Roskilde University
Department of Social Sciences and Business

Policy Brief

SECURE Policy Brief Series No. 3
September 2026

Chronic Crises

Implications of extraordinary situations with no end in sight

Colourbox, photograph by Heiko Küverling

Authors
Professor Olivier Rubin, PhD
https://forskning.ruc.dk/da/persons/rubin/
Centre for Societal Security and Resilience (SECURE)
Department of Social Sciences and Business
Roskilde University

Publisher
SECURE: Centre for Societal Security and Resilience, Roskilde University
https://ruc.dk/en/research-centre/centre-societal-security-and-resilience

SECURE
Roskilde University

ISBN 978-87-7240-027-3

Introduction

Crisis management systems are often designed around the assumption that crises are temporary disruptions (1). A crisis is expected to emerge, escalate, and eventually give way to recovery, normalization, or a post-crisis phase (2). This understanding remains important for condensed crises triggered by sudden events such as earthquakes, industrial accidents, terrorist attacks, or extreme weather events. However, many serious crises do not follow this temporal pattern. Instead, they persist for years or decades, continue to produce harm, and resist clear resolutions.

This Policy Brief focuses on such chronic crises. Chronic crises are prolonged crisis conditions that generate recurring and direct harm over extended periods of time. They are not merely crises with long-term adverse consequences. Most major crises cast long shadows especially for vulnerable groups. Chronic crises are different because they remain actively ongoing, and they continue to directly affect lives and livelihoods much like a volcano that keeps erupting. Chronic crises such as climate change, antimicrobial resistance (AMR), famine, waves of starvation deaths, HIV/AIDS, and COVID-19 each illustrate different ways in which crisis conditions may become prolonged, normalized, and difficult to end.

Chronic crises are related to, but distinct from, the concept of creeping crises. Creeping crises usually refer to risks that emerge gradually, attract insufficient attention, and are recognized as crises only after a long period of warning signs or precursor events (3). The focus is therefore mainly on the onset phase of crisis. Chronic crises shift the temporal focus from the onset to the end-phase. A crisis may begin suddenly, as COVID-19 arguably did, and still become chronic. The chronic crisis concept is therefore reserved for crisis conditions that remain actively ongoing and continue to produce serious adverse consequences over an extended period.

The argument is not that chronic crises are unique to the present. Societies have lived with prolonged and recurring crises throughout history. What is distinctive today is not necessarily the existence of chronic crises but the expectation that governments can and should govern them. This makes chronic crises especially important for contemporary crisis management. The basic challenge is that many chronic crises cannot be solved quickly; instead, they require sustained political commitment over many years. While crisis governance is often primed to acute mobilization when the threat is visible, urgent, and politically salient, chronic crises stretch across political cycles, administrative routines, institutional mandates, and even generations. It is often unclear when the crisis is over, who has the authority to declare it solved, and what level of chronic harm societies must accept as normal.

This creates distinct challenges for policymakers. Chronic crises require sustained political attention, long-term coordination, and the ability to adjust responses over time. Yet, they often compete with more immediate threats, lack clear institutional ownership, and necessitate political costs in the present while offering uncertain benefits in the future. As a result, chronic crises may increasingly be handled as routine or endemic conditions rather than as crisis governance.

Colourbox, photograph by #221861

Identified Challenges

Chronic crises do not follow the usual rhythm of crisis management: rapid escalation, urgent response, and eventual recovery. Four challenges are especially pertinent for policymakers.

1. Crisis systems are better at mobilizing than sustaining

Crisis governance is built for a sprint rather than a marathon. This creates a mismatch between the protracted temporality of chronic crises and the short-term temporal logic of crisis governance. Political leaders, agencies, experts, and citizens may accept extraordinary measures for a limited period. Over time, however, staff may become overstretched, resources are redirected, and administrative systems return to routine operations. Yet, chronic crises require institutions that can maintain capacity, resources, and accountability after the acute phase has passed.

2. Political attention fades before the crisis ends

Chronic crises often lose political urgency before they stop producing harm. Unlike condensed crises, which force themselves onto the political agenda because they are sudden, visible, and disruptive, chronic crises can fall into the background conditions of social and political life. Continued harm becomes normalized in political and administrative life even as affected vulnerable groups continue to experience it as acute and damaging. The longer a crisis lasts, the easier it becomes for decision-makers to redirect attention to problems that appear more immediate. Climate change, AMR, famine, and HIV/AIDS all require sustained commitment, but political systems tend to reward shorter-term visibility and problem-solving. The governance challenge is therefore not only to recognize chronic crises, but also to resist what Jared Diamond has termed “creeping normalcy”: the gradual acceptance of continuing adverse effects as ordinary background suffering (4).

3. Crisis endings become ambiguous

Ending or downscaling chronic-crisis responses is politically and administratively difficult. In acute crises, termination can often be linked to visible markers: the fire is extinguished, the flood recedes, the rescue operation ends, or the immediate danger has passed. Chronic crises rarely offer such clarity. Famines may be reclassified; pandemics may shift status from emergencies to endemic health challenges; and still other crises (climate change and AMR) have no meaningful endpoint within the usual political cycles. Without explicit criteria, governments risk either withdrawing too early or maintaining exceptional measures long after they are justified.

4. Ownership of the overall crisis picture becomes unclear

Chronic crises often cut across sectors, levels of government, disciplines, and national borders. Climate change, AMR, food crises, and pandemics all involve multiple agencies, sectors, and countries. The longer a crisis lasts, the greater the risk that responsibility becomes fragmented, as responsibilities and costs become increasingly locked into existing institutional arrangements. Coordination becomes difficult when no single actor is responsible for monitoring long-term developments, maintaining the overall crisis picture, or being held accountable when the crisis persists. This also makes it unclear who has responsibility for determining whether the crisis is improving, worsening, or becoming normalized.

Policy Implications

Emergency agencies are often well suited to managing sudden-onset crises that require rapid short-term mobilization and coordination. Chronic crises require something else, namely institutional arrangements that can sustain attention, adapt over time, and manage crisis conditions that do not have clear endpoints. The four policy implications below respond directly to the four challenges identified above.

1. Plan for long-term crisis response

Governments and crisis management organizations need to plan not only for escalation but also for sustained engagement over time. This means that crisis planning should include procedures for governing continued crisis conditions over months, years, or even decades. This includes procedures for rotating staff, preserving expertise, documenting decisions, and learning during long crisis periods. Crisis plans should also include standing review points, clear handover procedures, and mechanisms for protecting institutional memory over time when officials change roles, agencies shift attention, or responsibility becomes diffuse. One practical example of a forward-looking review mechanism is the Danish Emergency Management Agency's Pandora Cell, which is a small analytical unit explicitly tasked with challenging established assumptions about crisis dynamics and temporalities (5). Long-term crisis management should therefore be treated as a core planning task rather than an ad hoc extension of acute crisis response.

2. Institutionalize political attention

Evidence-informed decision-making remains essential in crisis response (6). Yet for many chronic crises, the main challenge is not the absence of evidence, but the difficulty of sustaining political attention. Chronic crises often remain well documented while still losing political urgency. Experts and advisory bodies should therefore think not only about producing evidence but also about how evidence travels through political and administrative systems. Without such knowledge brokering, chronic crises risk falling victim to a "curse of complacency," where strong scientific evidence exists but does not reach the stakeholders needed to sustain policy attention (7). This requires broader advocacy coalitions, better knowledge brokering, and more sustained engagement across sectors. Climate change and HIV/AIDS show how broad advocacy coalitions can help keep crises high on the political agenda over time. AMR illustrates how strong scientific evidence might be insufficient for sustained public and political attention. Governments could keep chronic crises on the agenda through regular parliamentary briefings, annual reviews, or standing advisory bodies that assess whether long-term risks are getting better or worse.

3. Review, adapt, and de-escalate crisis measures

Crisis management systems often rely on early warning systems to identify when a risk is emerging. They are less developed when it comes to identifying how and when responses should be ended, reduced, or transformed. Rather than assuming a clear endpoint, governments should treat the transition out of crisis governance as a process that needs to be actively managed – not unlike the end of wars (8). Governments should therefore develop end-phase strategies alongside early warning systems. These strategies should specify who has the authority to determine that a crisis has changed status, what evidence should inform such decisions, and how affected groups should be consulted. They should also include explicit review points, sunset clauses where appropriate, and criteria for deciding whether special funding or extraordinary measures should be continued, scaled down, or ended. Famines show how difficult it can be to declare a crisis over when starvation and deaths continue. COVID-19 showed the difficulty of moving from acute emergency response to routine governance while deaths and disruptions were still ongoing. Crisis management systems should therefore include regular reassessments of whether special interventions and coordination structures are still needed and how they should be adjusted or ended.

4. Assign ownership of the overall crisis picture

Chronic crises often fall between existing institutional responsibilities, and the longer a crisis lasts, the greater the risk that responsibility becomes dispersed. One option is to establish or designate a coordination unit for chronic crises. The point is not to replace existing emergency agencies or centralize crisis management. Rather, its role would be to ensure that chronic crises do not fall between existing mandates. It could identify the most pressing long-term crisis dynamics, track their interconnections, clarify lead responsibilities across agencies, and advise governments on how to prioritize between competing chronic crises.

Conclusion

Chronic crises challenge one of the basic assumptions of crisis management: that crises are temporary disruptions with identifiable beginnings, acute phases, and eventual endings. Many crises do not follow this trajectory. Instead, they persist, mutate, become normalized, and continue to generate harm after the initial sense of urgency has faded.

Existing crisis management systems remain essential for rapid mobilization, emergency response, acute coordination, and immediate protection. The aim is not to keep societies in permanent emergency mode. Rather, crisis systems need to be supplemented by institutions and procedures capable of sustaining attention, assigning responsibility, reviewing measures over time, and deciding when responses should be continued or ended.

The chronic crisis perspective helps policymakers ask not only how crises begin and escalate, but also how they persist, become normalized, and shape lives across generations. Strengthening this capacity is essential for crisis management systems that are not only responsive in moments of acute danger, but also resilient in the face of prolonged and evolving risks.

This SECURE Policy Brief is based on the author's book Chronic Crises: An Exploration of Crises with No End in Sight (Oxford University Press, 2026), open access: https://academic.oup.com/book/62542

1. United Nations Development Programme. (2022). *UNDP's crisis offer: A framework for development solutions to crisis and fragility. UNDP.* www.undp.org/sites/g/files/zskgke326/files/2023-09/undp_crisis_offer_2022.pdf; United Nations Office for Disaster Risk Reduction. (2015). Sendai Framework for Disaster Risk Reduction 2015–2030. www.undrr.org/publication/sendai-framework-disaster-risk-reduction-2015-2030
2. Tokakis, V., Polychroniou, P., & Boustras, G. (2019). Crisis management in public administration: The three phases model for safety incidents. *Safety Science, 113*, 37–43.
3. Boin, A., Ekengren, M., & Rhinard, M. (2020). Hiding in plain sight: Conceptualizing the creeping crisis. *Risk, hazards & crisis in public policy, 11*(2), 116-138.
4. Diamond, J. (2011). *Collapse: how societies choose to fail or succeed: revised edition.* Penguin.
5. Danish Emergency Management Agency. (2016). *Pandora: Forward Looking Cell.* www.brs.dk/globalassets/brs---beredskabsstyrelsen/dokumenter/krisestyring-og-beredskabsplanlagning/2020/-pandorauk-.pdf
6. World Health Organization (WHO). (2022). Evidence, policy, impact: WHO guide for evidence informed decision-making. Report July 8, 2022. www.who.int/publications/i/item/
7. Zaman, A., Rubin, O., & Staupe-Delgado, R. (2024). The challenges experts face during creeping crises: the curse of complacency. *Policy & Politics,* 52(1), 131-152.
8. Reiter, D. (2009). *How Wars End.* Princeton University Press.

Colourbox, photograph by RS prod