spread during the first wave through achieving compliance through transparent directives in the country.



Rich Diagram 1: Spain Context

(Self-developed)

In this context, the central government has also mobilized the military resources (UME) effectively in terms of the health emergencies, which is a move adhered directive, task-oriented leadership. When Spain transitioned to shared management with regions, the participatory governance model helped the local governments to tailor measures to the level of infections, enhancing the agility as well as targeting. Therefore, some disadvantages are also there including political polarization, improper communication along with the public mistrust. In this context, situational leadership theory emphasizes that the readiness of followers and confidences always shapes the outcomes and Spain's fragmented political landscape undermines national unity. In addition, trust in the political organizations declined that negatively influenced links to the healthcare guidelines. The pandemic leadership shows the overall complexities of various contingent models within a context of the decentralized democrats (Greer *et al.* 2022). While the primary centralized, directive approach effectively controlled the early transmission and the subsequent fluctuation in the authority between the regional and the central government exposed massive coordination weaknesses. In this context, leadership theory recommends that the crisis seeks stable, adaptive and also collaborative governance. However, political realities hindered this required links and described all practical difficulties in implementing various theoretical leadership models when

eliminating complicated and decentralized political systems during the nationwide crisis or emergency.

3.2 Leadership Style in South Korea

South Korea has emerged as the global exemplar in the pandemic response because of its hugely coordinated, technology based as well as decentralized but adopted leadership approaches. President Moon Jae-in together with the Korea Centers for Disease Control and Prevention (KCDC, later upgraded to KDCA) has adopted a leadership style that is grounded in evidence-oriented, transparency and rapid action. This approach closely shows principles of the behavioural and situational leadership theories, both of which emphasise the adaptability, problem-based behaviour and a consistent communication during the uncertainty periods. South Korea's leadership described a strong link with the Path Goal Theory, especially the participative and supportive orientations. Instead of depending on the strict nationwide lockdowns, the government has encouraged voluntary public cooperation through delivering clear information dashboards, holding frequent press briefings, and using rational persuasion in order to justify the decisions of policy (Kambli *et al.* 2021). Leaders effectively mitigated all the obstacles which might hinder compliance, and testing has been made free and accessible widely, drive-through and walk-through centres were rapidly established, and an advanced digital contact-tracking system has also been deployed.

Through minimizing ambiguity and improving citizens' sense of security, the leadership of South Korea fulfilled the Path Goal theory's core needs of clarifying the route to some expected outcomes and creating an enabling environment for public participation. The Tannenbaum and Schmidt Leadership Continuum is also useful for understanding the South Korean case, which fell on the democratic/participative side but blended in strategic authoritarianism when needed (Zander, 2024). For example, although the public was encouraged rather than forced to follow guidelines, some such tools mandatory mask-wearing and technology-based monitoring of quarantine compliance revealed a more directive style of leadership. This mixed model was successful in a high-trust society with strong digital infrastructure and fresh recollection of the previous MERS (2015) epidemic. Institutional preparedness had been strengthened, and citizens' expectations for collaborative crisis management shaped by previous public health crises. The argument of contingency leadership is that in situations where followers are more mature and hold high level of institutions' capacity, participative leadership will be effective, this premise finds support in South Korea. A proper understanding of South Korea's success may also be drawn

from the Fiedler's Contingency Model that emphasizes the match between the situational favorableness and leadership style.



Figure 7: South Korean humanistic leadership

(Source: Chung *et al.* 2022)

The pandemic has created favorable conditions for President Moon's predominantly relationship-based leadership style. In addition, the government also enjoyed a relatively high public trust, strong public health infrastructure, and institutional memory of earlier outbreaks. These contextual advantages also helped Moon's collaborative orientation to flourish that encouraged a smooth coordination between the scientific experts, national agencies, and local governments. Where the political leadership can also be improper, the improved organizational structure of Korea including the decentralised governance and well-established emergency protocols also acted as the compensating mechanisms that links organizational design may offset the limitations of leadership style. However, the networked governance system was one of the effective and strongest assets in South Korea (Chung *et al.* 2022). Here, a local government was free to implement region-specific actions such as testing, temporary shutdowns, or community surveillance, whereas the national government provided centralised data, the same principles of communication, and technological solutions to contract tracing. The new hybrid system of governance is also connected to the existing body of literature on leadership which contends that decentralised systems generally fared better than centralised systems in complex and rapidly changing crises because they enabled agility, local responsiveness and quicker transfer of information. But there are negative consequences on the leadership approach adopted in South Korea.



Rich Diagram 2: South Korea Context

(Self-developed)

The aggressive application of digital surveillance such as GPS data, credit card receipts and closed-circuit camera footage used for contact tracing raised alarms about privacy and data protection. This tactic is culturally acceptable in South Korea, where considerate behaviour based on historical norms and collectivistic values is still favoured, but may not go over as well in societies that hew more closely to individualism or a right to privacy. From a Path Goal standpoint, overly directive leadership behaviour may restrict follower freedom of choice, particularly among high-readiness teams. Moreover, decentralisation generated variation in capacity, South Korea, 24 Mar 2020 Byung Chul Chun while large cities such as Seoul and Daegu were able to respond quickly, smaller cities sometimes couldn't keep up with the pace of rapid response, revealing unequal allocation of resources (Yuan, 2021). Yet, although limited in some regards, South Korea's leadership style showed that a situational-based, flexible and transparent approach underpinned by sound public institutions can dramatically improve the effectiveness of

crisis response. An early border check, extensive test systems and isolation infrastructure, and consistent communication were in harmony with what the situation called for a well-adjusted balance between style of leadership and demands of the situation, made South Korea one of the world's best examples of pandemic governance.

3.3 Leadership Style in Canada

The pandemic response of Canada was entirely shaped through collaborative federal leadership, strong engagement with the scientific experts and also a blend of participative and directive leadership styles (Hartney *et al.* 2022). Prime Minister Justin Trudeau takes a communication-based and empathetic approach which is centered on reassuring the promoting and public unity. His daily national briefings, emphasis on the gratitude towards the frontline workers as well as transparent sharing of some scientific information that shows relationship-oriented behavioural leadership that prioritizes emotional support, trust-building, and maintaining morale. The leadership structure of Canada decentralized as territories and provinces hold the constitutional authority over healthcare, education, and many public health decisions. This federal division is important in terms of applying the contingency-oriented theories.

As per the contingency theory, proper leadership relies on taking to situational and structural conditions (Mark and Erude, 2023). Churchill describes the selective wielding of authority by Trudeau's federal government, which controlled border closures and vaccine procurement as well as stabilising the economy but left the timing and severity of lockdowns, school shutdowns and local health measures to provincial leaders. In a setting where an entirely centralised national approach was not constitutionally possible, leadership that worked in concert became desirable, if not mandatory. Path Goal Theory also provides information into the approach of Canada. The consistency of Trudeau utilized a participative and supportive leadership style that images in consultations with the provincial premiers, Indigenous leaders, health experts, and community representatives. The federal government also minimized all types of barriers for citizens through applying one of the most detailed economic support packages towards the world including the Canada Emergency Response Benefit (CERB), wage subsidies, rent relief mechanisms, and business support. In this context, Fiedler's Contingency Model allows to explain the challenges that are faced by Canada's leadership, especially at the federal level.

Fiedler's Contingency Model also allows to explain the challenges and limitations dealt by Canada's leadership, especially at the federal level. Canada entered the pandemic with

moderately unfavourable leadership conditions that have characterized through diverse provincial capacities, varying political ideologies, and uneven public health infrastructure (Smith *et al.* 2023). Trudeau's socioemotional leadership style worked well for national communication and public reassurance, but not as well in situations where he needed a more directive, task-oriented approach. According to Fiedler, if situational control is low directive behaviour becomes important. Canada's constitutional ambivalence regarding the imposition of more stringent federal mandates also shaped inconsistent provincial responses, particularly in subsequent waves when aggressive nation-wide action was necessary.

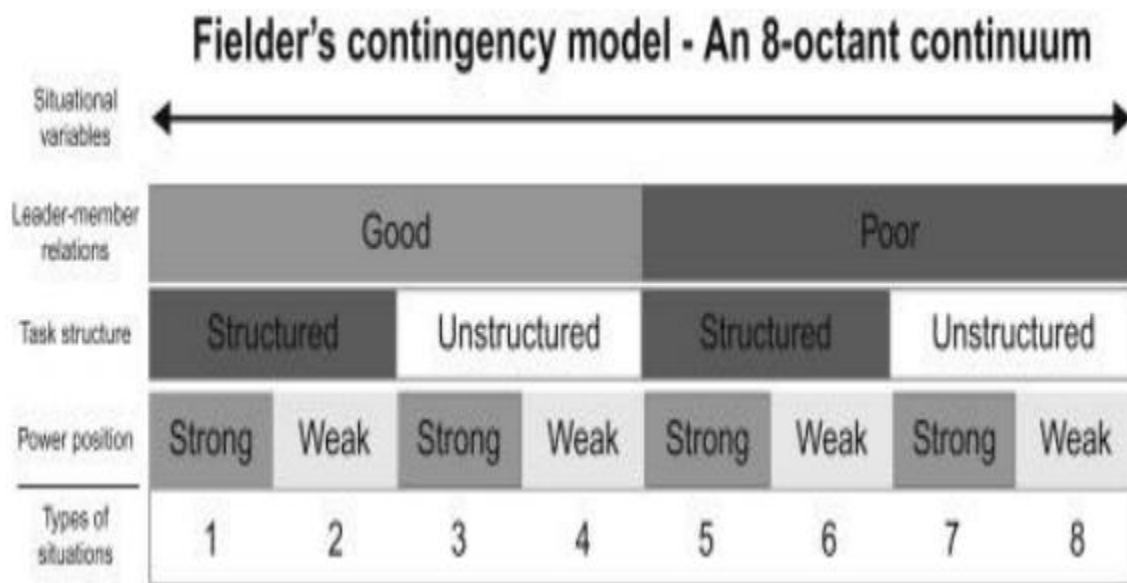
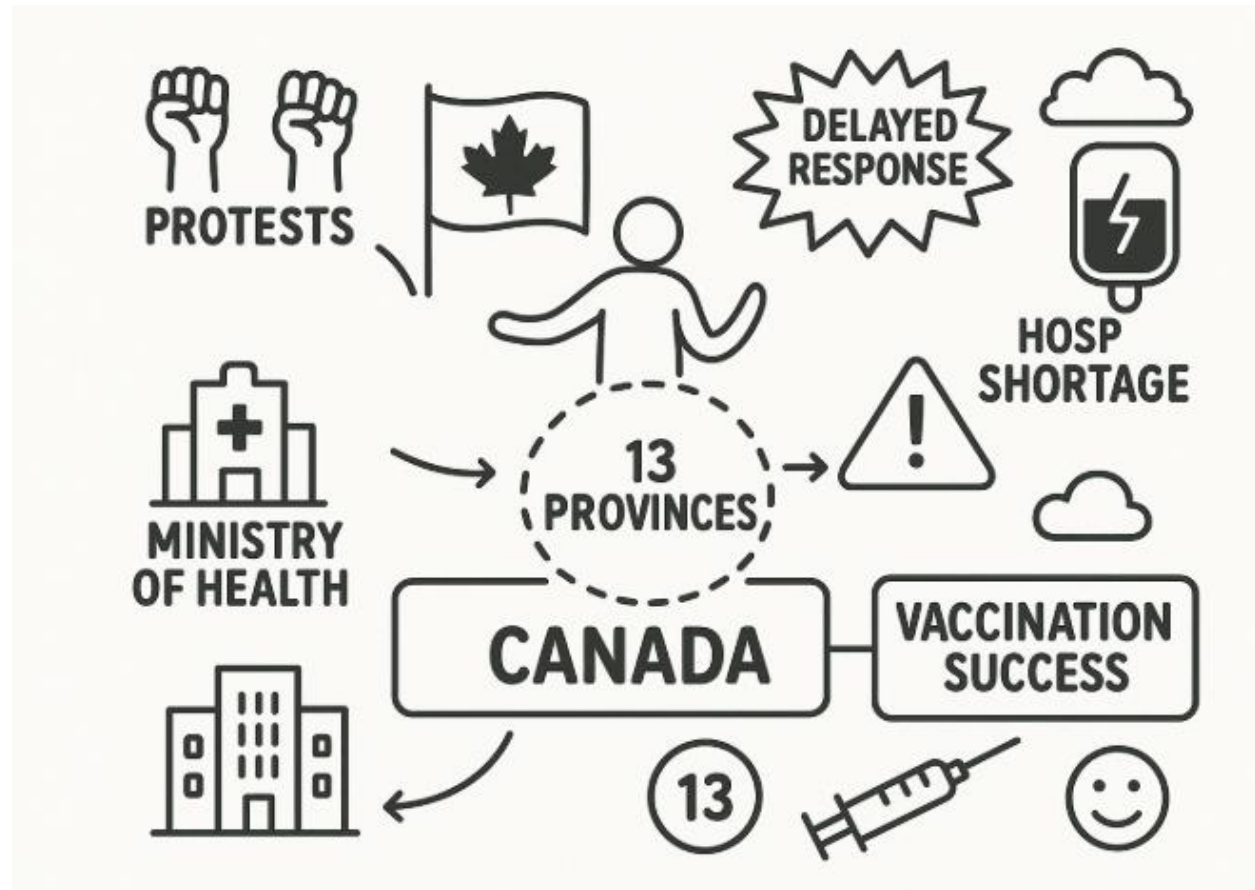


Figure 8: Fiedler's Contingency Model

(Source: Mark and Erude, 2023)

These dynamics are further elucidated by the centralised versus decentralised systems of leadership debate. Decentralisation gave provinces a way to respond more locally based on their unique epidemiological situation, which was beneficial where public health systems were strong and leadership clear, as in British Columbia (Jarvis *et al.* 2023). At the same time, it has encouraged divisive and uneven results throughout the nation. As in a case in Ontario, where the restriction of movement of long-term care workers is delayed, the absence of leadership can occur also within a decentralised system, even in a highly developed country. The leadership of Canada during the pandemic also fits the Tannenbaum-Schmidt Leadership Continuum, as Trudeau is at almost all times focused on the participative end. He encouraged group decision making and

decentralized to his scientific advisors, particularly the Chief Public Health Officer Dr. Theresa Tam. This model has made national interventions more so democratic, and people are more assured with such interventions whereas such approach had sometimes resulted in slower intervention.



Rich Diagram 3: Canada Context

(Self-developed)

The political disparity between the provinces and the extra scandals related to the vaccination obligatory would serve as the confirmation that the long-run crisis strategy of the practice of participative leadership did not turn out quite as well as it seemed. Some salient privileges intensive dialogue, high transparency rates, it was slightly fortunate that the leadership in Canada had an easy sail as the monetary interventions were preliminary and there was intense absorption of health knowledge into the political decision-making process (IJzerman et al. 2025). Such strengths had contributed to maintaining high levels of trust and compliance of the people in the

initial waves. But the drawbacks were divided provincial responses, slow progress in national policy harmonization and significant differences in leadership standard between regions.

4. Comparative discussion

4.1 Comparative Discussion

According to the pandemic, the role of leadership structure and situational fit in performance in a crisis situation is decisive. The centralised response in Spain was originally agile in that it placed more emphasis on control. The governance of South Korea was decentralised, data-driven and utilised trust and technology and has led to fast containment. The hybrid model of Canada combined both coordination and autonomy resulting in moderate success in both health and economic outcomes.

Table 1: Comparative Discussion among Spain, South Korea and Canada

Country	Structure	Strengths	Weaknesses	Leadership Theory Alignment
Spain	Centralised (later hybrid)	Uniform initial response, strong national control	Slow reaction, regional conflict, public mistrust	Contingency Theory (mismatch to context), Autocratic end of Tannenbaum-Schmidt
South Korea	Decentralised (adaptive coordination)	Quick response, innovation, citizen trust	Early inconsistencies, surveillance concerns	Path–Goal and Contingency Theories (situational fit), Democratic end of Tannenbaum-Schmidt

Canada	Hybrid Federal	Balanced autonomy, empathy-driven communication	Coordination delays, data inconsistencies	Contingency and Path–Goal (participative leadership)
---------------	----------------	---	---	--

The Contingency Theory emphasizes the fact that effectiveness is a result of context-based leadership approach. The South Korean case was a good example of such alignment, which involves its decentralised design, supported by trust and technology, and suitably aligned with its high-capacity institutional environment. The failure of Spain was due to incongruency, a centralised strategy on a politically decentralised system. Canada, in its turn, gained a moderate alignment with the help of cooperation and flexibility.

The Tannenbaum and Schmidt Continuum go on to show how effective leaders were able to change styles dynamically. The participative approach of South Korea involved several stakeholders; Canada shifted between directive and supportive roles and the top-down approach of Spain did not allow flexibility.

In a more general sense, the pandemic demonstrated the power of hybrid leadership, which entails combining central coordination with local flexibility as the best in difficult times. This type of leadership enables quick decision-making on the highest level and retains local responsiveness and creativity.

4.2 Learned Lessons and Theoretical Implications

The comparative analysis provides three important lessons to leadership theory and practice.

Situational Adaptability

Leadership should have a contextual dynamism. The initial stage of the outbreak may require centralisation as it should switch to decentralisation when the local dynamics emerge. This reflects flexibility which is postulated by the Contingency Theory.

Collaborative Governance

The pandemic once again made the relevance of participative decision-making and inter-government relations. It was revealed that the interaction between the levels of government promotes responsiveness and legitimacy in South Korea and Canada.

Trust and transparency

The effectiveness of the decentralized leadership models on effective communication and trust of the people. The emphasis on goal elucidation and assistance of subordinates in which the Path-Goal Theory is founded on can be directly translated into active citizen participation during crisis.

Hybridisation as the Future

Balanced Hybrid relationship in between centralised coordination and decentralised execution provides resilience in uncertain situations. This model gives the reflection of the shift in modern leadership to flexibility, inclusiveness and network-based governance.

5. Conclusion

The comparative analysis reveals that effective pandemic leadership depends on adaptability, collaboration, and contextual awareness. Spain's rigid centralisation limited responsiveness, while South Korea's decentralised and transparent model demonstrated strong contingency alignment and citizen trust. Canada's hybrid federal approach balanced national coordination with regional flexibility, reflecting participative and transformational leadership traits. Applying Contingency and Path-Goal theories highlights that no single leadership model ensures success, rather, effectiveness arises from aligning leadership behaviour with situational demands. Ultimately, nations that fostered trust, clear communication and shared accountability demonstrated greater resilience and societal cohesion during the unprecedented challenges of COVID-19.

References

- Allin, S., Fitzpatrick, T., Marchildon, G.P. and Quesnel-Vallée, A., 2022. The federal government and Canada's COVID-19 responses: from 'we're ready, we're prepared'to 'fires are burning'. *Health Economics, Policy and Law*, 17(1), pp.76-94. https://www.cambridge.org/core/services/aop-cambridge-core/content/view/1CFABDD4171F60FE43F4059165E4251C/S1744133121000220a.pdf/federal_government_and_canadas_covid19_responses_from_were_ready_were_prepared_to_fires_are_burning.pdf
- Chu, C., 2025. Effect of the establishment of the Korea Centers for Disease Control and Prevention/Korea Disease Control and Prevention Agency from the perspective of global health security. *Global Health & Medicine*, 7(2), pp.141-150. https://www.jstage.jst.go.jp/article/ghm/7/2/7_2025.01015/_pdf
- Chung, C.S., Choi, H. and Cho, Y., 2022. Analysis of digital governance transition in South Korea: Focusing on the leadership of the president for government Innovation. *Journal of Open Innovation: Technology, Market, and Complexity*, 8(1), p.2. <https://www.mdpi.com/2199-8531/8/1/2>
- Dighe, A., Cattarino, L., Cuomo-Dannenburg, G., Skarp, J., Imai, N., Bhatia, S., Gaythorpe, K.A.M., Ainslie, K.E.C., Baguelin, M., Bhatt, S., Boonyasiri, A., Brazeau, N.F., Cooper, L.V., Coupland, H., Cucunuba, Z., Dorigatti, I., Eales, O.D., van Elsland, S.L., FitzJohn, R.G. and Green, W.D. (2020). Response to COVID-19 in South Korea and implications for lifting stringent interventions. *BMC Medicine*, [online] 18(1). doi:<https://doi.org/10.1186/s12916-020-01791-8>.
- Dinan, S. and Béland, D., 2025. Federalism and Social Policy Expansion in Canada during the Justin Trudeau Era. *Publius: The Journal of Federalism*, 55(2), pp.379-398. <https://doi.org/10.1093/publius/pjae049>
- Ergenc, C. and Yuksekkaya, O., 2024. Institutionalizing authoritarian urbanism and the centralization of urban decision-making. *Territory, Politics, Governance*, 12(3), pp.410-429. <https://doi.org/10.1080/21622671.2021.2020156>
- Ferrari, F., 2024, November. Path-Goal Theory and Followers' Work Engagement: An Empirical Exploration of the Situational Leadership Approach. In *Proceedings of the European Conference on Management, Leadership and Governance* (Vol. 20, No. 1, pp. 182-

191).https://www.researchgate.net/profile/Filippo-Ferrari-2/publication/385850904_Path-Goal_Theory_and_Followers%27_Work_Engagement_An_Empirical_Exploration_of_the_Situational_Leadership_Approach/links/6737692ea78ba469f062a896/Path-Goal-Theory-and-Followers-Work-Engagement-An-Empirical-Exploration-of-the-Situational-Leadership-Approach.pdf

Garcia Calvo, A. and Coulter, S., 2022. Crisis, what crisis? Industrial strategies and path dependencies in four European countries after the crash. *Journal of economic policy reform*, 25(3), pp.191-210. <https://eprints.lse.ac.uk/106497/1>

Greer, S.L., Rozenblum, S., Falkenbach, M., Löblová, O., Jarman, H., Williams, N. and Wismar, M., 2022. Centralizing and decentralizing governance in the COVID-19 pandemic: The politics of credit and blame. *Health Policy*, 126(5), pp.408-417. <https://www.sciencedirect.com/science/article/pii/S0168851022000604>

Hamada, A.H., 2025. Multilateral Organizations and Health Emergency Management During Crisis: The Case Study of The World Health Organization During Covid-19 Pandemic.<https://fount.aucegypt.edu/cgi/viewcontent.cgi?article=3675&context=etds>

Hartney, E., Melis, E., Taylor, D., Dickson, G., Tholl, B., Grimes, K., Chan, M.K., Van Aerde, J. and Horsley, T., 2022. Leading through the first wave of COVID: a Canadian action research study. *Leadership in Health Services*, 35(1), pp.30-45. <https://www.tandfonline.com/doi/pdf/10.1080/21622671.2022.2101513>

Hong, S.A., 2024. Toward better pandemic governance and preparedness: South Korea's whole-of-nation approach to COVID-19. *BMC Public Health*, 24(1), p.2126. <https://doi.org/10.1186/s12889-024-19655-8>

IJzerman, R.V.H., Van Der Vaart, R., Breeman, L.D., Kraaijenhagen, R.A., Evers, A.W.M., Scholte Op Reimer, W.J.M. and Janssen, V.R., 2025. Implementation of a complex eHealth intervention by a public–private partnership in clinical practice: a qualitative multicentre analysis using CFIR. *Health Education Research*, 40(2), p.cyaf001. <https://academic.oup.com/her/article-pdf/40/2/cyaf001/62047051/cyaf001.pdf>

Jarvis, T., Smith, R.W., Sandhu, H.S., Mac-Seing, M., O'Neill, M., Rosella, L., Allin, S. and Pinto, A.D., 2023. Promise and peril: how health system reforms impacted public health in three

Canadian provinces. *Canadian Journal of Public Health*, 114(5), pp.714-725.
<https://link.springer.com/content/pdf/10.17269/s41997-023-00785-2.pdf>

Kambli, N., Waud, A., Basford, M., McBride, K. and Zur-Clark, A., 2021. Rapid review of international evidence on Covid-19 communication and public engagement.
<https://www.rsecovidcommission.org.uk/wp-co>

Kathmandu, N., 2024. Transformative leadership: Exploring the role and responsibilities of teachers and student leaders practicing leadership in higher secondary education in Nepal.
https://www.researchgate.net/profile/Father-Boby-Thadathil/publication/387455706_Transformative_leadership_Exploring_the_role_and_responsibilities_of_teachers_and_student_leaders_practicing_leadership_in_higher_secondary_education_in_Nepal/links/676e6bb3fb9aff6eaaef15c2/Transformative-leadership-Exploring-the-role-and-responsibilities-of-teachers-and-student-leaders-practicing-leadership-in-higher-secondary-education-in-Nepal.pdf

Kim, P.S., 2021. South Korea's fast response to coronavirus disease: implications on public policy and public management theory. *Public Management Review*, 23(12), pp.1736-1747.
<https://www.academia.edu/download/72627105/14719037.2020.pdf>

Mark, T. and Erude, S.U., 2023. Contingency theory: An assessment. *American Journal of Research in Business and Social Sciences*, 3(2), pp.1-12.
https://www.researchgate.net/profile/Shalom-Erude/publication/374742152_Contingency_Theory_An_Assessment/links/652cf0441a05311a2305cf6c/Contingency-Theory-An-Assessment.pdf

Navarro, C. and Velasco, F., 2022. From centralisation to new ways of multi-level coordination: Spain's intergovernmental response to the COVID-19 pandemic. *Local Government Studies*, 48(2), pp.191-210. <https://www.tandfonline.com/doi/pdf/10.1080/03003930.2022.2042683>
<https://www.tandfonline.com/doi/pdf/10.1080/03003930.2022.2042683>

OECD., 2024. *OECD Survey on Drivers of Trust in Public Institutions 2024 Results - Country Notes: Spain*. [online] Available at: https://www.oecd.org/en/publications/oecd-survey-on-drivers-of-trust-in-public-institutions-2024-results-country-notes_a8004759-en/spain_56998449-en.html.

Ohrling, M., Solberg Carlsson, K. and Brommels, M., 2022. No man is an island: management of the emergency response to the SARS-CoV-2 (COVID-19) outbreak in a large public decentralised service delivery organisation. *BMC Health Services Research*, 22(1), p.371.<https://doi.org/10.1186/s12913-022-07716-w>

Rajan, J.B., 2022. CONTINUUM OF AUTOCRACY AND HYPOCRITE DEMOCRACY: EXPLORATIONS IN ORGANISATIONAL LEADERSHIP. *International Journal of Management (IJM)*, 13(11).https://www.researchgate.net/profile/Rajan-Jb/publication/368873683_CONTINUUM_OF_AUTOCRACY_AND_HYPOCRITE_DEMOCRACY_EXPLORATIONS_IN_ORGANISATIONAL_LEADERSHIP/links/63fe542157495059454f960d/CONTINUUM-OF-AUTOCRACY-AND-HYPOCRITE-DEMOCRACY-EXPLORATIONS-IN-ORGANISATIONAL-LEADERSHIP.pdf

Rodríguez-Teruel, J., Del Pino, E. and Real-Dato, J., 2024. The Limits of Power Concentration and Expert Knowledge in Emergency Management: Spain's Government Response during the First Phase of the Covid-19 Pandemic. In *Southern Europe in The Covid-19 Pandemic* (pp. 56-88).

Routledge.<https://api.taylorfrancis.com/content/chapters/edit/download?identifierName=doi&identifierValue=10.4324/9781003519126-3&type=chapterpdf>

Smith, R.W., Jarvis, T., Sandhu, H.S., Pinto, A.D., O'Neill, M., Di Ruggiero, E., Pawa, J., Rosella, L. and Allin, S., 2023. Centralization and integration of public health systems: Perspectives of public health leaders on factors facilitating and impeding COVID-19 responses in three Canadian provinces. *Health Policy*, 127, pp.19-28.
<https://pmc.ncbi.nlm.nih.gov/articles/PMC9681988/pdf/main.pdf>

Smith, R.W., Jarvis, T., Sandhu, H.S., Pinto, A.D., O'Neill, M., Di Ruggiero, E., Pawa, J., Rosella, L. and Allin, S. (2022). Centralization and integration of public health systems: Perspectives of public health leaders on factors facilitating and impeding COVID-19 responses in three Canadian provinces. *Health Policy*, [online] 127, pp.19–28.
doi:<https://doi.org/10.1016/j.healthpol.2022.11.011>.

Ujunwa, M.D. and Danbeki, M.D., 2022. Understanding leadership in a formal organization: overview, roles, and theories. *Public administration: theory and practice in Nigeria. Theory and practice in Nigeria*, pp.138-

154. https://www.academia.edu/download/116895474/BOOK_CHAPTER_CONTRIBUTION.pdf#page=160

Vampa, D., 2021. COVID-19 and territorial policy dynamics in Western Europe: comparing France, Spain, Italy, Germany, and the United Kingdom. *Publius: The Journal of Federalism*, 51(4), pp.601-626. <https://academic.oup.com/publius/article-pdf/51/4/601/40355010/pjab017.pdf>

Yuan, E.J., 2021. Governing risk society: the socio-technological experiences of China and South Korea in the COVID-19 pandemic. *Asian Journal of Communication*, 31(5), pp.322-336. https://www.researchgate.net/profile/Elaine-Yuan-3/publication/350831223_Governing_risk_society_the_socio-technological_experiences_of_China_and_South_Korea_in_the_COVID-19_pandemic/links/60fa8877169a1a0103af2bb2/Governing-risk-society-the-socio-technological-experiences-of-China-and-South-Korea-in-the-COVID-19-pandemic.pdf

Zander, L., 2024. Interpersonal leadership across cultures: a historical exposé and a research agenda. *International Business Research*, pp.38-61. <https://api.taylorfrancis.com/content/chapters/oa-edit/download?identifierName=doi&identifierValue=10.4324/9781003459903-5&type=chapterpdf>