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INTERNATIONAL ORGANIZATIONS AND STATES’ RESPONSE TO COVID-19

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On New Year’s Eve, December 31, 2019, we all wished the New 2020 to be better than all the previous ones. We may have heard about a new virus called COVID-19 in the news, but no one took it too seriously. Only three months later, on March 11, 2020, the World Health Organization announced that COVID-19 was being declared a pandemic.

The world has changed dramatically in 2020. The outbreak of the COVID-19 pandemic affected all countries and international organizations. The pandemic did not only cause a health crisis. It has also caused many social, economic, political, legal and strategic implications. Everyday life has changed, the economy is slowing down, democracy, international relations and international law are facing serious challenges. Governments are doing their best to ensure that their countries survive all the struggles and challenges posed by the pandemic.

The COVID-19 pandemic has raised many questions. What are the effects of government restrictions on human rights? A new economic crisis after the pandemic? The effects of a pandemic on interstate relations? Vaccines, vaccine diplomacy and vaccine propaganda. What will the world look like after the pandemic? These are some of the most important and challenging issues related to the pandemic.

Sanja Jelisavac Trošić and Jelica Gordanić from the Institute of International Politics and Economics edited this book entitled “International Organizations and States’ Response to COVID-19”. The Editorial Committee and Reviewers consists of the distinguishing professors and scientists from Russia, Turkey, USA, Slovakia, Poland, China, Serbia, Croatia, Hungary, Italy, Bosnia and Herzegovina. All contributors to this book are valued experts on the topics they write about. Scientific papers were written by authors from Japan, Cuba, Turkey, Egypt, Slovakia, Spain, Serbia, China, Russia, Israel, Poland, Latvia, Hungary, Belarus, France, Italy and Bulgaria.

According to the topics and research questions covered in this book, the papers are divided into three thematic units: “International organizations’ response to

The first thematic unit “International Organizations’ response to COVID-19” is focused on the responses of the United Nations, the EU, NATO, the World Health Organization, the African Union, the Organization of American States, etc. on the outbreak of COVID-19 pandemic. The authors identified a number of inadequate responses from international organizations to the COVID-19 pandemic. The crisis caused by the pandemic pointed to the functional and organizational shortcomings of many international organizations. The authors noted a drastic slowdown in political and economic cooperation, as well as threats to the stability of individual regions.

In the second thematic unit “States’ response to COVID-19: cooperation and comparison”, the authors examined the comparative perspective of different states and tendencies in the fight against the COVID-19 pandemic. The authors drew attention on economic impact of COVID-19, donor competition, various aspects of inter-states cooperation during the pandemic, socio-economic response to COVID-19 challenges, as well as the narratives during the pandemic. The authors point out that cooperation among states can be one of the mechanisms for reducing the negative effects of the crisis. It is also an effective way to stop harmful economic consequences.

The third thematic unit titled “Individual States’ response to COVID-19” is focused on the states’ measures in the fight against the pandemic. The authors examined the cases and experiences of Latvia, Slovakia, Turkey, France, Hungary, China and Egypt. The authors drew attention to the negative consequences of the pandemic, such as increased unemployment, increased violence against women, violations of the principles of the rule of law, restrictions on human rights, the impact of the COVID-19 on student mobility as well as the strategic opportunities during the pandemic.

In total, 28 papers written by 41 authors all over the world are indicating the importance of the topic and the influence that the COVID-19 pandemic has on all aspects of life, politics, economics, law and security. The authors pointed out all the relevant aspects of international organizations and states’ response to COVID-19. Also, the authors highlighted changes that the international community can expect after the end of the pandemic, such as a possibility of a new economic crisis. The necessity of organizational reform of certain international organizations was pointed out, as well as the importance of inter states cooperation in the fight against the pandemic.

Editors would like to take this opportunity to thank all the authors of this Collection for their diligence in writing articles and analyzes dedicated to the
responses of states and international organizations to the COVID-19 pandemic. We would also like to express our gratitude to the members of the international Editorial Committee and Reviewers. We hope that this Book will be a significant contribution to a better understanding of the effects of the pandemic.

Sanja Jelisavac Trošić, PhD
Jelica Gordanić, PhD
Institute of International Politics and Economics
Editors
INTERNATIONAL ORGANIZATIONS’ RESPONSE TO COVID-19
CONFRONTING AN UNPRECEDENTED CRISIS
WITH LIMITED RESOURCES:
THE AFRICAN UNION’S RESPONSE TO COVID-19

Ahmed Amal¹

Abstract: The COVID-19 crisis has caused many negative repercussions for the African Union, either by imposing the health crisis on African countries or by disrupting the efforts of the African Union to accelerate political and economic integration and restore stability on the continent. The African Union exerts continuous efforts to support African countries’ fragile healthcare systems, coordinate policies among African countries to avoid harmful competition or contradiction, and mobilize international support to bridge the vast resource gap. The African continental organization faced a number of obstacles in confronting COVID-19 because of their complete dependence on imported vaccines, African states’ inability to launch nationwide vaccination campaigns, disagreements between African states over the vision for institutional and financial reforms of the AU, lack of political commitment, and the politicization of the international “Vaccines War”.

On this basis, this paper seeks to review and analyse different types of obstacles that hindered the AU efforts in combating COVID-19 effectively. The paper will be based mainly on data published by the World Health Organization, the African Union and the Africa Centres for Disease Control and Prevention.

Keywords: COVID-19; African Union; Africa Centres for Disease Control and Prevention (Africa CDC); COVID-19 Vaccines Global Access (COVAX); African Integration; Vaccines War.

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INTRODUCTION

The African Union (AU) has gained high aspirations since its establishment to promote integration among African countries and improve the economic and living conditions of its peoples.

The coronavirus pandemic imposed difficult political, financial, and health challenges on the AU when the union was not ready to face a crisis of this magnitude. Exacerbating the crisis further was the attitude of many AU international partners whose COVID-19 support of the African body was not up to par.

This study is meant to investigate the damage the coronavirus pandemic has inflicted on the AU and to review the AU’s multiple-pronged response to COVID-19, including health measures, policy coordination, and resource mobilization. The study analyses the major obstacles and challenges the AU has faced in crafting a concerted response to this pandemic.

Finally, it touches upon the reasons that made the AU unprepared for addressing the pandemic, ranging from internal institutional problems and the implications of the complex AU-international partners’ network of relations to the decline in health policies at the national and continental levels.

EFFECTS OF THE COVID-19 OUTBREAK ON THE AU

In early August 2021, 18 months after the first COVID-19 positive case was reported in Africa, the number of confirmed COVID-19 cases in Africa was 6,866,597 with 174,054 deaths (Africa CDC, 2021c). These figures only represent a small portion of the real situation. This could be attributed to several reasons pertaining to the inability of the health sector in African countries to accurately monitor and track COVID-19 cases given the low rate of COVID-19 diagnostic tests conducted (Chitungo et al., 2020, p.2).

Besides the health indicators and what they generally convey, the pandemic has placed immense pressure on the AU and its efforts towards continental integration through promoting self-reliant national approaches and the adoption of precautionary measures. That is in addition to the hesitance over the AU’s attempts to build a concerted collective response to the pandemic. Overall, the COVID-19’s direct effects on the AU can be detailed as follows:

• Disrupting economic integration between African countries; The AU and African governments’ preoccupation with the novel coronavirus has delayed the launch of the African Continental Free Trade Area (AfCFTA) for six months, from June 2020 to January 2021, following a prolonged period of uncertainty after Benedict Okey Oramah, President of the African Export-Import Bank
(Afreximbank), had postponed the commencement of trading under the AfCFTA (UNDP, 2021, p.71).

- Declining African economic performance; The negative repercussions of the crisis were quickly reflected on Africa’s economy. Three months after the first cases of infection in Africa were recorded, the losses of the African continent were estimated at about $113 billion, in addition to the $65 billion worth of export losses of the top 10 exporting African countries (Gondwe, 2020, p.3). Over time, the economic impact of the pandemic became more severe. The Secretary-General of the AfCFTA announced in June 2021 a 40% decrease in foreign direct investment in Africa compared to pre-pandemic levels. Given these declining indicators, the AU’s plans towards promoting continental economic integration would become the subject of further delays in the future (Soliman, 2021).

- Securitizing national responses; Nationalist individual approaches are still seen by African countries as the most efficient in confronting crises, COVID-19 being no exception. Responding to the pandemic, many African countries have adopted a similar model to China based on greater reliance on coercive tools and invoking security logic in facing “external” dangers. Recognizing the threat of the pandemic as an “external danger”, the situation prompted states to protect their citizens through a series of basic security procedures. In this vein, Kenya presented a revealing case where its security approach gave rise to repeated violations during the application of curfews in the capital, Nairobi, and other major cities. This approach, so widely adopted in Africa, would preclude any regional or continental concerted action (Abderrahman, 2020; Ogunnoiki, 2021, pp. 3-4).

- Promoting protective measures like border closure; The World Bank data indicates that African countries have adopted multiple forms of restricting cross-border flows at an early stage. By the end of March 2020, 32 African countries had put in place restrictions on flights, 31 countries announced the full closure of their land borders, and 10 countries introduced restrictions on the flow of incoming and outgoing goods (Brenton & Chemutai, 2020, p. 2). According to the COVID-19 Travel Regulations Map of the International Air Transport Association (IATA) published in July 2021, all African countries imposed partial restrictions on entry, except Libya and Malawi, where entry was totally restricted (IATA, 2021). Additionally, several African host countries sent immigrants back to their homes to lessen the burden of combating the spread of the pandemic. Between March and June 2020, countries of the Southern African Development Community (SADC) saw the return of 63,000 immigrants to their home countries (SSHAP, 2020, p. 3).
THE AU’S RESPONSE TO COVID-19

The AU responded quickly to the coronavirus on two levels. Directly, the AU provided healthcare support to member states to address the crisis, including the provision of the anti-virus vaccines. Indirectly, the AU played an active role in coordinating COVID-19 policies of its member states to reduce discrepancies that might have limited the effectiveness of the African response and addressing international donors to mobilize large resources with the aim of supporting African countries in dealing with this emergency crisis.

Supporting the African Healthcare System

Traditionally, the AU does not have great healthcare capabilities. Its prominent organizational development in this respect came only three years before the coronavirus emerged, when the role of the Africa Centers for Disease Control and Prevention (Africa CDC) was activated only in January 2017. With the outbreak of the coronavirus, the Africa CDC took more rapid steps to confront the pandemic, including activating the Emergency Operations Center in February 2020 and establishing the continent-wide African Task Force for Novel Coronavirus (AFTCOR) (Fagbayibo, 2021, p. 6).

Furthermore, the African Union Commission (AUC) and the Africa CDC launched a new initiative, “Partnership to Accelerate COVID-19 Testing: Trace, Test, and Track”, aimed at increasing continental testing of COVID-19 with a focus on countries with limited capacities and fragile healthcare institutional structures to ensure at least 10 million Africans are tested for the coronavirus. Moreover, with the support of the World Health Organization (WHO), the Africa CDC’s role in training has been revitalized when it provided training to representatives of the AU member states on how to conduct COVID-19 laboratory tests. In July 2020, the Africa CDC launched a new program called “Consortium for COVID-19 Vaccine Clinical Trial” (CONCVACT) geared towards eliminating all obstacles that may stand in the way of conducting clinical trials for vaccines in African countries (Fagbayibo, 2021, p. 7).

With the start of the global COVID-19 vaccination campaign, the AU was left in the lurch, given its complete dependence on imported vaccines. The AU partnered with the Africa CDC to develop a continental strategy for the development and provision of the COVID-19 vaccines called the “Vaccine Development and Access Strategy”, which was officially adopted in August 2020, aiming at ensuring Africa’s equitable access to the COVID-19 vaccines (Africa CDC, 2020b).

Moreover, the African Vaccine Acquisition Task Team (AVATT) was established to act as the executive body concerned with supporting Africa’s vaccine strategy.
The main task of AVATT is to coordinate with the COVID-19 Vaccines Global Access (COVAX) initiative, launched by the WHO in collaboration with a number of international partners, in order to provide the COVID-19 vaccines for African countries (Fagbayibo, 2021, p. 10).

**Coordination of Policies Among African Countries**

Since the outbreak of the virus, the AU has tried to fulfil its expected role in coordinating the efforts of African governments in facing the spread of COVID-19. At their meeting at the headquarters of the AU in Addis Ababa on 22 February 2020, African Ministers of Health endorsed the “Africa Joint Continental Strategy for COVID-19 Outbreak”, which was later approved by the Assembly of Heads of State and Government of the AU on 26 March. The strategy comprises two tracks to respond to the crisis: 1) taking measures to prevent the spread of the pandemic and 2) working to contain the economic damage and dispel the social disorder caused by the spread of the virus (Africa CDC, 2020a, p. 3).

On 3 April 2020, African leaders held a teleconference meeting, attended by heads of nine African countries, namely South Africa, Egypt, the Democratic Republic of the Congo, Senegal, Kenya, Mali, Ethiopia, Rwanda, and Zimbabwe, with the participation of the Chairperson of the AUC, President of the WHO, Head of the Africa CDC, and the French President Emmanuel Macron in order to foster a continental response to the pandemic (AU, 2020b).

The summit endorsed a number of important resolutions, including the establishment of the African Union COVID-19 Response Fund to develop secure transportation routes between African countries to facilitate the transport of goods and medical supplies. The resolutions also included boosting the AU’s management capacity to organize a coordinated continental response. The AU Commission announced the appointment of three special envoys to mobilize international economic support for Africa’s efforts to face the crisis (AU, 2020a).

**Mobilizing Resources and International Support**

The Bureau of the African Union Heads of State and Government established the African Coronavirus Fund to provide urgent assistance for the countries on the continent. These efforts included purchasing and distributing essential medical equipment and supplies and containing the negative social and economic repercussions of the pandemic. The African Union Bureau approved initial funding for the Fund in the amount of $12.5 (AU, 2020b).
The African Development Bank announced the launch of a $10 billion rapid response initiative to help member countries take health protection measures to curb the economic and social repercussions of the pandemic (ADB, 2020).

The AU formed the Taskforce on COVID-19 Impact on Food Security and Nutrition in Africa. The task force includes the AUC, the African Union Development Agency, the NEPAD, the FAO, the European Commission, the World Bank, and the African Development Bank to implement the recommendations approved by the African agriculture ministers on addressing food security and nutrition challenges caused by the pandemic and the measures taken to address it (FAO, 2020).

**SUBSTANTIAL OBSTACLES THE AU IS FACING IN RESPONDING TO COVID-19**

By June 2021, approximately 11% of people worldwide will have received the first dose of the COVID-19 vaccine. In Africa, this percentage is less than 2%. Fewer than 0.6 per cent of Africans received two vaccine doses, according to Our World in Data (OWID). Therefore, the vaccination rate against COVID-19 in Africa is considered the slowest in the world. Despite the fact that many African countries announced the launch of their vaccination programs in the second half of 2020 when 49 African states were able to vaccinate their citizens with approximately 22 million doses, Seychelles was the only state in Sub-Saharan Africa that had vaccinated 60 per cent of its citizens by May 2021, while the vast majority of African states have a vaccination rate of less than 5 per cent (OWID, 2021).

Many substantial issues have played a key role in slowing down the vaccination process in Africa, which are directly related to healthcare sector problems in African countries and the lack of adequate capabilities of the AU to support African healthcare systems. This category of obstacles includes:

**AU Limited Healthcare Institutional and Logistical Capabilities**

In April 2001, AU heads of state met in the Nigerian capital, Abuja, and pledged to dedicate no less than 15 per cent of the annual budget to improve the health sector. At the same time, the Abuja Declaration encourages donor countries to devote 0.7 per cent of their GDP to help nurture developing countries. The high-level African interest came to reveal the early interest of the AU in the health sector, which has been making more prominent appearances at the level of meetings and documents issued by the AU without corresponding progress in policy implementation (WHO, 2011, pp. 1-3).
The most significant achievement of the AU has been the establishment of the Africa CDC. It was established to support the public health initiatives of member states and to strengthen the capacity of public health institutions to detect, prevent, control, and respond quickly and effectively to diseases. According to the founding document, the Africa CDC supports member states in providing coordinated and integrated solutions to deficiencies in public health infrastructure, human resource capacity, disease surveillance, laboratory diagnosis, and response to health emergencies and disasters (Nkengasong et al., 2017, p. 16).

The Africa CDC was founded in January 2016 as per a decision of the 26th Ordinary Summit of African Heads of State and Governments, officially launched in January 2017. The coronavirus is the first real crisis with which the Africa CDC deals with owing to its relatively recent founding history, with only one previous prominent role in the Ebola outbreak in Kivu, northeast of the Democratic Republic of Congo, which lasted between August 2018 and June 2020 (Africa CDC, 2019). That indicates that the Africa CDC needs more time and experience to be able to deal with health crises on a continental scale.

Dependence on Imported Vaccines Because of Limited Inoculation Alternatives

Forty African countries dependent on the COVAX initiative were affected by the decision not to send vaccines to Africa due to the high incidence of disease in India. African countries were able to receive their first vaccine shares by the beginning of 2021 through the coordination of the AU with the Global COVAX mechanism (COVAX, 2021, p. 1).

Despite the promising start of vaccine supply operations to African countries, this progression was hit when India announced in March that it had stopped exporting vaccine doses produced at the Serum Institute of India. This institute produces the AstraZeneca vaccine, which is one of the most widely used vaccines in Africa. This decision had an extended negative impact as the WHO announced that the COVAX vaccine supply mechanism would suffer from a shortfall of up to 190 million doses in June, which resulted in a significant disruption of vaccination programs in African countries (Bhalla & Yi, 2021).

What worsens the problem of the inability to export vaccines to African countries is the difficulty of finding available alternatives, namely, the manufacture of vaccines in African countries or financing their purchase away from the COVAX initiative (Abiodun et al., 2021, p. 6).

Concerning the first alternative, the majority of the African countries do not have an infrastructure for pharmaceutical industries to produce vaccines in large
quantities that meet the shortfall at a continental or regional level. Egypt was the first to sign agreements to manufacture the Chinese Sinovac and the Russian Sputnik vaccines (Leila, 2021). In addition, the WHO announced the intention of a group of international companies to establish a MRNA vaccine manufacturing centre in South Africa without disclosing the release date (WHO, 2021b).

As for the second alternative of financing vaccines from national budgets or bilateral international grants, the majority of African countries do not have the financial capacity to purchase vaccines in sufficient numbers. In addition, many large donor countries also consider that they may experience a new COVID-19 wave, which makes them more cautious in giving the vaccines they own or pledging to supply significant quantities of vaccines in the future (CABRI, 2021, pp.6-8).

**Inability to Launch Nationwide Vaccination Campaigns**

Because of African states’ weak logistical capacity, the WHO called on African countries to provide the first dose of the vaccine to the largest number of citizens, as it has a short expiry date. This call came after vaccinations in some African countries had been stalled; only eight African countries were able to use all doses of vaccines received via the COVAX initiative. Moreover, nine countries used less than a quarter of their received doses, and 15 countries used only half of their received doses (WHO, 2021c).

Field data show that Benin, Cameroon, Central African Republic, the Democratic Republic of the Congo, Guinea, Comoros, and South Sudan have already used less than 10 per cent of the total vaccines received. To date, the WHO data indicates that only 10 African countries have been able to use all the doses obtained from the COVAX initiative, namely Botswana, Swaziland (eSwatini), Lesotho, and Namibia in southern Africa, Tunisia, Morocco, and Libya in the north of the continent, Côte d’Ivoire and Togo in the west of the continent, as well as Rwanda (Eisele, 2021).

Additionally, insecurity had a severe impact on hindering inclusive vaccination campaigns in Africa. For example, many international organization reports have referred to the collapse of the health system in the Tigray region in northern Ethiopia since a violent conflict broke out in November 2020 between the federal and regional governments (OCHA, 2021, p.89). This is in addition to areas of near-chronic conflicts, such as conflicts in the Eastern Congo, central Somalia, northern Mali, and north-eastern Nigeria, which are under ineffective control of their governments and where no successful vaccination campaign can be launched (Desmidt and Neat, 2021, pp. 4-5).
Declining Health Care Expenditure in African Countries

Since the 1980s, when African countries adopted structural adjustment programs one after the other, public spending priorities have witnessed profound and radical changes, which have imposed significant constraints on any increase in public spending on social services, including health services (Lowenson, 1993, p. 723).

According to the WHO statistics on sub-Saharan Africa’s spending on the health sector between 2000 and 2018, several important trends can be seen, most notably the fact that in 2018, the ratio of health sector spending to GDP in sub-Saharan Africa stood at only 5 per cent, at a time when the world average recorded 9.8 per cent. That represents a decrease from earlier periods in Sub-Saharan Africa, when spending on the health sector as a percentage of GDP exceeded 5.5 per cent in 2003 and 2004 before beginning to decline (WHO, 2021a).

Given the figures for sub-Saharan Africa in health spending, two major problems can be detected. The first relates to the very low ratio of health sector spending to the GDP in some cases, with only three per cent of GDP or less in Angola, Benin, the Republic of the Congo, Gabon, Cameroon, the Democratic Republic of the Congo, Equatorial Guinea, Ethiopia, Guatemala, Ghana, Guinea, Mali and Nigeria, and Senegal. The second problem concerns the sharp decline in health sector spending in the last 20 years, experienced by states, such as Cameroon, Chad, Comoros, Eritrea, Ethiopia, Guatemala, southern Sudan, Uganda, and Zimbabwe (WHO, 2021a).

This deteriorating trend provides clear evidence that the greater deficit in the capacity of African governments to respond to the pandemic is essentially related to the financing issue, which is beyond the capacity of the continental organization given the complex financing problems experienced by the AU in recent years, which has prevented it from mobilizing and redirecting funding surplus to support the health sector in the neediest African states (WHO, 2013, p.10).

CONTEXTUAL OBSTACLES OF THE AU IN RESPONDING TO COVID-19

The reactions of the AU to the outbreak of the coronavirus reflected a great deal of responsiveness and sensitivity to continental problems. The high-level meetings and successive official documents issued by various AU bodies actualized the union’s genuine interest in assisting African countries. However, the continental and international political context posed serious challenges to the AU’s response through a number of obstacles, namely:
Disagreements over the Vision for Institutional and Financial Reforms of the AU

Less than two decades after the establishment of the African Union, the needs of the continental organization have begun to develop institutionally as a matter of urgency, as has been revealed by many practices on the ground. Based on that, the AU held the Kigali Summit in July 2016, which was devoted to addressing the issue of institutional development of the AU by focusing on developing the funding system for its activities (Turianskyi and Gruzd, 2019, pp. 13-18).

As a result of the AU’s increasing reliance on grants from non-African states and institutes to finance its activities, the issue of reorganizing the member states’ funding of the activities, which includes the erasure of the reliance on African sources, was suggested as the main goal. According to the scheme announced at the Kigali meeting, the plan was supposed to be implemented in 2016, 2017, and 2018, but this did not materialize (Apiko and Agгад, 2018, pp. 4-5).

Reforming the AU’s financing system has accidentally brought to the surface deep internal disagreement between the most contributing and the neediest AU member states. As a result of the slow progress in funding reform, the neediest African states now accuse the leading main African contributor states of obstructing institutional and financial reform schemes of the continental organization.

In contrast, the response from the other side is clearly based on the principle of equitable distribution of the AU burden, at a time when a few countries, namely Algeria, Egypt, Morocco, Nigeria, and South Africa, have borne the bulk of it, and have shown their criticism of the new funding system, which has increased the annual contribution of Egypt, Algeria, Nigeria, and South Africa from about $16 million in 2015 to more than $36 million in the following three years, according to the reports of the AU’s financial needs. This is in addition to some proposals for reform of the union’s financing system that have sought to link the contribution of each African state to its public revenues, which a significant number of member states see as exceeding their financial sovereignty (Engel, 2018, p.30).

In 2018, an AU report monitoring the commitment of the member states to the decisions of the Kigali Summit on AU financial and institutional reform found six countries committed, eight states taking preliminary steps in this direction, while 30 states refrained from taking any steps that would reflect their commitment to the decisions of the Kigali Summit (African Union, 2018, pp. 4-8). In conclusion, obstacles to the reform of the financing system of the AU continue to be one of the main sources of reducing the readiness of the continental organization to deal with a crisis as big as the outbreak of the coronavirus.
Lack of Political Commitment

In terms of principles and measures, the behaviours of many African governments do not meet the AU vision for addressing COVID-19. Many African leaders have embraced populist approaches in dealing with COVID-19 and have disregarded providing the vaccines or supporting international efforts in vaccinating their citizens (Patterson and Balogun, 2021, p. 13). Several African leaders tried to use cultural challenges to enhance their popularity, even at the expense of adopting effective policies to confront the pandemic. In many African countries, prevailing culture has created a hostile or unwelcoming environment for vaccination campaigns due to the denial and questioning of the pandemic or reliance on traditional treatments, under the rumour that vaccines imported from abroad have extremely serious side effects, a rumour that is widely familiar in African societies (ACSS, 2021). Those cultural challenges stand before the vaccination efforts. In Malawi, over 17,000 doses of vaccines were destroyed in June 2021 due to media campaigns that strongly promoted the serious side effects of the AstraZeneca vaccine (Eisele, 2021).

Lack of political commitment has been manifested internationally. Although the World Bank estimates that African countries need funding of $12 billion to curb the spread of COVID-19, the African continent has only received a COVAX initiative pledge to provide 30 per cent of Africa’s vaccine needs, while a funding gap of more than 70 per cent of the required funding remains (WB, 2020).

This complex situation led Strive Masiyiwa, Special Envoy of the African Union, to help coordinate efforts to procure the COVID-19 vaccines. He held a press conference at the end of June 2021, declaring that the European states and the COVAX mechanism had failed the African continent and did not fulfil their commitments to provide sufficient vaccines to African countries. In addition, he noted that the EU factories did not provide any doses for African countries, and the COVAX initiative had helped withhold information highlighting the failure of major donors to fulfil their commitments to the African continent. Furthermore, the African Envoy noted that COVAX had already pledged 700 million doses to African countries by December 2021. But the number of vaccines delivered to the continent reached only 50 million doses from the initiative and 15 million from multiple international donors (Cullinan, 2021).

The politicization of the “Vaccines War”

Africa has traditionally experienced fierce competition between many external powers, which have been able to shape many political, military, and economic
situations on the continent. At a time when the intense presence of players on African soil was expected to help the African continent overcome the pandemic, the crisis has become a new arena for competition between foreign powers to gain more influence and control over African states (Devermont and Olander, 2020).

This unusual competition became public at the end of June 2021, when Josep Burrell, the European Union’s High Representative for Foreign Policy, hinted that China was more active than the European Union in supplying the anti-coronavirus vaccines to Africa in order to increase its geopolitical influence on the continent, recalling a previous European pledge to grant the African continent 200 million doses of the vaccine, while at the same time only 10 million doses were granted (Von Der Burchard, 2021; Deutsch and Furlong, 2021).

It is inappropriate to approach the European-Chinese competition to supply vaccines to the African continent with a narrow view of the scope of impact or timeframe since the urgent need for vaccines will cost African states a lot in the future because it is expected not to be confined only to the health sector.

CONCLUSION

The COVID-19 pandemic is an unprecedented crisis for the AU, according to indicators of wide geographical range, rapid escalation, and severity. Many African countries, particularly those with limited healthcare capacities, were counting on the AU to handle a slew of urgent tasks, the first of which was to provide the necessary preventive supplies and logistical preparations to improve their hospitals’ ability to receive patients. The second task that the AU was expected to do was to ensure that the African continent received a fair portion of the anti-coronavirus vaccine, or at very least, to improve African states’ negotiating position with global efforts and pharmaceutical corporations. Lastly, the AU was expected to play a more active role in coordinating national policies to combat and prevent the spread of the coronavirus, so that many African sectors could have avoided unnecessary suffering as a result of the conflict between policies designed nationally, primarily in border areas of African states and economic sectors that rely on cross-border trade, which have lost their livelihood immediately and directly as a result of border closure policies.

On this basis, a clear conclusion can be drawn: While the AU has shown a strong interest and responsibility in assisting in the early detection and treatment of the coronavirus, several constraints inherited from previous years have limited the AU’s ability to provide a successful and effective response to the virus.

The African continental organization faced several substantial obstacles in confronting COVID-19 because of its limited institutional and logistical capabilities
in supporting healthcare systems and as a result of its complete dependence on imported vaccines. The AU was also obliged to tackle African states’ inability to launch nationwide vaccination campaigns, which is one of various repercussions of declining healthcare expenditure over the past two decades. Contextual obstacles have complicated the AU’s mission in mitigating the pandemic negative effects. Disagreements between African states over the vision for institutional and financial reforms of the AU have restricted its ability to increase self-reliance in financing the implementation of its anti-COVID-19 strategy. Lack of political commitment continentally and the politicization of the “Vaccines War” internationally were crucial causes of the weakening of the AU’s response to the pandemic.

Although the AU has attempted to respond appropriately to the pandemic with its available institutional, financial, and political capabilities, there are still many ways that can be adopted to improve the future returns from this response, especially given the lack of any expectation of a rapid end to the pandemic. It is important that the AU, in cooperation with sub-regional organizations, play an active role in coordinating national policies among the AU member states to avoid the negative effects of the disruption or contradiction of such policies in vital areas such as the closure of international borders. It remains essential for the AU to promote a unified African stance that exerts maximum pressure on the international community at various relevant forums to ensure obtaining an equitable share of vaccines for all African countries. In the medium and long term, there is an urgent need for the AU to play a more active role in the formulation of an integrated African pharmaceutical industry policy that will strengthen African infrastructure in this area and make the continent more prepared to face similar problems when they are repeated in the future.

Overall, the coronavirus pandemic has put great pressure on the AU, testing the ability of the continental organization to respond to specific health problems and yielding numerous lessons learned that will have multiple positive implications for the AU’s future development.

REFERENCES


CHALLENGES AND RESPONSES
OF THE ORGANIZATION OF THE AMERICAN STATES (OAS)
DURING THE COVID-19 PANDEMIC

Elena Carolina Díaz Galán
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Abstract: The main objective of this paper is to explain the actions and measures taken by the Organization of American States (OAS) to combat the COVID-19 pandemic in the field of democracy, human rights and cooperation among the States. It sets out to investigate the position of the OAS vis-à-vis the pandemic in relation to the principle of democracy in the region and its response to the challenges of protecting human rights and strengthening cooperation between the States in order to prevent, control, and overcome the pandemic. The paper combines descriptive and analytical approaches in an attempt to provide an overview of the behaviour of the OAS in view of the major multidimensional crisis caused by the COVID-19 pandemic.

Keywords: Organization of American States, Covid-19, pandemic, democracy, human rights, cooperation.

INTRODUCTION

The COVID-19 pandemic has had a huge impact in the Americas in terms of loss of human life and in the economic, social, educational, and cultural fields. Experts agree that the region has been hardest hit by the impact of the pandemic due to

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1 This article has been elaborated in the framework of the cooperation and integration research lines of the Center for Iberoamerican Studies, University Rey Juan Carlos (Centro de Estudios de Iberoamericana CEIB, Universidad Rey Juan Carlos). Throughout this work, many citations that were incorporated in English were originally published in Spanish.

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“structural factors” that focus on a “development style” which has questioned its sustainability “from the social (inequality), economic (persistence of productive and technological asymmetries with advanced countries) and environmental (exceeding planetary limits in the use of natural resources and the biosphere) approach” (Bárcena and Cimoli, 2020, p. 18). In that scenario, the Organization of American States (OAS), the main Organization representing the American continent, has carried out a series of measures of political and legal nature in order to combat the effects of COVID-19 and prevent its consequences on the norms and institutional architecture of the Organization, as well as on the achievements that have been made in areas such as democracy, human rights, and inter-American cooperation.

Two questions need to be addressed to assess the measures adopted to tackle the pandemic within the OAS: first, the activities carried out by the organs of the Organization, in particular, the Secretary-General, the Permanent Council and the Assembly, based on the guide for political action to address the COVID-19 pandemic under democratic principles, launched in June 2020. The research in this area will be based on the Organization’s beliefs and principles. It will also investigate the extent to which they may be jeopardized by this exceptional health crisis. Second, it is necessary to determine the areas in which American cooperation should be effective in the fight against the pandemic, including situations of special concern in relation to vulnerable groups, the determination of specific health standards and the components of cooperation among the American States.

Thus, three areas stand out: a) the link between the pandemic and the declaration of the democratic principle in the Americas; b) the achievements of the Inter-American system protection of human rights and the risks produced by the health crisis; and c) the cooperation among the States of the region in the sanitary field to prevent, control, and combat the pandemic. We, therefore, try to provide an overview that shows the behaviour of the OAS in response to such a serious crisis affecting the region’s institutional architecture.

THE PRINCIPLE OF DEMOCRACY AND THE RESPONSE TO THE COVID-19 PANDEMIC IN THE AMERICAN CONTINENT

One of the purposes of the OAS is to prevent Latin American democratic institutions from being seriously eroded by the health crisis, in other words, to avoid the pandemic being used to undermine the rule of law. That is because democracy

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4 In this section, and also in some aspects of this work, are reproduced or taken into account the positions adopted in the article by Díaz Galán, “Postulados de la Organización de Estados Americanos (OEA) en tiempos de pandemia: democracia y derechos humanos”, in Revista La Red de la Red Interdisciplinaria Justicia Global e Integración Americana (RUIIA) (in press).
is one of the main pillars of the hemispheric Organization and, consequently, one of the sectors in which this Organization intervenes and has received greater attention since its creation. The OAS mission is to “help strengthen political processes in the member states, in particular, to support democracy as the best option for ensuring peace, security and development” (OAS, 2021).

The important fact is that the OAS has established a strong link between the pandemic and democracy and is aware that the health crisis could affect democratic institutions in the region. This explains why appropriate measures must be taken to preserve democratic stability in the Americas. In any case, the pandemic cannot be used as an excuse to alter the democratic framework. On the contrary, as noted by the Economic Commission for Latin America and the Caribbean (ECLAC), “during the crisis, it is essential to strengthen democratic institutions and spaces for participation and dialogue.”5 It is, therefore, understandable that the OAS has addressed some fields in which democratic institutions in the region could be affected by the effects of the pandemic. In particular, additional emphasis has been placed on electoral processes in times of a pandemic in order to guarantee the respect of the democratic context and the enjoyment of electoral rights. That is to say, to ensure fair, safe elections, with every democratic safeguard, without being prevented or hindered by health circumstances.

In terms of deliverables, the OAS General Secretariat published the Guide to Organizing Elections in Times of a Pandemic in July 2020, an extraordinarily useful document for the member states. This document aims “to contribute to strengthening the political processes of member states, particularly to supporting democracy as the best option for guaranteeing peace, security and development” (OAS, 2020). In addition, concrete indications are required to ensure the proper conduct of electoral processes in times of a pandemic. The guide provides guidelines and, in a detailed manner, addresses the obstacles to be overcome. Indeed, it points out “measures for holding safe, clean and transparent elections that aim to reduce the risk of the COVID-19 infection for those participating in organizing and carrying out elections”. In this sense, it is highly significant that the document takes a pragmatic approach or, in other words, “it is a practical guide through which each

country and electoral body can benefit when planning and managing electoral processes” (OAS, 2020a, p. 7).

Furthermore, the guide aims to preserve health, avoid contagion risks, and, at the same time, ensure the proper development of the electoral processes. It also intends to protect health and ensure that the scheduled elections have all the democratic guarantees. Consequently, as noted, it incorporates two major perspectives: measures to protect health and those related to the organization of elections in the Member States. Although it is not a legally binding instrument, it can serve as a guideline, in times of pandemic, for the behaviour of the States, especially when deciding to hold elections that meet all the requirements of a democratic regime.

In this sense, the OAS had an active presence in the electoral missions, in some of which “innovative approaches” were incorporated into the observation work in states such as the Republic of Suriname, the Dominican Republic (OAS, 2020c), Bolivia (OAS, 2020d), Brazil (OAS, 2020e), the United States (OAS, 2020f), Ecuador (OAS, 2021a), El Salvador (OAS, 2021b), and Peru (OAS, 2021c), among others. In addition, a Guide for political action to face the COVID-19 pandemic under democratic principles was published on June 2, 2020. In the same way, an attempt was made to promote citizen participation with the launch of a Consultation Portal, Forums and Repository on the world during and after the COVID-19 pandemic. All this was accompanied by the aforementioned publication of a Guide to organize elections in times of a pandemic in July 2020 (OAS, 2020g). All these efforts add to the concerns of the Pan American Health Organization for democracy in its relationship with health, whose outlook has been extremely aggravated by the COVID-19 pandemic.

Overcoming COVID-19 will mean a better environment for guaranteeing and respecting human rights. This reality must suppose a rethinking at the regional level and having the OAS as a determining element of the economic, political and social systems to guarantee human rights. That will have a significant impact on ensuring a democratic environment. The connection between democracy and human rights has been a constant concern in the inter-American system. Without human rights, there is no democracy, and without democracy, there is no guarantee for human rights. COVID-19 represents a serious obstacle to the guarantee and respect of human rights and, therefore, for democracy in the American continent.7

6 For example, the electoral mission in the Republic of Suriname used an “innovative approach to its observation work”, with the use of “virtual encounters before their arrival in Paramaribo, such as face-to-face meetings with the different actors on the ground” (OAS, 2020b).

7 See, for example: Ayala Corao, C. (2020). Retos de la pandemia del Covid-19 para el estado de derecho, la democracia y los derechos humanos [The Challenges that the Pandemic
Regarding human rights, the response within the framework of the OAS has been produced by its main bodies, as well as the Inter-American Human Rights Protection System. On April 17, 2020, the OAS Permanent Council adopted Resolution 1151 (2280/20), entitled “The OAS Response to the COVID-19 Pandemic”, which in terms of human rights emphasized several points: “the need to make the prevention of and response to gender-based violence a priority in all measures relating to COVID-19” and to ensure “full respect for human rights and transparency and prevent any form of discrimination, including racism and xenophobia, as they response to the crisis”\(^8\). The Secretary-General of the Organization, and various committees and commissions, such as the Inter-American Committee against Terrorism and the Inter-American Commission of Women, have focused on human rights situations during the pandemic, for instance, the situation of political prisoners in Nicaragua. It launched the *Practical Guide to Inclusive Rights-Focused Responses to COVID-19 in the Americas*, aimed at supporting the States with “a series of tools to consider responses that take into account the particular circumstances of groups in a situation of vulnerability” (OAS, 2020h). In addition, it has called the member states to “pay special attention to their indigenous populations during the health crisis caused by COVID-19” (OAS, 2020i); it published reports on the situation of Venezuelan migrants and refugees in Chile, Bolivia, on “the official recognition of gender identity in the countries of the Hemisphere” (OAS, 2020j), the “difficulties for Venezuelans returning or trying to return home” (OAS, 2020k), as well as documents such as “COVID-19 in women’s lives: Reasons to recognize the differentiated impacts” of the Inter-American Commission of Women (CIM). We should also mention the “Proposals to improve the situation of Venezuelan migrants and refugees in the framework of COVID-19” (OAS, 2020l), and cybersecurity of women during the COVID-19 pandemic (OAS, 2021d), among others. It launched a regional campaign “against discrimination and xenophobia against displaced Venezuelan migrants and refugees” (OAS, 2020m).
In relation to the Inter-American Court of Human Rights (IACHR), within the framework of the Inter-American System for the protection of human rights, it adopted a wide-ranging declaration on April 9, 2020, with a guiding character for the States, entitled “COVID-19 and Human Rights: The problems and challenges must be addressed from a Human Rights perspective and with respect for international obligations”. In the same way, the Inter-American Commission on Human Rights adopted on July 27, 2020, Resolution 04/20 establishing the inter-American guidelines on the “Human Rights of Persons with COVID-19” and Resolution 01/20 Pandemic and Human Rights in the Americas, as well as different communiqués on the subject. There would also be a Joint Declaration entitled “Joining Forces in Latin America and the Caribbean to help minimize the Coronavirus (COVID-19) crisis and foster responsible and sustainable enterprises.”

In addition to the relevant declaration adopted by the IACHR, which has no binding force, we stress that it contains important guidelines for the States. This regional judicial instance has issued rulings related to COVID-19 “through the supervising mechanism of compliance with the judgment and provisional measures” (Bertot, 2020, pp. 224-225). Thus, it cautions against “the adoption of provisional measures in the supervision stage of compliance with judgments, as was in the Case of Vélez Loor v. Panama, subsequently ratified by resolution of July 29, 2020. However, such provisional measures pursuant to Article 63.2 (63, par. 2) have not been considered in other cases, but there has been a reference to a ‘reinforced supervision’ (in the framework of sentence supervision) as in the Case of the Miguel Castro Prison v. Peru, Request for Precautionary Measures and Supervision of Compliance with Sentence Resolution of July 29, 2020, which linked the prison regime to applicable measures in the framework of COVID-19, among other aspects.” (Bertot, 2020, p. 225).


The principle of cooperation, nowadays of a structural nature — though it is difficult to specify the States’ obligations (Díaz, 2021, p. 135) — has shaped the evolution of this continent at a very early stage and found a viable direction through international organizations. In one of his famous courses at the Hague Academy of International Law, J. M. Yepes referred to the fact that the spirit of international cooperation and organization “has given birth to and developed the most daring ideas about cooperation among people on the American continent”. He was right when he gave the example of Bolivar’s attempt to create a society of
nations that later inspired the foundational principles of the League of Nations of 1919 (Yepes, 1934, p. 14). Conceived as a “key principle of the American space” and as “a specific value of the hemisphere and a solid leverage that fosters close cooperation among the states of the region” (Díaz, 2021, p. 40), the principle of InterAmerican solidarity has its roots in a “sense of solidarity and fraternity” (sentiment de solidarité et de fraternité) that Yepes places in the birth of the Latin states of the New World and which makes them consider themselves as part of “the same family of nations” and shapes their willingness to create a “distinct international community” (Díaz, 2021, p. 40).

These principles of cooperation and solidarity have marked the development and functioning of the Organization of American States. The preamble of the OAS Charter points out the “true significance of American solidarity,” which together with the “good neighbourliness” are referred to as the consolidation “within the framework of democratic institutions, of a system of individual liberty and social justice based on respect for the essential rights of man”. Likewise, it places “an intensive continental cooperation” at the basis of “the welfare of all” and the “contribution to the progress and the civilization of the world”. In this sense, Article 1 states that the OAS is the international organization created by the States of the Americas called to “promote their solidarity” and “strengthen their collaboration”. Among the principles recognized by the States, Article 3 envisages “the solidarity of the American States” and “economic cooperation”. Just as in the Charter, these principles are the platform and basis of the integral development of the Member States.

Although these principles are still inadequate, they have found tangible realizations within the OAS as a response to the crisis resulting from the COVID-19 pandemic. The OAS Permanent Council approved Resolution 1151 (2280/20) on April 17, 2020, entitled “The OAS Response to the COVID-19 Pandemic”, which resolved, among other issues, to “(u)nite in a hemispheric response to the unprecedented COVID-19 crisis, driven by democratic leadership, cooperation and solidarity among the member states and inter-American entities to mitigate the adverse impacts and accelerate the recovery.” However, several States (El Salvador, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, St. Lucia, St. Vincent and the Grenadines, Suriname, and Trinidad and Tobago) pointed out that while this resolution acknowledged “the need for more favourable credit conditions for middle-income countries and small island developing states,” it failed to “account for the largest impediment to accessing favourable financing.” In this regard, they called on the OAS to act in the “best interests of its most vulnerable member states to support the appeal to all pertinent multilateral financial institutions to adapt conventional policies and payment terms to the evolving extraordinary
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circumstances and, in so doing, alleviate the pressing needs of middle-income and small island developing countries, taking into account, not only their GDP per capita but their vulnerability in the face of this pandemic and vulnerabilities stemming from natural disasters, climate change and external economic shocks.”

Nevertheless, the OAS has played an active role in promoting and strengthening collaboration in various areas in the fight against the pandemic. Efforts carried out jointly by this organization, the Inter-American Development Bank (IDB), the Caribbean Development Bank (CDB), and the Council of Ministers of Health of Central America (COMISCA), aimed to help the governments of the 33 countries that were part of the Inter-American Network on Government Procurement (INGP) — of which the OAS itself is the Technical Secretary — have “access to the Joint Negotiation Mechanism for the purchase of medicines, medical devices, and other goods from the Council of Ministers of Health of Central America (COMISCA)” (OAS, 2020n). In addition, it encouraged the Joint Summit Working Group (JSWG), convened by the OAS Secretary-General as its chairman, and the Director of the Pan American Health Organization (PAHO), to debate on “coordinated and joint responses to COVID-19”. The Summit discussed the “implementation of a group of wide-ranging measures”; the launch of a Virtual Community of the Emergency

9 For more details see footnote of this resolution.


11 The Joint Summit Working Group is integrated by: Organization of American States (OAS), Inter-American Development Bank (IDB), Economic Commission for Latin America and the Caribbean (ECLAC), Pan American Health Organization (PAHO), World Bank, Inter-American Institute for Cooperation on Agriculture (IICA), Development Bank of Latin America (CAF), Caribbean Development Bank (CDB), Central American Bank for Economic Integration (CABEI), International Organization for Migration (IOM), International Organization of Labor (ILO), United Nations Development Program (UNDP), and Organization for Economic Cooperation and Development (OECD).

12 Among the measures mentioned are: emergency support, strengthening of health systems; mitigation of economic effects; flexibility of the use of financial resources; support for MIPYMES and protection of employment and income; support to populations that are disproportionately affected by the crisis, including women employed in the most affected sectors and the migrant population; support to the Caribbean countries, which will be
and Security Systems of the Americas, a “mechanism to support the countries of the region to face the challenges that COVID-19 represents for the operations of emergency and security systems (EMS)” (OAS, 2020o). Together with the Inter-American Development Bank, it supported the VI E-Government Ministerial Meeting of Latin America and the Caribbean, organized by the Electronic Government Network of Latin America and the Caribbean (Red GEALC), which concluded with the Ministerial Declaration of San José, “Digital Transformation for Economic and Social Reactivation”. Some of the key conclusions were the following: “(t)he digital transformation is of the essence to promote the region’s inclusive economic and social reactivation in the face of the COVID-19 crisis; a reactivation that, with the strengthening of digital government, improves equal opportunities while placing citizens at the centre of public policies.” (OAS, 2020p); the organization as technical secretariat of the Inter-American Competitiveness Network (RIAC) together with the government of Ecuador, in its pro tempore presidency, the XI Americas Competitiveness Forum, which “brings together the 34 Member States of the OAS with ministers and other top-level actors related to the competitiveness of government, the private sector, academia, and international organizations”. Furthermore, among the topics on the agenda were “Digital Transformation and SME Citizen Readiness”, “Innovation-driven Business Development and Empowering Entrepreneurs”, “Improving the Regulatory Environment, Trade Facilitation and Regional Value Chains” and “Climate Adaptation and the Post-COVID Recovery” (OAS, 2021e).

During the first months of 2021, the U.S. Department of Commerce awarded $1.57 million to the Americas Competitiveness Exchange Program through the Economic Development Administration (EDA) — a partnership between the U.S. Departments of Commerce and State and the OAS, through its Secretariat for Integral Development — in order to “help rebuild and re-establish trade and investment networks in the Americas and accelerate recovery from the COVID-19 pandemic” (OAS, 2021f).

As regards health cooperation, the work of the Pan American Health Organization has been fundamental. Cooperation in health matters in the Americas has had a long history and immense significance at the Second International Conference of American States when the International Sanitary Bureau, later called the Pan American Sanitary Bureau, was established in 1902, as a proposal of the X Committee called “International Sanitary Policy” (Bustamante, 1952, pp. 471-531). In this sense, the Pan American Health Organization, whose “fundamental purposes” are “the promotion and coordination of the efforts of the countries of the Western Hemisphere to combat disease, lengthen life and the promotion of the physical and mental health of the people” (Constitution of the Pan American Health Organization, Article 1), is a specialized agency of the OAS and, at the same time, the Regional Office of the World Health Organization (WHO). Since January 2020, the Pan American Sanitary Bureau, which is the secretariat of the Organization, has “activated an organization-wide response to provide its 51 countries and territories with technical cooperation to address and mitigate the impact of the COVID-19 pandemic” (PAHO, 2020). The activation of regional and national “Incident Management System Team” by the PAHO and WHO has been key from the beginning of the pandemic. Their “direct emergency response to Ministries of Health and other national authorities” covered a wide range of issues: “surveillance, laboratory capacity, support health care, infection prevention control, clinical management and risk communication”; as well as the publishing of technical documents “to help guide the Member States’ strategies and policies to manage this pandemic in their territories” (PAHO, 2020a). In this regard, from the outset, it developed four “fundamental objectives of its regional response strategy” which helped shape surveillance strategies to the regional level. First, the implementation of multi-sectoral emergency response committees at the country level between the PAHO teams and national authorities; second, the development of technical guidelines and training courses related to the restructuring of health services and the strengthening of COVID-19 surveillance in several countries; third, collaboration at the country level between the PAHO teams and the United Nations agencies for the purchase of materials for health personnel and others; fourth, the strengthening of COVID-19 surveillance in several countries and the dissemination of several recommendations at the regional level (namely, “Recommendations for pre-hospital emergency medical services [EMS] preparedness”, “Recommendations on the management of dead bodies”, “Recommendations for medical surge capacities and

deployment of emergency medical teams”) and also guidelines (“Guidelines for the
detection and diagnosis of the COVID-19 virus infection”).

The PAHO’s role in ensuring “fair and equitable access” to the COVID-19 vaccines, in a scenario marked by “vaccine nationalism”15, is well-known in the American region through the COVAX Mechanism. The PAHO Revolving Fund has become a “procurement agent” before this mechanism for the Member States of the region, whether “self-financing countries” or with “advance market commitment”, and are recognized as a “regional bloc.”16 Thus, the PAHO has been involved as a representative of 10 countries in the Americas that receive support under the “COVAX Mechanism’s Advance market commitment”, such as Bolivia, Dominica, El Salvador, Grenada, Guyana, Haiti, Honduras, Nicaragua, St. Lucia and St. Vincent and the Grenadines, as well as self-financing countries (PAHO, 2021). As of April 26, 2021, the PAHO has bought, on behalf of 28 countries in the region, 4,290,480 doses that have already been delivered, while 147,630 were in transit, for a total of 4,438,110 doses (PAHO, 2021a).

However, since the beginning of April, the PAHO authorities have been clearly calling for the insufficient COVID-19 vaccine supply in a region that, due to the high percentage of diagnosed cases and deaths, should become a “global priority” (PAHO, 2021b). In relation to the “equitable distribution of vaccines”, the OAS Secretary-General himself stressed that “access to and distribution of the vaccines is not equal” in a statement made on 9 March (PAHO, 2021b). In this regard, while welcoming “the COVAX facility, led by the World Health Organization, which was

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designed to help developing countries to secure access to vaccines at affordable prices”, he considered that the “COVAX needs more than pledges of financial support”, as well as the urgent need for “delivery of the necessary funds to facilitate a fair supply and distribution of vaccines”. Therefore, he called on the States, in accordance with international human rights obligations and the Sustainable Development Goals of the UN Agenda 2030, to facilitate “equal access and equitable distribution of the COVID-19 vaccines”.

**CONCLUSION**

The American continent is facing enormous challenges dealing with the huge effects of the pandemic. In this endeavour, the OAS has become a fundamental pillar. This has given an account of the basic areas in which the organization has worked and where it should focus on and deepen its work in the near future. Along these lines, bearing in mind the impact of the pandemic on the effectiveness of the democratic principle in the region, and the work of the OAS in this regard, efforts need to be directed to calibrating and giving full effect to the measures proposed by the OAS bodies, and making it possible to turn them into tangible results. The same applies to the achievements in the field of human rights, although in this field the consequences of the health crisis are serious, especially in those rights that require major changes in the economic and social order to be fully effective. However, the OAS should place a special emphasis on cooperation, continental solidarity, especially since the serious economic and social situation which the continent is going through at present cannot be addressed from narrow traditions of nationalism without putting into perspective and enforcing compliance with the principles underpinning this international organization that represents the entire American continent.

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THE COVID-19 POLICIES OF POLITICAL GROUPS IN THE EUROPEAN PARLIAMENT

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Halil Emre Deniş²

Abstract: This study will examine the position of political groups in the European Parliament (EP), the first institution of the European Union (EU), and the COVID-19 policies of these groups in a comparative method. With different ideologies and different policies, these groups had seats in the EP after the 2019 elections. The study’s main issue is to determine what kinds of policies these groups have pursued in the face of a global crisis, as well as how close and overlapping these policies are. The study consists of two parts. In the first part, the ideologies, values and policies of the political groups, which took part in the Parliament according to the 2019 EP election results, will be examined, and in the second part, the policies of these political groups against the COVID-19 pandemic will be examined and evaluated with a comparative perspective.

Keywords: European Parliament, European Union, Political Group, COVID-19, Crisis, Pandemic Process.

INTRODUCTION

As one of the most important institutional bodies of the EU, the EP usually adopts European legislation on the proposal of the European Commission, and the member states can take binding decisions together with the European Council. It represents the largest transnational democratic voting system in the world (David and David,
Since 1979, “the EP has been composed of representatives of the Union’s citizens. Members of the EP are elected by direct universal suffrage in a free and secret ballot for a period of five years” (Official Journal of the European Union, 2012).

Although the EP has legislative power like the Council, it does not formally have the right to take the initiative as most national parliaments of the member states do (Marguand, 1979). The EP, the first institution of the EU, shall, jointly with the EU Council, exercise legislative and budgetary functions (Official Journal of the European Union, 2016). After Brexit, in the EP, which consists of 705 Parliamentarians, there are seven political groups, and the members are organized according to political affiliation/affinity with political groups (Archick and Mix, 2011). The members can enrol only in one group. Yet, some members are not members of a certain group and continue their work independently. No group has an absolute majority in the EP. For this reason, coalition building has been an important element of the legislative process (Bressanelli, 2012).

Political groups contribute to the EP’s operational capability and efficiency. Each political group takes care of its own internal organisation by appointing a chair, a bureau, and a secretariat. In addition, the EP and the Council of the EU determine, through regulations, the regulations governing political parties at the European level. Although most national parties represented within a particular political group are also members of the corresponding political party at the EU level, some political groups bring together more than one European political party (Official Journal of the European Union, 2016).

Alleged to have spread all over the world, starting in Wuhan, China, at the end of 2019, COVID-19 has affected the whole world and has become an important problem. The EU, which failed to show the expected effect in the early stages of the coronavirus process, experienced serious reactions and criticism from the member states. Moreover, a state like Italy, which is the founder of the EU, said that the EU was not by its side during the COVID-19 Crisis, and many politicians removed the EU flag from their chambers. Later, although the EU tried to be effective by providing financial support to its member countries within the scope of combating COVID-19, it continued to receive criticism for being late in the intervention (Adler, 2020).

This study will examine the COVID-19 policies of political groups in the EP and examine these policies in a comparative method. In general, the main pain point of the study is to find out what kind of policies the political groups with different ideologies and ideas act with regarding the COVID-19 crisis. The study consists of two parts. In the first part, the historical processes, ideologies and policies of the political groups in EP will be examined. In the second part, the perspectives of political groups on the COVID-19 policies will be evaluated.
POLITICAL GROUPS IN THE EUROPEAN PARLIAMENT

The parliamentary numbers of the member countries in the EP are determined according to the population density. The members of the European Parliament are not organised by nationality but by political affiliation. There are currently seven political groups in the European Parliament. Members who do not belong to any political group are known as non-attached Members. The places assigned to the members in the Chamber are decided by political affiliation, from left to right, by agreement with the group chairs (Kaczorowska, 2009).

Table 1. Political Groups in the European Parliament (2019)

<table>
<thead>
<tr>
<th>Party</th>
<th>Seat</th>
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<tr>
<td>European People’s Party (Christian Democrats) (EPP)</td>
<td>187</td>
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<tr>
<td>Progressive Alliance of Socialists and Democrats (S&amp;D)</td>
<td>145</td>
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<tr>
<td>Renew Europe (Renew)</td>
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<td>Identity and Democracy (ID)</td>
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<td>The Greens- European Free Alliance (The Greens/EFA)</td>
<td>73</td>
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<tr>
<td>European Conservatives and Reformists Party (ECR)</td>
<td>62</td>
</tr>
<tr>
<td>European United Left/ Nordic Green Left (GUE/NGL)</td>
<td>39</td>
</tr>
<tr>
<td>Non-attached Members (NI)</td>
<td>26</td>
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<td><strong>Toplam</strong></td>
<td><strong>705</strong></td>
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The European People’s Party (Christian Democrats) (EPP)

Although the EPP, the largest international political party in Europe, was officially founded in 1976, it traces its roots back to the history of the European continent (EPP, 2020a). The EPP is a centre-right party with a Christian Democratic, conservative and liberal-conservative ideology. Combining Christianity and conservatism, the EPP advocates the principles of freedom, justice and solidarity that support family values. Protecting its Biblical and Christian cultural heritage, the EPP also supported the construction of the social Christian individual. The EPP, which defends a federal Europe, will both preserve the diversity within the Union and open the way to find common solutions to problems (Kiris, 2013).

It emphasized policies such as creating new jobs economically, preventing protectionist policies, supporting fiscal and monetary policies, ensuring
transparency and surveillance in financial markets, making Europe a market leader in green technology, combating climate change, the share of renewable energy by at least 20% by 2020 to create a new strategy that would attract skilled workers from the rest of the world to make Europe’s economy more competitive, more dynamic and more knowledge-oriented, family-friendly flexibility for working parents, better child care and accommodation, family-friendly financial policies, and the promotion of parental leave (Euractiv, 2009). Stating in the 2019 EP election statement that the world is a less secure place and that new threats such as instability and uncontrolled power in authoritarian neighbouring regions such as Russia and China have emerged, the EPP said that they would overcome everything together and create a livable new Europe, where they could protect Europe from external threats, and that they would lead Europe further than their Founding Fathers (EPP, 2019a).

The Progressive Alliance of Socialists and Democrats (S&D)

The S&D, the second-largest party in the EP, is the European Socialist Party and a centre-left party close to the left, and its origins can be traced to the working group Socialist Integration, formed in 1951 to discuss the Schuman Declaration (Hix and Urs, 2002). The S&D concentrates on a number of issues, such as ensuring equality of men and women, regulation and improvement of minimum wages and military working hours, protection of consumers, protection of the environment, fight against organized crime, ensuring peace, and ensuring more active participation of EU citizens in the decision-making process of the Union. Within the framework of the EU 2020 Strategy, it focuses on protecting green, combating climate change, ensuring justice in taxation, creating a sustainable economic structure, establishing dialogue and cooperation with China, the US, Russia and Latin American countries. In the 2019 election statement, the S&D focused on equality, justice, democracy, and human rights, including gender equality, youth and their future, the environment and sustainability, and shelter and immigration policies. Stating that the EU should serve people more, the S&D stated that they should create a fairer Europe and change the EU (Kiris, 2013).

Renew Europe (Renew)

Renew Europe, a liberal and pro-European group, is a continuation of the Alliance of Liberals and Democrats for Europe (ALDE) (European Parliament, 2019a). Renew is the third-largest group in the EP. Saying that the EU will find a
solution to the problems in the EU and meet the needs of the people, Renew states that it will fight for a free and fair Europe (Renew Europe, 2020a).

Stating that the European Digital Single Market and common digital rules and standards, which will eliminate borders in the digitalizing world, are necessary, Renew emphasizes that a structure that everyone can buy whatever they want from where they want, access all the information they want when and where they want and go wherever they want will be better for Europe. In addition to this, supporting the creation of a federal Europe, Renew believes that strong security and a stable Europe can only be achieved with a federal structure. Referring to the existence of important problems such as cyber security in the world, Renew said that no one could fight the cyber threat alone, so Europe should be in cooperation more than ever (ALDE, 2018). Stating that unemployment is also one of the most important issues in Europe, Renew emphasized that providing new job opportunities and increasing employment were among the priority targets. Saying that Europe is in a crisis due to economic, political and security problems, Renew stated that the EU was ineffective and late in solving these crises and that a more effective and more integrated Europe should be provided (Renew Europe, 2019).

In order to solve all the existing problems, The Renew Group said that they would fulfil the main tasks of the institutions within the structure of the EU, such as the EP. The legal legislation regarding their duties would be simplified, the duties of all institutions would be stated clearly, the democratic deficit problem in Europe would be solved, European values would be preserved and an EU would be formed where European citizens could establish closer ties with the EU. Renew stated that the problems within the EU would be easily solved (Renew Europe, 2020b).

**The Identity and Democracy Group (ID)**

The ID Group, which is the continuation of the European Group of Nations and Freedoms, is the fourth most powerful group of the EP. The ID, the far-right party, has an ideology that is nationalist, European sceptical, anti-immigrant, and pro-identity and sovereignty (Adams, 2019). Established with the aim of creating new jobs, growth and development, enhancing the security of Europe, combating illegal immigration and combating the EU’s cumbersome bureaucracy, the group defines itself as a defender of sovereignty rather than being a European sceptic. In this sense, the ID believes that the sovereignty of states and peoples is based on cooperation between nations and therefore rejects any policy designed to establish a supra-state or supranational model. The objection to any transfer of national sovereignty to supranational bodies and European institutions has been
one of the fundamental principles uniting the members of the ID (Identity and Democracy Group, 2019).

Saying that the democratic deficit in the EU must be resolved, the ID believes that this problem will be overcome by the more active participation of national parliaments in the decision-making process. The ID, which opposes the full membership of non-European states such as Turkey in the EU, also aims to prevent the spread of Islam in Europe (Huet, 2019). As the members of the group handle their political activities within the framework of democratic principles, they reject authoritarian activities or projects linked to them. The group bases its political movements on the defence of individual freedoms and emphasizes the special importance of protecting freedom of speech, including digital freedoms that are increasingly endangered today (Identity and Democracy Group, 2019).

The ID recognizes each other’s right to defend each other’s unique economic, social, cultural and regional models. In this sense, the ID tries to preserve the diversity of its members’ political projects. The ID bases its political alliances on the preservation of the identities of European peoples and nations in accordance with the specific characteristics of each people. The right to control and regulate migration has therefore been a fundamental principle shared by ID members (Identity and Democracy Group, 2019).

The Greens/European Free Alliance (Greens/EFA)

The Greens and the European Freedom Alliance formed a group in the EP in 1999. The alliance with the majority of Greens aims to create a society that respects human rights, to increase employment, to ensure active participation of individuals in the EU decision-making process, to develop democracy, to strengthen transparency in the EU and establish a free Europe (Yatagan, Akman & Kiris, 2017). There is a co-chair system in the group, and gender equality is guaranteed.

After the union of the Greens/EFA, their aims became to create a society that respects nature and human rights, to increase freedoms, to create an employment environment that highlights the potential of people in Europe, to ensure the active participation of EU citizens at the local level, to expand democracy, protect social rights, protect the climate and the environment to make legal arrangements, to ensure the transition to a green economy, to ensure the efficient use of energy, to protect cultural values, to combat regionalism, discrimination and to create a transparent market (The Greens/EFA, 2020a).

In addition, with direct participation in the procedures such as the right to self-determination, housing, health, education, culture and high quality of life,
decentralization and deepening democracy, solidarity, and human rights for people from non-EU states, the Greens/EFA group strives to secure their rights, solve problems peacefully, protect women’s rights, ensure cultural diversity, and build an EU of free peoples (The Greens/EFA, 2020b).

The European Conservatives and Reformists Group (ECR)

The ECR is a European sceptic and anti-federalist political group of the EP founded in 2009 (European Parliament, 2019b). Ideologically, the group is a European sceptic, an anti-federalist, and right-wing. Its main focus is to advocate free-market policies and stricter controls on immigration, as well as opposing uncontrolled European integration and the transformation of the EU into a Federal European State. The ECR includes a mix of social conservative, right-wing populist, liberal-conservative, Christian democratic, nationalist and national conservative parties, all of which share anti-federalist and European scepticism. Some parties within the ECR advocate soft European scepticism against the complete rejection of the EU, calling for democratic reform in the EU and limiting some of its powers and bureaucracy while protecting it from restriction. Other parties and individual MPs within the group support the complete withdrawal from the block, referendums on EU membership, and opposition to the Eurozone (ECR, 2020).

The priorities of the group, established in 2009, are contained in the text known as the Prague Declaration. According to this declaration, free enterprise, free and fair trade and competition, minimum regulation, lower taxation, individual freedom, more personal responsibility and more democratic accountability, sustainable, clean energy as the ultimate catalyst for individual freedom, personal and national well-being, supply and energy security, the importance of the family as the foundation of society, nation-state sovereignty, opposition to EU federalism and power substitution, supporting the development of democracy, ending the abuse of effectively controlled immigration and asylum procedures, ensuring transparency and honesty, stimulating relations with NATO, ending the EU’s cumbersome bureaucracy have been the priorities of the ECR (ECR, 2013a).

The European United Left/Nordic Green Left (GUE/NGL)

Established in 1995, the GUE/NGL has a democratic left and socialist ideology (GUE/NGL, 2020a). Increased employment, better and quality education opportunities in the integration process, social security, social solidarity, proper utilization of the world and resources, cultural change and continuity, sustainable
economic development, peace, democracy, active participation of EU citizens in
the decision-making process are the main ideologies of the party. At the same
time, the party, which wants to make the EU a project of the people rather than
the project of the elites, has an ideology against fascism and racism that wants to

The group that advocates Confederalism in the EU says that Confederalism
means respecting and protecting members’ identity and diversity of opinion.
According to the GUE/NGL, what holds them together is the vision of a socially
egalitarian, peaceful and sustainable European integration process based on
international solidarity. Stating that Europe has made a great contribution to
improving the living conditions of many people, the party claimed that the EU
would be more successful if it had a confederal structure (GUE/NGL, 2020b).

According to the 1994 founder declaration, the group opposes the current
EU political structure but is determined to continue integration from a different
dimension. In addition, this declaration sets out three objectives for the building
of another EU. The first of these is the complete change of institutions in order
to make them fully democratic, the second is the break with neoliberal policies,
and the third is the policy of egalitarian cooperation that will enable development
together. The group wanted to disband NATO and strengthen the OSCE
(GUE/NGL, 1994).

THE COVID-19 POLICIES OF POLITICAL GROUPS IN THE EUROPEAN PARLIAMENT

The COVID-19 epidemic, which is claimed to have started in China at the end
of 2019 and spread rapidly all over the world, has caused negative effects, such
as economic, social, political and health in many areas all over the world. The
effects were just like dominoes, and this process seriously affected the EU. In the
EU, which was caught unprepared for this process since public health policies are
under the jurisdiction of the member states, the member states have taken
measures against the pandemic to a greater extent than the EU. Along with this,
the supranational structure of the EU prevented early intervention against the
pandemic due to the fact that the decisions were not taken in a timely and joint
manner. For example, the President of the European Commission announced the
package of measures against the pandemic 47 days after the first cases appeared
in Europe, and the member states tried to take measures until then (Nas, 2020).
This situation has led to the questioning of both the EU and its values that are the
reason for its existence. In such an environment, the COVID-19 policies of the
political groups in the European Parliament, which is one of the main institutions
of the EU and makes binding decisions on the member states, have also been important. They certainly influenced their thoughts towards the EU.

The EPP emphasized that it faced a global public health threat and that the EU needed effective actions to solve this problem. This is why the EU health policy should focus on areas where true European added value can be produced. Stating that the EU should demonstrate its ability to draw accurate conclusions and take action from the impact of the COVID-19 pandemic more than ever, the EPP stated that joint action must be taken for the benefit of the total population and frontline healthcare workers, and emphasized that in such difficult times, there was a need for solidarity between member states and quickly developed and well-coordinated approaches at the EU level. (EPP, 2020b).

According to the EPP, reducing the further spread of the virus is a prerequisite for a lasting economic recovery. Public health and a strong economy are interdependent, as improving health system resilience is an investment in future economic well-being. In addition to this, the nature of a global health crisis requires decisive and concrete action at the EU level in the health sector, which allows for a better EU in crisis prevention and crisis management. The member states and EU institutions should work cooperatively together for an EU that can empower the member states to prevent and manage future health crises in a more coordinated way (Brotman, 2020).

Emphasizing the need for the EU to be active and dominant in health issues in difficult times, the EPP has helped prevent future shortages in the EU against critical medical products, improve access to and availability of health data, and strengthen the EU’s role in global health. The EU, an ambitious proposal from the European Commission for the EPP, is a crucial step towards Europe’s recovery and its rapid and convincing adoption should be a top priority for the EU. To better prepare the EU for future health emergencies, to enable it to respond quickly and decisively, and to reduce dependence on third countries in the field of health, should be the core lesson learned from the current epidemic in order for the EU to play a crucial role in protecting health. Because if some lessons are learned from this crisis, the welfare of the citizens will be ensured, and it will be possible to get out of the crisis stronger (EPP, 2020b).

In the EU, the COVID-19 process caused significant casualties and economic recession. There are important debates on how to deal with the economic crisis and its social impact, as well as public health. Ultimately, as in the past, this crisis reveals the increasing limits of the interdependence of the member states and the EU, as well as the need for more effective multilateral cooperation. For this reason, it has shown once again that the EU needs to improve its relations within itself and with other countries and its neighbours. Emphasizing the importance
of relations with China in this sense, the EPP said that the pandemic clarified the increasing importance of the EU’s relations with China. It was emphasized that the cooperation between China and the EU should be strengthened both in combating the difficulties of the pandemic and in order to get stronger by taking advantage of China’s new situation (EPP, 2020b).

Stating that COVID-19 affected the whole world and that the impact of COVID-19 on society increased day by day, the S&D said that the EU remained ineffective. The S&D, which created an action plan to combat COVID-19 on March 25, 2020, made a number of recommendations, such as investing in research and efficient data sharing across the EU for effective treatment and a potential vaccine against COVID-19, which should be accessible to all, creating Corona bonds as soon as possible, activating the European Stability Mechanism (ESM) with a certain credit limit, initiating a temporary European minimum income program to protect everyone, protecting the unimpeded transportation throughout the Single Market, investing in quality access to the internet to spread digitalization to all areas and taking preventive measures for refugees and asylum seekers, to the EU (S&D, 2020).

Emphasizing the importance of investing in public health systems in Europe and building new and more active policies in the fight against COVID-19, the S&D also noted the need for the member states to strengthen the recruitment of medical personnel and provide adequate resources for salaries and medical equipment to national health systems. The S&D emphasized the need to provide financial power to sustain the EU’s long-term sustainable development and the European Green Deal. Saying that it is necessary to be constructive in the process of COVID-19, the S&D leader Iratxe García also said that the whole world should be vaccinated in an unprecedented challenging environment, that vaccine nationalism would not work, that vaccination would improve the EU’s health system to be open and transparent, and increase production. If the EU is problem-oriented and works in cooperation with international organizations, this difficult process will come to an end (European Parliament, 2021a). However, the Environment Committee coordinator, Jytte Guteland, said that vaccination was the only way to get rid of the crisis (European Parliament, 2021a). Stating that Europe and the world were in a deadly race against time, and the crisis would be prevented by increasing production, the development committee Udo Bullmann emphasized that the EU should play a more active role. Economy and monetary affairs spokesperson Jonás Fernández said that since the COVID-19 crisis had affected households and companies, measures must be taken for SMEs to improve access to investments, protect investors and guarantee full price transparency (European Parliament, 2021b).
Renew, another group that says the EU has been ineffective in the face of the COVID-19 pandemic, called for more ambitious EU actions to defeat COVID-19. The Renew asked the EU to be more ambitious and reduce pressure on health and the economy in order to save lives. The group called on the EU to move faster. The President of Renew, Dacian Cioloş, said that considering the scale of this crisis, the measures of the first emergency package were simply insufficient and that they would support the first support package of the EU. He stated that more ambitious measures were needed in the fight against COVID 19, and these must be implemented very quickly to save lives and protect jobs (Renew Europe, 2021).

However, the Renew warned that it could affect the EU not only economically but also culturally. Stating that culture has an important role in Europe, Renew stated that the cultural world was inactive due to the COVID-19 epidemic and that culture should not be abandoned since it was a vital part of European identity and an important sector of the economy. Therefore, Renew stated that a strong commitment was needed to revitalize European culture. For Renew, an uncultured Europe is meaningless in the economy and other fields. It emphasized that a permanent connection with European citizens should be established in this regard (Renew Europe, 2021).

Arguing that COVID-19 is a “game changer”, Renew stated that it would increase the socio-economic and political risks by changing the context of external relations and global security issues and stated that some of the values that the EU had been trying to promote for decades might be damaged if the necessary measures were not taken. Renew emphasized the necessity of global cooperation in this process and said that the EU remained ineffective and weak in this environment by drawing attention to the lack of global leadership and cooperation in the early stages of COVID-19. Stating that better digital and communication strategies were needed to be more resilient to new threats and technologies, Renew underlined that ending the unanimity rule in foreign relations would help make the EU a more active player, as the recent sanctions showed. In this sense, a united and determined European presence on the world stage has become an absolute necessity for Europeans to defend their interests internationally. The ID highlighted the serious impact of the crisis on the European population and the need for a new assessment for Europe by saying that citizens who had to stay in their homes and did not have freedom of movement did not trust their managers. The political leaders of the EU and its member states were unable to fulfil their duties due to their unpreparedness and unlimited ideological stubbornness. Moreover, in this process, it was seen that the EU member states rather than the EU were more active in resolving the crisis (Identity and Democracy Group, 2021).
The Greens/EFA have also seriously criticized the EU during the COVID-19 process. On the other hand, they found the fund created by the EU important. The 672.5 billion euro fund was seen as the cornerstone of the EU’s COVID-19 economic recovery plan. This fund is designed to provide significant support to EU countries in dealing with the economic impact of the epidemic, in line with the EU’s priorities on climate and digital transition. While the EFA President, Jordi Solé, praised the fund as a historic success, he emphasized that for its implementation to be a real success, it must be thoroughly planned (The Greens/EFA, 2021a).

On the vaccination issue, the Greens/EFA said that there was a need for a well-functioning systematic EU for issues such as global and equal access to vaccines, state support for vaccine production, and the temporary abolition of patent rights. While Ska Keller, president of the Greens/EFA, said that the Greens/EFA stood behind a common European approach to vaccine supply, and investment in vaccine production was necessary to save lives, he also stated that the European Commission should suspend intellectual property rights for a process of time for rapid and equal distribution. Besides, Keller emphasized that nobody would be protected from the pandemic until everyone was protected, and that this virus should not be allowed to deepen global injustices, so it was necessary to take responsibility and be solidary. According to Keller, there is a need for equal access to vaccines globally. Otherwise, it will be difficult to control the pandemic (The Greens/EFA, 2021b).

Philippe Lamberts from the Greens/EFA stated that every procedure regarding the vaccine should be shared with the public, that investment was needed for vaccine production capacities, and that the spread rate of the virus could be prevented with a systematic study. The Greens/EFA, which warned the EU about the initiation of the green and digital process in the fight against COVID-19, emphasized that this process would also contribute to economic development (The Greens/EFA, 2021a).

Also, the ECR believes that the EU should make more efforts to fight the virus. For the ECR, the EU should be an organization that connects the member states, allowing them to live, work and travel without unnecessary barriers and bureaucracy. Therefore, the EU should strive to reduce barriers within the single market, facilitate buying and selling products within the EU, ensure the protection of consumer rights in all member states, and improve the basic infrastructure and accessibility of the transport sectors (ESR, 2020).

A key priority for the ECR Group is to end the stifling regulation imposed by the EU on businesses. According to the ECR, there is an unnecessary and cumbersome bureaucracy within the EU. To reduce cumbersome bureaucracy and unnecessary laws will ensure the efficient functioning of EU policies (ESR, 2021).
The ECR, which makes recommendations to minimize the economic losses of the EU countries and citizens while tackling COVID-19 and favours stretching the existing bureaucratic and legal practices of the EU to stimulate the economy, spoke of the EU’s concerns about the COVID-19 Vaccination Strategy. The ECR stated that the EU was slow about vaccines and that the future of the EU depended on the health of people and the economies of the EU countries. Stating that the EU was not innovative enough in vaccine production, the ECR Group emphasized that the EU should take the necessary measures as soon as possible and that this would help overcome the crisis (SDRC, 2020).

The GUE/NGL also criticized the EU for its COVID policy. According to them, while people face the destruction of COVID-19, the EU makes stereotypes. While robust measures are needed to overcome this crisis, according to GUE/NGL, the EU does not do this (GUE/NGL, 2020c). Manon Aubry, one of the GUE/NGL Co-Chairs, said that the EU had failed to respond adequately to the ongoing crisis, but needed a much better plan from European institutions. Martin Schirdewan, another GUE/NGL co-chairman, said that as EP members, instead of choosing a fair solution of the European Coronabonds supported by the ECB, they should condemn the outcome of the Eurogroup meeting, which agreed to mobilize the ESM’s austerity trap. Furthermore, Schirdewan stated that the most stringent measures should be taken to protect the lives, health, and incomes of workers, unemployed people, women, people living in poverty, and especially those who are particularly vulnerable during this epidemic, such as refugees and homeless people. He stated that they had proposed a comprehensive set of policies in many areas, from health to education (GUE/NGL, 2020c).

Stating that fundamental rights and freedoms should not be ignored in the solution of the crisis, Schirdewan said that an unprecedented crisis was experienced and that a policy based on protecting life should be acted upon. According to the GUE/NGL, the EU must invest heavily in response to the epidemic and be unconditionally backed by the full force of the ECB. In addition, urgent and massive public expenditures should be made to support health systems that were unprepared for the crisis and destroyed by the austerity policies imposed by the EU in many countries. Also, the group, who said that the EU should be ready to take radical measures in vital sectors in order to contain this crisis, emphasized the protection of jobs, income and social security (European Parliament, 2020).

CONCLUSION

Political groups in the EP criticized the EU on the basis that it was caught unprepared and ineffective in the COVID-19 process, and emphasized that the EU
should develop policies that would be more active in such crises, and stated that it could only survive potential crises in this way. The EPP, one of the political groups, sees it as a precondition for economic recovery and stated that EU member states should work in solidarity and coordination in order to get out of this process quickly. The S&D, on the other hand, makes suggestions such as providing financial support to do research on vaccines, stocking medical supplies, eliminating the disruptions in the Single Market, allocating economic resources to the public and small businesses, supporting workers and SMEs, facilitating access to investments. They also stated that the EU should engage in this process in an open, transparent, problem-solving, production-increasing, global cooperation.

Renew, on the other hand, emphasized the importance of not only the economy but also culture in the process of Covid-19 by saying that the EU should protect human life and employment in this crisis. Renew also stated that culture had remained inactive due to COVID-19, and they claimed that if this element, which was one of the most important parts of the EU, were not revived, other areas, such as human rights, would also fail. Stating that the importance of digitalization has increased with COVID-19, Renew emphasized that the EU should have an effective and strong digital communication strategy. On the other hand, the ID stated that the EU was caught unprepared for this process and could not fully fulfil its task, and the ID said that this process would be resolved through sovereign states rather than the EU.

Stating that climate and digitalization should also be given importance in the fight against COVID-19, the Greens/EFA believed that a systematic EU could produce more solution-oriented policies. Emphasizing that no one can be protected without protecting everyone, the group stated that global and equal access to vaccines should be provided, and in this sense, it would be beneficial for the EU to suspend its intellectual and property rights for a while.

The ECR stated that if the barriers in the Single Market were reduced, and the cumbersome bureaucratic structure within the EU was regulated, the EU could work more efficiently and economic development could be achieved more easily. Lastly, the group stated that the EU should be more effective in its measures to solve the GUE/NGL problems and stated that investments were important in this process, as well as fundamental rights and freedoms, and they should never be ignored.

Generally speaking, the political groups that stated that the EU was insufficient in this process focused on the need for an EU that acted on the basis of global cooperation and was active in every field. But due to the problems arising from the institutional structure of the EU, it is very difficult to form a common position among the member states. As the EPP points out, which cannot make a joint
decision in times of crisis and therefore intervenes late in solving the crisis in the EU, it is not possible to create solidarity and coordination in the COVID-19 crisis. On the other hand, it will not be easy for the EU, which was severely affected by the global economic crisis of 2008, to provide the expected financial support for this crisis. Moreover, it is difficult to put into action the humanitarian rhetoric and equality of the EU, which intervened late in the crisis and could not make a joint decision on vaccines. The use of bureaucracy in the EU decision-making structure slows the process down. On the other hand, as the Greens/EFA group says, proposals to take measures to protect the climate and greens do not seem applicable or sustainable as the EU is struggling with a crisis such as COVID-19. Therefore, in such a crisis period, the rhetoric and suggestions of the political groups in the EP do not reflect much truth since they are mostly designed according to their own ideology. In addition, as all political groups stated that in the age of digitalization, policies for digitalization in this process seemed realistic. It also seemed more likely that if the EU prioritized digitalization efforts, it would achieve a successful result.

In this context, if the EU wants to consolidate its future position, it must move forward with a structure that can make quick and common decisions, intervene urgently in crises, put bureaucracy second, and prioritize the interests, demands and wishes of its citizens. Otherwise, as the Renew Group points out, the EU’s response to crises will decrease day by day, and as it is a structure where culture and ideology are prioritized, this will also increase vaccine nationalism during the COVID-19 crisis. Moreover, as the problems of cumbersome bureaucracy and non-joint decision-making in the EU continue, it will become difficult to implement proposals for the COVID-19 crisis, such as ensuring economic development, economic assistance for businesses, stockpiling vaccines, and distributing vaccines equally to everyone.

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THE GLOBAL ROLE AND AMBITIONS OF THE EUROPEAN UNION – BEFORE AND DURING THE COVID-19 PANDEMIC¹

Jelica Gordanić²

Abstract: Before the COVID-19 pandemic, the global role of the EU had been seriously challenged for multiple reasons: the diversity of interests of the member states, the crisis of European identity, Brexit, lack of military power, complex decision-making process, dependence on the US, etc. The outbreak of COVID-19 and an inadequate response by the EU damaged its reputation and slowed down its global influence and ambitions. EU citizens are losing trust in the EU institutions. On the other hand, China and Russia have been using vaccine diplomacy to develop their soft power and global influence. China and Russia have enlarged their influence in the Balkans, the Eastern Partnership countries, Asia, the Pacific region, and Latin America. Compared with these countries, the EU is losing the characteristics of a global actor. The paper examines to what extent the EU’s role as a global actor has been damaged during the COVID-19 pandemic and what the EU can do to overcome the crisis caused by COVID-19. The paper concludes that the EU should intensively work on its internal problems and its role as a military force and dependence on the US. The inadequate response of the US to the COVID-19 pandemic gives the EU space to become a new leader in the transatlantic world.

Keywords: EU, COVID-19, pandemic, China, Russia, the US, global ambitions, global role.

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INTRODUCTION

The paper analyses the global role and ambitions of the European Union (EU) before and during the COVID-19 pandemic. In the period before the pandemic, the global role of the EU had been challenged due to Brexit, the crisis of European identity, lack of military power, the dependence on the US, the economic rise of China, etc. The EU has lost one seat in the UN Security Council as a result of Brexit. Besides the progress of the Common Security and Defence Policy (CSDP), NATO remains the most recognizable actor in European security.

In the first part of the paper, the author deals with the obstacles standing on the EU’s way to become a strong global actor. The author pays attention to the successful developments of A Global Strategy for the European Union’s Foreign and Security Policy (EU Global Strategy), as well as the weakened role of the EU in the United Nations and its lack of military power and dependence on NATO and the US.

In the second part of the paper, the author analyses the impact of the COVID-19 pandemic on the global role and ambitions of the EU. At the beginning of 2020, the EU was preparing for Brexit negotiations, the elections of the president of the United States, talks over the next seven-year budget of the Union, the German presidency of the European Council and the Conference on the future of Europe. The outbreak of the COVID-19 pandemic affected the political priorities and global ambitions of the EU and pointed out the vulnerability and strategic loneliness of the EU. The COVID-19 pandemic caused significant damage to the reputation of the EU at both internal and external levels. EU citizens are losing trust in the EU institutions. On the external level, the pandemic crisis has challenged the place of the EU in the world and its relations with the other global actors – the US, China, and Russia. The paper examines to what extent the EU is damaged by the COVID-19 crisis and whether it has the capacity to become a global actor after the crisis.

GLOBAL AMBITIONS OF THE EU AND OBSTACLES STANDING ON ITS WAY

Today’s multipolar world is a good opportunity for the EU’s positioning as a global actor. The EU has proven to be one of the most powerful regional actors in the world. The rise of the global political ambitions of the EU has caused a lot of public and academic attention. A Global Strategy for the European Union’s Foreign and Security Policy (EU Global Strategy) from 2016 introduces and highlights priorities of the EU on the global level:

– the security of the Union,
– state and social resilience to the East and the South,
– an integrated approach to conflicts and crises,
– cooperative regional order, and
– global governance for the 21st century.

In the period before the COVID-19 pandemic, the implementation of the EU Global Strategy has shown progress on many levels: European security and defence, the reaffirmation of the perspective for the Western Balkans; the goal of strategic autonomy as set out by the Council; preserving the nuclear deal with Iran; the step change in the partnership with Africa and strong support of the UN reforms. In achieving its global ambitions, the EU has established a successful net of inter-regional and bilateral trade agreements and with almost all important economies and regions of the world. During the tenure of the Juncker Commission, 2014-2019, the EU concluded trade agreements with Canada, Japan, Vietnam, Singapore, and the MERCOSUR countries, Brazil, Argentina, Paraguay, and Uruguay (Rolloff, 2020, 33). Also, the EU has deepened its partnerships with the Middle East and North African states and regional organizations like the League of Arab States, the Organization of Islamic Cooperation, and the Gulf Cooperation Council (EEAS, 2019. p. 10).

While expanding its global role and ambitions, the EU has been confronted with a number of serious challenges, including the migrant crisis, Brexit, member states’ disagreements on political issues, China’s economic rise, a crisis of European identity, and so on. Weak foundations of the European identity in the moments of crisis (like the migrant crisis or the COVID-19 crisis) “causes the gradual awakening of the national identities of the member states” (Gordanić, 2019, p. 11). Eurosceptics raise the question of to what extent the process of European integration threatens the national identities of the member states.

The key factor in the successful global role of the EU is the unity of its member states. But, maintaining unity is a very difficult task for the EU, having in mind its members’ disagreements on controversial political issues like the migrant crisis, Ukraine, Kosovo, Turkey, etc (Lopandić and Gordanić, 2021, p. 180). The EU is a *sui generis* actor in the system of international relations. It is a one-of-a-kind actor, a hybrid of state and international organization. By its characteristics, the EU is a supranational organization in which member states share sovereignty. Some of the EU’s biggest rivals on the global level are states like the US, China, Russia, and new emerging powers like Brazil and India. Unlike the EU, states do not have a problem achieving and maintaining unity on important political or economic issues. The unique features and *sui generis* nature of the EU, combined with a complex institutional structure and decision-making process, can be considered a serious obstacle to achieving its global role and ambitions.
BREXIT – ONE SEAT LESS IN THE UN SECURITY COUNCIL FOR THE EU

Besides the above-mentioned problems, the EU has been facing one new problem at the global level – Brexit. After Brexit, the EU lost the third-largest member state, 14.8% of its GDP, the largest stock of foreign direct investment, and the second-largest net contributor to the common budget. Theorists consider that the EU without Britain will be smaller, poorer, and less influential on the world stage (Tudoroui, 2018, p. 112).

As a consequence of Brexit, the EU lost one of its two member states with permanent seats on the UN Security Council (UNSC) as well as the benefits of the UK’s considerable diplomatic networks and skills. France was left as the only EU’s permanent representative at the UNSC and the only veto power. Other 26 EU member states can become non-permanent members of the UNSC for a period of two years.

Brexit may be an opportunity for EU members to improve their approach to UN diplomacy. France, for example, will have to balance the privilege and burdens of being the only EU member with a permanent seat in the Security Council. Germany will need to take a clearer leadership role in UN affairs. Other European states and the European External Action Service (EEAS) will also have to become more active to fill the gap Brexit creates – potentially leading to an increase in European diplomatic activism at the UN (Gowan, 2018). Brexit has the potential to cause a lack of trust between the UN and the UK in the future, as well as the potential to deteriorate cooperation between the UK and France in the Security Council (SC).

With the aim of compensating for its reduced status in the UN after Brexit, the EU should rely on Article 34 of the Treaty of the European Union, which states: “The Member States shall coordinate their actions in international organizations and at international conferences. They shall uphold the Union’s positions in such forums.” The EU gained enhanced observer status in the UN General Assembly in 2011. The enhanced observer status is “an opportunity for the EU to achieve unity of its member states on important political issues” in order to set the basis for future global ambitions (Gordanić, 2017, p. 17).

THE EU AS A MILITARY FORCE?

One of the key issues standing in the way of the EU’s global role and ambitions is the lack of military power. The EU is an actor that combines the characteristics of soft and normative power, based mainly on its economic power and political system. At the same time, the EU entails very limited characteristics of military hard power.
Despite being one of the world’s biggest economic powers, as well as one of the strongest normative and civilian power, “the absence of actual military hard power does not allow the EU to be an equally great power – like the US and China – in all dimensions of international politics” (Papanikolaou, 2020, p. 8).

The relationship between the EU and NATO is a complex one. Besides sharing 21 member states, cooperation between the EU and NATO has been often challenged due to the EU-Turkey relations, with Cyprus as a complicating factor. As a NATO member, Turkey often blocks various cooperative actions between NATO and the EU (Emerson, Balfour, Corthaut, 2011, p. 104).

Besides some of the EU’s military successes and the progress of the Common Security and Defence Policy (CSDP) from soft to hard power peacekeeping missions and the formation of the Permanent Structured Cooperation (PESCO), the EU is not yet considered a military force. PESCO has been characterized as a project created more for political reasons rather than concrete security ones. Because of that, for the moment, it is NATO, not PESCO, which is defending Europe (Apetroe, 2018, p. 264). Theorists consider the US to be military force number one and NATO as the backbone of European security (Lopandić and Gordanić, 2021, p. 182).

Even before the COVID-19 pandemic, the relationship between the US and the EU was a challenging one. During the Trump administration, the US made it clear that those who have not contributed enough cannot count on the support of the US. The US has switched its focus to Asia and China. Europe is no longer priority number one. The COVID-19 crisis has the potential to cause negative strategic consequences for the transatlantic relationship. Theorists consider that COVID-19 has already added significant strains on US-Europe relations at a time when Washington is reviewing its global force posture. With the global economic recession likely to impact defence spending on both sides of the Atlantic, tensions over NATO burden-sharing could soar and further affect Washington’s ability and willingness to remain the ultimate guarantor of Europe’s security (Billon-Galland, 2020, p. 2).

THE ARRIVAL OF THE COVID-19

The COVID-19 pandemic has been a global political and geopolitical test. It has affected healthcare systems, economies, and governance of all states of the world. The COVID-19 pandemic has the capacity to cause the most serious global crisis since the Second World War.

The pandemic and its consequences have been dramatic for the most important global actors. Despite the fact that crises such as the pandemic are expected to improve international cooperation and strengthen multilateralism and interstate cooperation, the major global actors have decided to act unilaterally with the aim
of defending their interests. The pandemic crisis has shown the lack of international cooperation on the global level. The COVID-19 crisis has become a powerful tool for the major global actors, the US, China, and Russia, to improve their soft power and prove their dominance in international politics. Some of them, like China, are doing an impressive soft-power job. Some of the global actors did not start well in the COVID-19 struggle. The European Commission has already accused Russia and China of taking advantage of the pandemic to engage in targeted influence operations and disinformation campaigns in the European Union (EU), with the goal of weakening European democratic systems. (Billon-Galland, 2020, 1).

The pandemic has deepened the rivalry between the global actors. In this not-so-much-silent conflict, the EU has found itself in an intermediate position between other global actors. Theorists have been wondering: Has the COVID-19 crisis amplified nationalist trends, which have deepened rifts and further damaged cooperation and multilateralism? Is the EU able to fit into the world of power politics? (Martin, 2020, p. 3).

THE COVID-19 PANDEMIC AND THE EU
– LOSS OF TRUST OF THE MEMBER STATES

The COVID-19 pandemic, coupled with the weakened position of the EU at the UN, internal problems, and the lack of military power, puts the global role and ambitions of the EU into question, as well as its ability to fit into a world of power politics. The pandemic has revealed Europe’s dependencies on certain products, critical materials, and value chains.

The effects and consequences of the pandemic crisis are multi-layered for the EU. They can be considered as:

– a trust test between the EU and the member states.

– a resilience test for the EU and its member states, which are positioned between other global actors – China, the US and Russia.

– a test of the global role and global ambitions of the EU.

What was the EU response to the COVID-19 pandemic? Can it be considered strong and leading? The EU’s contribution to fighting COVID-19 was initially limited. A Treaty of the EU limits the EU’s competencies in public health. Health and borders are strictly national powers, which means that it was unclear how the EU could collectively respond to the pandemic. The EU states are too integrated to manage the crisis separately, but not integrated enough to manage it collectively (Lehne, 2021). The absence of cohesion between the member states and the European
institutions was noticeable. Theorists consider it “a major sign of European weakness in managing crises.” (Papanikolaou, 2020, p. 8).

The COVID-19 crisis has shown the European public a reality that Europe is alone and vulnerable. A large number of EU citizens think that the EU has slipped into irrelevance in the coronavirus crisis. In the survey conducted by the European Council on Foreign Relations (ECFR) in June 2020 among citizens of almost all EU member states, there was a sense that their country was left by itself in dealing with the pandemic. EU citizens reported that their perception of EU institutions has deteriorated, with those reporting that it has not improved outnumbering those reporting that it has improved. (Dennison, Zerka et al, 2020, pp. 2-3).

In every surveyed country, at least one-quarter of respondents said that their perception of the EU had worsened. The pandemic crisis and the lack of a European response were strongly associated in some member states with the lessons learned from the European debt crisis (2010–12) and the refugee crisis (2015). Even in the members who are historically Europhiles, like Spain, half of the respondents declared that their view of EU institutions had deteriorated. On the same question, 63 per cent of Italians and 61 per cent of French people said that the EU has not lived up to its responsibilities. (Dennison, Zerka et al, 2020, p. 10).

Citizens of Spain and Italy experienced lack of solidarity from the European Union and other member states as regards the supply of medical equipment and the closing of the Union’s internal borders. In Italy, the initial stage of the COVID-19 crisis caused an unprecedented crisis of confidence towards the European Union: 72 per cent of Italians considered that the EU did not help during the crisis (Martin, 2020, pp. 6-7).

The COVID-19 crisis is not only a public health crisis for the EU. It is also a crisis of European integration, European identity, and European unity. Instead of growing solidarity in the time of crisis, the EU was returning one step backwards compared to the problems it had before the COVID-19 pandemic. Internal problems and a more profound crisis of European integration and identity overlapped with the problems related to the global role and ambitions.

The EU cannot be a strong global leader if its unity is in crisis. The results of the survey conducted by the ECFR show that EU citizens have lost trust in the EU institutions. This is not a good sign for the reputation of the EU. Other global actors can and will use these circumstances to diminish the role of the EU as a global actor and its global ambitions. The EU is currently in a situation that requires strong support and cooperation within the EU members and institutions. Citizens believe that the crisis has shown the necessity for greater cooperation within the EU (Dennison, Zerka et al, 2020, p. 13).
A positive step forward in reviving the reputation of the EU was the agreement on a EUR 750 billion recovery plan to help the EU handle the crisis caused by the COVID-19 pandemic and on a EUR 1074 billion long-term EU budget for 2021-2027 (European Council, 2020). According to the conclusions of the European Council, the European Commission will borrow from the capital markets the amount of EUR 750 billion in 2018 prices to be allocated to the member states as loans (360 billion) and grants (390 billion) to overcome the pandemic crisis. The borrowing process will end in 2026. Loans will be repaid by the end of 2058 at the latest. In addition, EUR 1,074 billion will be spent as part of the budget of the EU, making the total spending for the 2021-2027 period 1,824.3 billion (Papanikos, 2021, p. 87). The first measure is called Next Generation EU (NGEU), and the latter is the Multiannual Financial Framework (MFF).

OTHER GLOBAL ACTORS AND COVID-19
– A BETTER RESPONSE TO THE PANDEMIC THAN THE EU’S?

The pandemic crisis has shown the lack of international cooperation and deepened rivalry between the major global actors. The pandemic has shown very assertive power politics led by China, Russia, and the US. European Council’s President Charles Michel stated: “We should not let ourselves be misled by China and Russia, both regimes with less desirable values than ours, as they organize highly limited but widely published operations to supply vaccines to others” (Leigh, 2021).

China’s government saw the pandemic as an opportunity to exert its international leadership and influence. It has managed to turn the crisis into a diplomatic and strategic opportunity, to increase its soft power and to improve its role as a global actor. The demonstration of the soft power of China in the form of donations of healthcare equipment to the member states of South and East Europe has caused suspicion in the EU about the intentions of China. Also, Chinese donations of healthcare equipment to the EU member states might be considered a sign of European weakness and lack of power (Papanikolaou, 2020, 11). Despite multiple Russian internal problems, the Kremlin has not forgotten the international domain. Moscow “has lost no time in seeking to flex its soft power muscles, sending “humanitarian aid” to a number of Western countries” (Mikhelizde, 2020, p. 3). Theorists consider Russia’s response to the COVID-19 pandemic as “hardship at home, soft power flexing abroad” (Mikhelizde, 2020, p. 3).

At the beginning of the pandemic, the EU was criticized for the slowness of its own vaccination process, supply shortages, delivery bottlenecks and concerns about the safety of the vaccine. In the meantime, the EU has taken its critics seriously and become one of the leaders in vaccination. Around 70% of the EU’s adult population
have been fully vaccinated against COVID-19. The EU overtook the US in vaccinations. Its vaccination campaigns expanded faster than anywhere else in the world (Peltier, 2021).

But the shaky beginning of the EU vaccination process was an opportunity that fitted the strategic narratives of Beijing and Moscow. China was trying to prove the superiority of the Chinese model of governance as opposed to the model of Western liberal democracies. Some theorists consider China and Russia “as adversarial regimes vested in undermining the transatlantic alliance” (Corke, 2020, p. 3).

China and Russia gave the EU a powerful lesson on its own territory. During the COVID-19 pandemic, both countries gained supporters of right-wing populist parties from the EU member states, especially from Bulgaria, Italy and Poland (Dennison, Zerka et al, 2020, pp. 8-10).

The EU member states of Hungary and Slovakia have already turned to Beijing and Moscow for additional supplies of the COVID-19 vaccines. The Czech Republic, Austria, as well as some other EU member states, have shown an interest in the Russian vaccine and have held negotiations with Moscow about acquiring Sputnik V once it has been evaluated by the European Medical Agency (EMA). The European Commission has been criticized for being too bureaucratic in its approach to vaccine contracts and for focusing on AstraZeneca, which has ended up seriously defaulting on delivery to the EU. Sebastian Kurtz, Chancellor of Austria, accused the EMA of being too slow to approve the Russian vaccine (Adler, 2021).

During the pandemic, China and Russia have positioned themselves as serious competitors to the EU in terms of influence and medical supplies over the Balkans and Eastern Partnership countries. Their vaccine exports, especially in Serbia, came with soft-power messages, praising mutual friendship and criticizing the EU for not helping when it was needed the most. Most of the Balkan countries, except Serbia, have difficulties obtaining the vaccines. Following the success story of Serbia, the other Western Balkans nations are considering turning to China and Russia for vaccines. The EU is losing the vaccine battle against China and Russia in the Balkans region. The EU delivered some vaccines to the regions of the Balkans and Eastern Partnership countries, but China and Russia had done it long before (Stojanović, 2021).

China has had impressive vaccine diplomacy compared to the other global actors. By mid-May of 2021, China exported more than 250 million doses overall or 42 per cent of its total production. The United States exported only 3 million doses or about 1 per cent of its production. That is quite an impressive statistic for China. More than half of China’s total exports, about 165 million doses, have been administered in Latin America. After the decision of the Biden administration not to lift an export ban on raw materials for vaccines for Latin American countries, the
soft power and influence of China have become even more relevant in this region (Stuenkel, 2021).

The Russian vaccine plays an important role in developing countries, which do not have their own vaccine programs and have been unable to compete with wealthier countries for more desirable vaccines. So far, more than 60 countries have approved the Russian vaccine Sputnik V. The public in the EU thinks that Russia is trying to employ the vaccine as a political tool globally to insert instability, division, and polarization in the political scene. They see vaccine diplomacy as a way for Russia to implement its existing strategy to encourage division in Western countries in order to weaken them. (Bateson, 2021).

Unlike China and Russia, which have used the pandemic as a tool to increase their global political influence, the US lost part of its reputation and global role during the pandemic. Theorists consider that the US’ lack of support for international efforts to fight the COVID-19 pandemic represents “the biggest absence of US leadership since it emerged as a super power in World War II” and that it “reflects more than simply failure” (Corke, 2020, p. 4).

The EU is not yet considered a military force at the global level. It is still dependent on the US within NATO. With the vulnerable global role of the US during the pandemic and the US-China strategic rivalry before the pandemic, the EU should take more care about its own security. Perhaps for the first time in a long time, the EU should consider its future perspectives and relations in a triangle of strategic transatlantic dialogues: EU-US, EU-NATO, and NATO-US (Roloff, 2020, p. 35). Also, one of the main challenges for the EU in the post-pandemic world will be to review its own global place and its relations with the global actors, China and Russia, who have improved their global power during the pandemic.

CONCLUSION

Even before the COVID-19 pandemic, the global role and ambitions of the EU have been challenged due to the crisis of European identity, Brexit, the lack of military capacities and the dependence on the US. The EU Global Strategy from 2016 had the potential to become a possible fresh start of the EU Common Foreign and Security Policy and a factor of empowerment of the EU’s global ambitions. But the reality, however, was not in the EU’s favour.

The COVID-19 pandemic has significantly slowed down the global ambitions of the EU. On the internal level, the pandemic has been handled uncoordinated and inefficiently. EU citizens have lost trust in the EU institutions. On the other hand, powers like China and Russia have been using the pandemic as a strategic opportunity. These two countries significantly improved their reputations, influence,
and status as global actors. They have spread vaccine diplomacy to almost all regions of the world – Latin America, the Balkans, the Eastern Partnership countries, Africa, Asia, and the Pacific. For China and Russia, the pandemic has been an excellent strategic opportunity, especially for China. Having in mind the global success of China and Russia during the pandemic, the question is: What has been left for the EU and its global role and ambitions? What are the global perspectives of the EU after the pandemic?

European foreign policy is entering an era of redefinition. Some theorists consider that Europe and the United States need to have a shared understanding of the risk that Russia and China pose to the multilateral system. They should focus on formulating a coherent, collective, and nuanced response that requires assessing Chinese and Russian influence operations against core US and European interests as well as political and economic vulnerabilities (Corke, 2020, p. 13). Perhaps, with the aim to start over with its global ambitions, the EU should make some changes in its *modus operandi*, instead of considering China and Russia as a threat. The EU needs to define its bilateral relations with the US, China, and Russia (Gaub and Boswinkel, 2020, p. 50).

The COVID-19 crisis might bring some new strategic conclusions for the EU in order to improve its global role and ambitions. The EU has proven to be a strong figure on a global level. After difficulties in the vaccination process, the EU is now one of the global leaders in vaccination with 70% of vaccinated adult citizens.

The EU should focus on restoring its integrity and European identity. Having in mind member states’ disagreements during the pandemic, this is not going to be an easy task. The EU has been quite dependent on the US. To fulfil its own global ambitions envisaged in the EU Global Strategy, the EU should focus on becoming more independent from the influence of the US. It should develop its military capacities and reconsider its relationship with NATO. Also, the EU Global Strategy has shown significant progress in the economy and trade agreements. On the regional level, the EU has long been respected as an economic giant. In the period after the pandemic, the EU should focus on the re-development of its economic ambitions at a global level.

The period after the pandemic is going to be challenging for the EU. After the Euro crisis and migrant crisis, the pandemic crisis is a third serious challenge for the EU in a short period. After the global success of China and Russia during the pandemic, the global influence and ambitions of the EU are under question. Perhaps the EU will never have the reputation of a global actor as it currently has as a regional actor, but it should not give up its global role and ambitions. In order to focus on the Global Strategy’s goals, the EU must address internal challenges, reduce its reliance on the US, and evaluate its future relations with China and Russia.
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THE RIGHT TO COMPENSATION FOR BUSINESS RESTRICTIONS FRAMED BY HUMAN RIGHTS AND STATE AID RULES¹

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Abstract: State regulations restricting a certain type of business or a certain type of business activity are considered by the European Court of Human Rights (ECHR) as a “control of use” rather than a “deprivation of ownership” case, i.e., de facto expropriation. In this context, the ECHR provides an analysis of the relationship between Art. 1 of Protocol No. 1 and such “control of use”. This case law can be recalled in the context of measures adopted in the fight against the COVID-19 pandemic.

For the purpose of compensating the restrictions on the use of property, all instruments which have as their object or effect the alleviation of the burden of a public health measure on the entrepreneur must be taken into account. These instruments may therefore also fall within the scope of the European Union competition rules since distortions of competition through state aid are not compatible with the internal market. The presented research aims to assess and evaluate the responses of the European Union Member States vis-à-vis compensation state aid schemes, compare methods of compensation schemes notified by the EU Member States, and assess solidarity in respective MS based on the value of compensation schemes.

Keywords: European Convention on Human Rights, EU State Aid Rules, compensation schemes, business restrictions.

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INTRODUCTION

The outbreak and subsequent raging pandemic of COVID-19 proved difficult to rein in, with virtually all member states of the European Union (EU) adopting various restrictions, protecting their citizens but at the same time causing “unfortunate collateral damage to the economy” (Van Hove, 2020, p. 15). These restrictions and subsequent economic losses naturally clash with the interests of business operators to carry on with their activities, which fall under the protection of the right to property recognized under Art. 1 of Protocol No. 1 (P1) of the European Convention on Human Rights (ECHR). These restrictions are considered by the European Court of Human Rights (ECHR) as so-called “control of use” cases, rather than de facto expropriation or “deprivation of ownership”. To consider these restrictions compatible with human rights, there must be, above all, a fair balance between the general interest of society and the requirement to protect the fundamental rights of the individual.

The proportionality test must also assess whether, as a result of the measures, the trader did not bear an “individual and excessive burden”. The ECHR considers, for example, the residual value of assets and their retention, or general compensation schemes in the assessment of this burden in order to determine whether the interference with the property of the business was proportionate. The role of compensation is particularly important in this regard, whether through a flat-rate compensation, a rescue mechanism sold to an industry, or when the entrepreneur’s assets did not substantially lose value, as the entrepreneur could repurpose them.

As compensation for such interference, all instruments that have as their object or effect the alleviation of the burden of a public health measure on the trader are considered. Under such a broad view of compensation, these instruments may therefore also fall within the scope of the EU competition law since, according to Art. 107(1) of the Treaty on the Functioning of the European Union (TFEU), distortions of competition through state aid are not compatible with the internal market. By reflecting on the role compensations have in protecting the right to property of business operators, and assessing intertwined compensation schemes safeguarding the right to property, and regulation of state aid in the EU, this research aims to assess and address these problems in order to:

1) Evaluate the response of the EU vis-à-vis compensation state aid schemes;
2) Compare the methods of compensation schemes notified by the EU Member States and assess solidarity in respective MS based on compensation schemes’ value.
International Organizations and States’ Response to Covid-19

RESTRICTIONS OF BUSINESS ACTIVITY AND THEIR COMPATIBILITY WITH THE EUROPEAN CONVENTION ON HUMAN RIGHTS

Apart from causing a global health crisis, the COVID-19 pandemic has resulted in significant shifts in views on governments’ permissible interferences in the entire spectrum of human rights. The need to contain the pandemic is constantly at risk of morphing into the any-means-necessary approach, where pandemic countermeasures are adopted without any considerations as to their necessity or proportionality (Thomson & Ip, 2020, p. 16). The measures span across a broad range of interferences. One significant impact that needs close assessment is the conduct of business activities and restrictive measures placed on them during the pandemic. While these restrictions address an entirely new crisis, their compatibility with human rights of business operators can, nevertheless, be assessed through the jurisprudence of the ECtHR, which has repeatedly considered such restrictions throughout its existence, albeit the rationale behind the challenged restrictions often varied considerably from the public health crises represented by COVID-19 nowadays.

One of the recent landmark judgments of the ECtHR concerning the right to property and interferences with business activities is the case of O’Sullivan McCarthy Mussel Development Ltd. v. Ireland. The case concerned restrictions adopted by Ireland in order to give effect to EU environmental law instruments, which had the result of depriving the applicant company of the opportunity to fish for mussel seeds, even when the necessary license for fishing had been obtained by the applicant company. When assessing the alleged violation of the right to property and peaceful enjoyment of possessions in the context of freedom to conduct business activities, the ECtHR had no difficulty in considering economic interests in business activities requiring a licence or a permit to fall within the scope of Art. 1 P1, and found, in accordance with its jurisprudence, interference with the right to property even where the applicant company was not deprived of any licences, as the measures of respondent state have nevertheless restricted the usual conduct of the business licence was issued for. The ECtHR followed its case law dating back to the older right to property cases dealing with, for example, real estate expropriation (Sporrong and Lönnroth v. Sweden (Plenary), app. nos. 7151/75 and 7152/75, 23 September 1982, § 61 et seq.), considering which of the three separate tests to use when dealing with restrictions on business activities. In an approach similar to the lex specialis doctrine, the ECtHR first considers whether a deprivation of possessions has occurred or control of the use of the property for the purposes

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4 See also Werra Naturstein GMBH & CO KG v. Germany, app. no. 32377/12, 19 January 2017, § 37.
of safeguarding the public interest. Only if neither the second sentence of Art. 1(1), nor Art. 1(2) P1 applies, will the ECHR proceed with assessment of the general principles under the protection of peaceful enjoyment of possessions and interferences therewith (Sporrong and Lönnroth v. Sweden, § 61.).

Based on the well-established positions of the ECHR jurisprudence when it comes to considerations of state interference in business activities which renders them partially or wholly impossible, it can therefore be concluded that virtually all of the measures and restrictions adopted throughout the time of the SARS-CoV-2 pandemic in the Council of Europe Member States that had an impact on business would fall within the category of control of property use. Even if the measures would mean that the business concerned is forced to limit, halt, or stop its operations, or even close down permanently, they would not lose any economic interest to such an extent that would warrant a finding of a deprivation of property by the ECHR. Only the most extreme cases of draconic restrictions, which would not only effectively deprive the business of the possibility to operate, or force it to wind up its activities, but in fact deprived it of access to its assets or real estate, would potentially be considered outside the second paragraph of Art. 1 P1, as a deprivation of property.

Nevertheless, the second paragraph still maintains strict criteria for any control of property use, which it must fulfil in order to shield the state measures from a violation of the right to property under the ECHR. The wording of the second paragraph itself does not provide any criteria for interference with the property that used to be considered compatible with the ECHR, unlike many substantive provisions. The general interest authorizes state parties to control the use of property without any specific curtailments of this power. Nevertheless, the test of lawfulness is found in the provision dealing with the deprivation of property limb of Art. 1, as well as many other provisions, and has been applied by the ECHR even in control of use cases (O’Sullivan McCarthy Mussel Development Ltd. v. Ireland, § 107). Similarly, the requirement of general interest asks the states to justify their interference with the pursuit of some legitimate aim or purpose (Bélané Nagy v. Hungary (GC), app. no. 53080/13, 13 December 2016, § 113). Finally, the interference must be proportionate in order not to constitute a violation of the right to property. An individual concerned must not bear an individual and excessive burden, disproportionate to the aims sought to be achieved by the state (James and others v. the United Kingdom (Plenary), app. no. 8793/79, 21 February 1986, § 50). The same requirement of proportionality applies to both, the deprivation-of-possession cases and the control-of-use cases, as the requirement of balancing the right to property against the interests of society is reflected in Art. 1 P1 as a whole (Werra Naturstein GMBH & CO KG v. Germany, § 45). However, the ECHR
traditionally leaves states with a margin of appreciation to adopt the desired measures, and in cases of business activities, the margin afforded is a wide one (Ouzounoglou v. Greece, app. no. 32730/03, 24 November 2005, § 29).

In assessing whether such a margin has been respected, the ECHR pays attention to all the individual circumstances of specific cases, without following an exact checklist of facts, which makes it naturally more complicated to predict the specific cases of pandemic restrictions that would fail the proportionality test. Nevertheless, the existing case law identifies several factors recognized in the past as vital when dealing with proportionality assessment under Art. 1 P1. First and foremost, for the purpose of this paper, is the role that payment of compensation and compensatory schemes have in balancing the burden placed on economic operators and the interests of the state to halt, or at least weaken, the pandemic.

It is precisely at this point where the relevance of distinguishing between deprivation of property and control of use cases plays a vital role in assessing the proportionality of state interference. Despite the requirement of proportionality in both paragraphs of Art. 1 P1, only in the case of deprivation of property, the lack of compensation would mean, save for exceptional situations, a per se finding of a violation of the right to property (James and others v. the United Kingdom, § 54). In control of use cases, on the other hand, the lack of compensation is “not of itself sufficient to constitute a violation [of the right to property]” (Depalle v. France (GC), app. no. 34044/02, 29 March 2010, § 91). Nevertheless, lack of compensation for restrictive measures plays an important role in the contribution to finding the measures disproportionate and arbitrary control of use (Vékony v. Hungary, app. no. 65681/13, 13 January 2015, § 35.EU:C:2011:368, § 175), especially where lack of compensation is accompanied by the absence of judicial remedies (Könyv-Tár Kft. And others v. Hungary, app. no. 21623/13, 16 October 2018).

Thus, it is apparent that in cases of pandemic restrictions, unless they arise to the level of property deprivation, the states could get away with the failure to introduce any type of compensation, provided that some other factors in the potential cases brought before the ECHR or national courts do not tip the scales of the proportionality test towards finding the measures in their cumulative effect, including lack of compensation supplemented with other harm to litigants, to create a burden too excessive.

Additionally, some other criteria considered by the ECHR further provide a stronger position for the states adopting pandemic restrictions. For one, temporarily limited restrictions tackling an unexpected crisis are appreciated more favourably by the proportionality test than permanent interferences with property (European Court of Human Rights, Savickas and others v. Lithuania, app. nos. 66365/09, 12845/10, 29809/10, 29813/10, 30623/10, 28367/11, 15 October 2013, § 94).
Moreover, the restrictions adopted on a systematic basis and without singling out specific operators also make the burden placed on business not individual and excessive, and therefore contribute to finding the interference proportionate (Hentrich v. France, app. no. 13616/88, 22 September 1994, § 49). Finally, the temporal aspect of the proportionality assessment manifests itself even through the material time when the harmed business has invested in its property, and the risks it assumed at the time. When the person concerned knows, at the time of acquiring the property, about its restrictions and even the mere possibility of future restrictions, the said factor is considered as yet another reason contributing to finding the interference proportionate (Matczyński v. Poland, app. no. 32794/07, 15 December 2015, § 106).

In practice, this could even mean two categories of prospective applicants and two different kinds of outcomes if they appeared before the ECtHR. Applicants with property acquired before the pandemic and being hit with the restrictions could argue they could not foresee them when acquiring property, while the states could try and derail applications of those acquiring property from 2020 onward, arguing that they knew of the possibility of returning restrictions in an ongoing pandemic.

In sum, businesses harmed by restrictions imposed in the aftermath of a raging pandemic can argue that the lack of compensation violated their right to property, but they will almost certainly face an uphill battle in proving the measures were disproportionate. That being said, it is no surprise that the absence of the right to seek compensation from the viewpoint of international and European human rights standards is not reflected in the absence of such compensation schemes. In fact, such schemes, in various forms, are quite common, but also controversial from the viewpoint of compatibility with the rules of the EU on state aid, as explained below.

GENERAL REMARKS ON EU STATE AID AND CRISIS SOLUTIONS

In general, the TFEU forbids state aid which distorts or threatens to distort competition and affects trade between Member States (Art. 107(1), due to the broad understanding of the effect on trade by the European Commission (Cortese, 2020, pp. 12–14), the proving exemptions under Art. 107(2) TFEU (automatic exemptions) or Art. 107(3) TFEU (conditional exemption).

In the context of economic consequences of the COVID-19 pandemic, the majority of measures adopted by the Member States in order to support undertakings can seek a haven, particularly under Art. 107(2)(b) TFEU, i.e., “aid to make good the damage caused by (...) exceptional occurrences”, or under Art. 107(3)(b), i.e., “aid (...) to remedy a serious disturbance in the economy of a Member State”.

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Since state aid under Art. 107(2)(b) TFEU is exempted from prohibition automatically, it must be interpreted narrowly under constant case law of the Court of Justice of the European Union (CJ EU). Contrary to the exception under Art. 107(3) TFEU, in the cases of exemptions under Art. 107(2) TFEU, the Commission has no discretion power regarding the assessment of the state aid. Thus, Art. 107(2) TFEU “covers aid which is, in law, compatible with the common market, provided that it satisfies certain objective criteria. It follows that the Commission is bound, where those criteria are satisfied, to declare such aid compatible with the common market, and that it has no discretion in that regard” (Judgment of 25 June 2008, Olympiaki Aeroporia Ypiresies/Commission, T-268/06, EU:T:2008:222, § 51). This objective criterion is based on the strict limits of the purpose and scope of the aid, since “only economic disadvantages directly caused by natural disasters or by exceptional occurrences qualify for compensation as provided for in that provision” (Greece/Commission, C-278/00, § 82). The requirement of an apparent causal link covers both direct consequences of natural disasters or exceptional occurrences and the scale of the state aid itself: “It follows that there must be a direct link between the damage caused by the exceptional occurrence and the State aid and that as precise an assessment as possible must be made of the damage suffered by the producers concerned” (Atzeni and others, C-346/03 and C-529/03, § 79). If the state aid falls out of the exception under Art. 107(2) TFEU, it can still be covered by Art. 107(3) TFEU. However, in such a case, it is subject to scrutiny and discretion of the Commission regarding the assessment of the impact on trade between the Member States, impact on competition, and balance between negative consequences of the aid and its proportionality to achieve its aim. Regardless of the test’s quality, both types of aid must be reported to the Commission (EU, 2015).

Concerning the test under Art. 107(2)(b) TFEU, the CJ EU explained the notion of “natural disaster and exceptional occurrences” broadly, i.e., it did not refer to a natural disaster or another equivalent occurrence, but also to measures adopted by public authorities in order to mitigate the effects of such an event itself or prevent its immediate reappearance. For example, the terrorist attacks of September 11th, 2001 were classified as exceptional occurrences, as was the closure of the airspace (Olympiaki Aeroporia Ypiresies/Commission, T-268/06, § 49). The CJ EU did not consider Art. 107(2)(b) to be applicable in the following cases:

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- the aid measures were to compensate for the difficulties relating to a crisis in the market concerned and high-interest rates, but those phenomena are the expression of the market forces which must be faced by any business (Atzeni and others, C-346/03 and C-529/03, § 80);

- the aid that was not reserved for farmers who had lost all of their animals but was granted if the loss was at least 20% of the animals (Atzeni and others, C-346/03 and C-529/03, § 82);

- the state has provided no evidence of a link between the aid provided and the losses sustained (Atzeni and others, C-346/03 and C-529/03, § 82);

- the tax credit on the sale of rustic properties and the credit on loans and guarantees that were granted on the basis that the land was sold or the loans were requested, regardless of the damage suffered, cannot constitute compensation for the sharp increase in the price of fuel (Spain/Commission, C-73/03, §38);

- the aid was granted to milk producers’ cooperatives due to a market collapse following the Chernobyl nuclear disaster. Greece has not been able to establish a direct link between that aid and the Chernobyl nuclear disaster, nor has it been established that the amounts of aid granted to cooperatives actually corresponded to losses incurred to the members of the cooperatives as a result of the Chernobyl nuclear disaster, or that the measure was rather broad, covering all interventions of social character (Greece/Commission, C-278/00, §§ 77-89);

- measures designed to safeguard Venice, an important project of European interest, given that the reductions in social security contributions at issue are proportionate to the wage bill and are not designed to remedy the damage caused by natural catastrophes or other events of extraordinary nature, as the said provision requires, disregard the problem of ‘acqua alta’, which had to be regarded as a natural calamity (Comitato “Venezia vuole vivere”/Commission, C-71/09 P, C-73/09 P and C-76/09 P, § 175).

**EU STATE AID RULES VIS-À-VIS COVID-19**

During the COVID-19 pandemic, the EU adopted a multitude of measures aiming to mitigate the economic consequences of the pandemic and the economic consequences of measures of public health protection. These measures have been adopted either within the competence of the EU or within the competence of the Member States in line with the EU legislation.
The most prominent measure of the former group is the NextGenerationEU recovery plan with its Recovery and Resilience Facility (EU, 2020c) accompanied by the Multiannual Financial Framework 2021-2027 (EU, 2020b). These instruments, apart from unprecedented recovery measures for the EU economy, also introduced structural measures within the EU, including enforcing the European Green Deal and strengthening the rule of law (EU, 2020d).

The focus of this chapter will be, however, on “micro solutions”, i.e., not the recovery of the EU as a whole, but measures of the Member States as scrutinized by EU law. As explained before, the Member State that adopts some restrictive measures on business activities is to some extent legally obliged to introduce some measures relieving the burden imposed on businesses. Since such measures usually fulfill the criteria of state aid under Art. 107(1) TFEU, they must be reviewed for fulfilling exceptions from the prohibition under Art. 107(2) and (3) TFEU. It is apparent that the COVID-19 pandemic and state measures adopted in order to protect the health of people can be covered by the notion of “exceptional occurrences” under Art. 107(2) TFEU and compensation for these state measures can escape prohibition insofar as they cover a precise amount of damage causally linked with the restrictive measure at issue. Outside this scope, the Member States can revive their economies via aid under Art. 107(3) if they pass the assessment of the Commission. The Commission declared its preparedness to help the Member States with the swift introduction of state recovery and resilience instruments in order to cover damages causally linked to business disruption stemming from anti-COVID-19 actions as well as to spare businesses located in their territories from definitive and unrepairable closures (Ferri, 2021, p. 177). In order to facilitate the approval process (EU, 2015), the Commission did not follow the path of a possible temporary block exemption regulation, but a de facto block exemption communication – Temporary Framework for State Aid Measures (EU, 2020a). This framework does not replace existing “hard law” but facilitates its application, introduces procedural simplification, types and “templates” for state aid that can be speedily approved by the Commission (Bouchagiar, 2021).

In the context of the anti-pandemic measures, the Commission provides guidance regarding the distinction between aid under Art. 107(2)(b) TFEU and aid under Art. 107(3) ZFEU:

Under Art. 107(2)(b) TFEU, the Member States can cover damage directly caused by restrictive measures precluding the beneficiary, de jure or de facto, from operating its economic activity or a specific and severable part of its activity, i.e., measures which require, for example:

- the complete cessation of economic activity (e.g., the closure of bars, restaurants, or non-essential shops) or its cessation in certain areas (e.g., ---
restrictions on flights or other transport to or from certain points of origin or destination);
- the exclusion of certain highly material categories of clients (e.g., leisure travellers as far as it concerns hotels, school trips, and dedicated youth accommodation);

capping attendance for specific sectors or activities (e.g., entertainment, trade fairs, sports events) at levels demonstrably and materially below those that would be dictated in that specific setting, by generally applicable social distancing rules or rules on capacity in commercial spaces (e.g., because it does not appear sufficiently certain that protocols can be devised and successfully applied to ensure respect for the generally applicable measures in such settings) (EU, 2020a).

Under the Temporary Framework, other restrictive measures (for instance, general social distancing measures or general sanitary constraints, including measures merely translating such general requirements in terms specific to the characteristics of certain sectors or types of venues) would not seem to meet the requirements of Article 107(2)(b) TFEU. (EU, 2020a).

In order to estimate the financial scope of the state aid measures approved by the Commission in the period between 2020 and the first semester of 2021, published data on state aid approved within the Temporary Framework, as well as COVID-19-related aid approved due to Art. 107(2)(b) and (3)(b) and (c) TFEU (European Commission, 2021b). The list of the cases taken into account is in the annex of this paper. Indeed, these figures are not final since they do not cover non-notified state aid (i.e., state aid under the general block exemption regulation or de minimis state aid) and state aid that was not notified due to the failure of the Member States to fulfil their duties. Furthermore, not all data for all schemes were available at the time this paper was prepared (July 2021), so all analysis is based solely on publicly available information. It must also be added that the figures refer to the total amount of the scheme or aid at issue, not to the aid corresponding to a certain year. Nevertheless, even though these shortcomings exist, Table 1 shows an unprecedented boost in the scale of state aid in 2020 compared to previous years.
Table 1: Total amount of state aid granted in 2015-2019 and measures approved in relation to the COVID-19 pandemic in 2020-2021 (in millions of euros)

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<td>5 440.89</td>
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<td>367.69</td>
<td>403.2</td>
<td>399.35</td>
<td>6 406.70</td>
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The intensity of state aid has been unevenly distributed, and the EU Member States have employed different strategies. Table 1 shows the absolute amount of state aid in respective years, and Chart 1 compares it to the gross domestic product. Rather than relying solely on TFEU provisions, Member States almost always rely directly on the Temporary Framework menu of state aid schemes (Table 2, Chart 2). Employment of Art. 107(2)(b) TFEU is quite rare and some of the Member States did not even request approval for such aid (individual or scheme). Thus, the Member States focus their state aid measures more on helping undertakings to overcome economic breakdown and saving the economies for restarting and re-boosting, rather than compensating for the consequences of particular public health interferences in the operation of the businesses.

The diversity of approaches of the Member States is also apparent in benefiting from different types of state aid. EU-wide, state guarantees have the highest share of the total amount of aid, but in some states (Bulgaria, Denmark, Cyprus, Malta, Romania, Slovenia, and Slovakia) direct grants are dominant.

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6 Regarding Denmark, figures for this country are partially influenced by specific schemes for mink fur producers, which did not occur on such a scale in other EU countries.
Chart 1: Percentual share of COVID-19-related state aid to average gross domestic product at current prices calculated as the average value from 2019 and 2020

Table 2: Total amount of state aid within the measures approved in relation to the COVID-19 pandemic in 2020-2021 (in millions of euros) according to legal basis

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Source: (European Commission, 2021c, 2021b), authors
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*Sources: (European Commission, 2021b), authors*
Sources: (European Commission, 2021b), authors

Chart 2: Percentual share of the legal basis state aid within the measures approved in relation to the COVID-19 pandemic in 2020-2021
Private complaints both empower and constrain the Commission. On the one hand, private complaints help the Commission to detect non-notified state aid measures, and have been especially important in trade disputes over the grant of aid. On the other hand, dissatisfied with the Commission’s treatment of their complaints, private parties have repeatedly challenged state aid decisions before the CJEU or the General Court (‘GC’) (Cini, 2021, p. 32). Referring to different approaches of the Member States, in the series of COVID-19-related cases launched by Ryanair, the GC found no violation of the principle of equal treatment, as the measures adopted were expressly permitted under Art. 107(3)(b) or (c) of the TFEU, were suitable for achieving the desired outcome and did not go beyond what was necessary in order to attain it. The difference in treatment was therefore in accordance with EU law\(^7\) and the argument of economic nationalism was rejected (Ryanair/Commission, T-388/20, § 94).

Along with explicit state aid schemes, some contracting authorities of the Member States can be tempted to “help” undertakings by the design of public

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procurement. The COVID-19 pandemic undoubtedly required immediate purchases of medical equipment and other tools necessary for solving urgent medical and sanitary occurrences, and therefore it allows restricted and limited forms of tendering. Kováčiková and Blažo showed that almost all Member States when realising limited tendering, awarded contracts to domestic suppliers. This appeared especially in relation to COVID-19 procurement, and despite quite clear Commission’s Guidelines, their research proved that several EU countries employed limited tendering even in the second part of 2020 when it could have been expected that there would be a necessity for purchases of medical material and other goods necessary for the combat against the COVID-19 pandemic, and it could be expected that some cases of limited tendering would be challenged due to abuse of the “extreme urgency” clause (Kováčiková & Blažo, 2020, p. 212). Due to the substantial rise in the number of limited tenders and lack of competition in a substantial number of tenders (Kováčiková & Blažo, 2020, pp. 209–212), this situation can lead to tensions between public procurement and state aid that disrupt the presumption of the non-existence of state aid if public procurement is obeyed (Martinic & Kozina, 2016, p. 226; Sánchez-Graells, 2021, pp. 329–330). Indeed, compared to massive state aid approved by the Commission, these public-procurement-introduced state aids can be deemed small or insignificant, which does not diminish their unlawfulness.

CONCLUSIONS

Since measures adopted by the public authorities protect the community in certain areas as a whole, the ECtHR confirmed the legality of their intrusion into running businesses, even though they cause certain damage to entrepreneurship. However, the undertakings cannot bear the entire burden of those measures, and according to ECtHR case law, at least one type of solidarity should be implemented. In the context of the EU legal environment, such compensatory or solidarity schemes fall under EU state aid rules. It must be stressed that EU state aid rules are not “policymaking” rules of the EU, i.e., in general, they are not designed for the EU to shape its own policy. These rules represent one of the safeguard tools created to protect the internal market from segmentation owing to encroachments of the Member States into free-market economies, and the Commission can only guide, monitor, control, direct, and shape some scope of state aid (Cini, 2021), but never create policy and establish schemes itself. This is one of the reasons why, apart from the Recovery and Resilience Facility of the EU, the answer of the Member States of the EU to COVID-19 in terms of state aid is not uniform. State aid measures vary regarding the scope, amount, legal basis, or type of state aid among the EU Member States. Not all Member States used Art. 107(2)(b) TFEU to compensate for the harm
caused by restrictive public health measures. Indeed, the case law of the E CtHR does not require any specific form of relief from the burden caused by public health restrictions that have an impact on the operation of businesses, and thus state aid provided under any legal basis can meet the E CtHR’s requirements. The COVID-19 pandemic, as well as the resulting public health restrictions and recovery measures, are examples of the EU Member States’ dual obligations to the international community: public health restrictions adopted within the Member States’ competence (Kiová, 2020), as well as the subsequent materialization of measures safeguarding human rights protection derived from the ECHR and its protocols, are examples of the EU Member States’ dual obligations. Despite the different approaches of the Member States regarding COVID-19-related state aid measures, the GC rejected claims of the illegality of such a state of affairs due to alleged “economic nationalism”. Therefore, uniformity of state aid measures, even in cases caused by the same exceptional occurrence, cannot be expected, notwithstanding the uniform guidance and frameworks provided by the European Commission.

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DECISION-MAKING AUTHORITY OF THE WORLD HEALTH ORGANIZATION IN A PANDEMIC: INSTITUTIONALISM AND BEYOND¹

Žaklina Novičić²

Abstract: This paper discusses the World Health Organization’s decision-making power in a pandemic through the analysis of its formal rules and regulatory arrangements. It concludes that the authority of the Organization remained mainly within soft law, which means it is nonbinding and advisory in nature. But, since the author assumed the growing perception of the binding nature of WHO’s decisions in the general public, she proposes ways to investigate this phenomenon beyond the conventional institutional approach and through the naming and shaming processes and the so-called multistakeholder regime.

Keywords: WHO, decision-making, authority, legitimacy, recommendation, non-binding advice, soft law, international law, theory of international relations, institutionalism, intergovernmentalism, multilateralism, transnationalism, multistakeholderism, naming and shaming.

INTRODUCTION

The World Health Organization (WHO), a United Nations specialized agency founded in 1948, has established itself as the natural coordinator in the COVID-19 crisis of 2020 and consequently assumed the greatest responsibility for the international response to the pandemic. Perhaps the most serious attack on the

¹ The paper presents the findings of a study developed as part of the research project entitled “Serbia and challenges in international relations in 2021”, financed by the Ministry of Education, Science, and Technological Development of the Republic of Serbia, and conducted by the Institute of International Politics and Economics, Belgrade.

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Organization’s authority came from former US President Donald Trump in the form of an accusation of being unduly influenced by China alongside a threat to pull United States funding for the WHO. Had that happened, the WHO would have found itself in the unprecedented position of having one private actor, the Gates Foundation, as its top donor. The authority of the WHO has been referenced by many politicians worldwide in urging compliance with anti-epidemic measures or in the contestation of the Organization’s authority by protesting the very measures. Indeed, what is the role, mandate and responsibility of the WHO, and what it can and cannot do in a pandemic and vice versa? What are the sources and limits of its decision-making authority regarding international public health issues, and what is the nature of its decisions? This paper answers these questions through the institutionalist approach with a focus on explicit rules and the regulatory mechanism of the WHO. It also offers some concluding remarks for further research beyond institutionalism because the current COVID-19 crisis illuminates a changing landscape which warrants a new systemic theoretical approach and more quantitative research. But first of all, several basic concepts and the main analytical framework are outlined.

**Analytical Framework: Authority, Institutionalism and Beyond**

The term “institutionalism” is employed here in the style of international relations (IR) theory (Novičić, 2007). It is about explicit international rules and directly tangible law, and about concrete regulatory organizations and administrative arrangements, explored mainly in relation to the state (cf. Scholte, 2021a, pp. 179-183). “Authority” in international affairs is studied likewise in modern political theory as a “limited decision-making power” over an issue area that is “generally regarded as legitimate by participants” (cf. Quack, 2016, p. 363). “Legitimacy”, as a “core attribute of power”, refers to the “belief and perception that a governor has the right to rule and exercises it appropriately” (Scholte, 2020, pp. 22-23). For IR institutionalism, the root sources of legitimacy are in the “purpose, procedure, and performance of the global governance organizations”, in its “mandate, operations, and/or its results”; “governance” is understood here as a “process of establishing, enacting, evaluating, and changing regulatory arrangements in society” (Scholte, 2021a, pp. 183-184). Institutionalism obviously expresses a persistent bias toward intergovernmentalism (i.e., multilateralism).

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3 See the top 20 contributors to the WHO Programme budget for 2018-2019 (Figure 6) in: WHO, 2019, p. 13. The Gates Foundation accounts for some 10% of its budget, as the second-largest contributor, behind the US and close to the United Kingdom.
For the purpose of this paper, “decision-making authority” is taken in its minimalist conception as normative power to impose duties, with a focus placed on formal decision-making and binding rules that “stand alongside a panoply of more informal instruments, such as soft law, rankings, assessments, guidelines, and best practices” (Krisch, 2016, p. 25). But in the transnational sphere, it seemed that authority was not necessarily associated with governmental actors and could be obtained by civil society organizations, business corporations, researchers, technicians, and the public at large. So-called multistakeholderism recommends itself as a desirable, almost life-saving alternative through which the private and corporate world sees a “way to legitimize its role in global governance” (cf. Gleckman, 2018, p. 1). Indeed, increasingly new regulations in many areas of international cooperation are emerging through informal trans-governmental networks, private mechanisms, and multistakeholder arrangements. Some of them “deliberately side-line the state”, which must prompt increased attention to “legitimacy beyond the national sphere” (Scholte, 2021b, pp. 299, 303).

Hence, the multistakeholder approach, thereby, “fundamentally shifts the institutional locus of global governance in the process often challenging (either implicitly or explicitly) the multilateralist approach” (Scholte, 2020, p. 5). But global governance here might be less “directly visible” and “less obviously embodied”, “more hidden” and even “opaque” forms of rule, and that is the reason why the “contestation around the legitimacy of global governance institutions has persisted for several decades; think only of anti-globalist” movements (cf. Scholte, 2021a, p. 183). And indeed, as Scholte rightly asks: “Is it appropriate for private agents to make public policy in global affairs” (2021b, p. 299)? “Who answers for what happens (or does not happen) in a global multistakeholder regime? To whom is such an institution accountable, by what means, how effectively, and for what purpose?” (2020, p. 23).

As a right to rule, legitimacy implies “underlying confidence and trust” (Scholte, 2020, p. 25) and “could greatly boost governing power: the more a regulatory apparatus has legitimacy, the less it needs to invoke coercion, trickery, and secrecy to sustain itself” (Scholte, 2021b, p. 303). That is particularly important “when it might cause harm” (Scholte, 2020, p. 23), as in international public health issues. Thus, we need to examine the deeper structures that have powerful impacts on institutional arrangements. The understanding of this “broadening dynamics of legitimacy” (Scholte, 2021a, p. 184) could provide “important clues about future trends in global governance” (Scholte, 2021b, p. 300).

A useful analytical framework for further grasping the decision-making authority of the WHO, as a global governance institution in the previously described changing institutional landscape, can be found in the book “Who Governs the Globe” (Avant,
The authors distinguish five bases of authority for “global governors” (pp. 9–14): institutional (i.e., holding office in an organizational structure), delegated (from authoritative actors, e.g., states or sub-state agencies), expert (from specialized knowledge), principled (from service to a widely accepted set of principles, morals, or values), and capacity-based (from perceived competence and capability for solving problems, e.g., corporate). Their focus has been placed on those sources of changes that are “endogenous to governors and governing”, but for our purpose, the more appropriate are “exogenous shocks” that imply, for example, structural changes in international politics (such as the end of the Cold War, for example), or the emergence of new technologies (Avant, Finnemore, Sell, 2010, p. 18). Infectious diseases of high virulence, such as COVID-19, can certainly be included in this type of “a shock for the system of global health governance” (McInnes, 2015, p. 1300).

**THE GENERAL STRUCTURE AND DECISION-MAKING OF THE WHO**

Below, we suggest a conventional institutional analysis of the WHO regulatory arrangement. It answers the question of how legally binding the WHO decisions are. In the first part of the section, we consider the general structure and types of WHO decisions. In the second part, we analyse the legal regime of the International Health Regulations (2005) designed for the state of a pandemic.

**The structure of the WHO**

The Constitution of the WHO declared as its most general goal “the attainment by all peoples of the highest possible level of health” (Art. 1), the enjoyment of which is regarded as the “fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition” (Preamble).\(^4\) The structure of the Organization consists of three layers. At the global level, the main bodies are the World Health Assembly, the Executive Board, and the Secretariat, which is led by the Director-General (Art. 9 WHO-Constitution). The WHO has a decentralized regional structure as well as national offices worldwide.

\(^4\) The Constitution of the WHO was adopted by the International Health Conference held in New York from 19 June to 22 July 1946, signed on 22 July 1946 by the representatives of 61 states, and entered into force on 7 April 1948. In this paper, we use the edition including amendments up to 31 May 2019 (WHO, 2020, pp. 1-20). Hereinafter referred to as the “WHO-Constitution”.
The World Health Assembly (hereinafter the Assembly or WHA) is the primary decision-making body, meeting in plenary once a year (usually in May) and on special occasions as needed (Art. 13 WHO-Constitution). The Assembly consists of delegations from the member states, each of which has a maximum of three delegates with the highest technical qualifications in the field of health, preferably from national health administrations (Art. 10-11 WHO-Constitution). The WHA sets the general WHO policy guidelines, adopts the annual budget and oversees financial policy, and elects members of the Executive Board as well as the Director-General as the Head of the Secretariat. It also approves and instructs members’ activities and reports, forms committees with special responsibilities to assist it in its work, considers the recommendations of other UN bodies related to health and draws their attention to relevant health issues, conducts and promotes research related to health, etc. (Art. 18 WHO-Constitution).

Considering a fair geographical distribution, the WHA selects 34 member states, each of which has the right to appoint one member of the Executive Board as “a person technically qualified in the field of health” (Art. 24 WHO-Constitution). The members of the Executive Board are, therefore, persons elected in their individual capacity rather than representatives of particular governments. They are elected for three years (Art. 25 WHO-Constitution), and they meet twice a year (Art. 26 WHO-Constitution), usually in January and after the plenary assembly in May. The Executive Board, as the Assembly’s executive body, oversees the implementation of its policy and performs any other conferred functions and competencies (Art. 28-29 WHO Constitution). The Board advises the Assembly on questions referred to it or on its own initiative, submits proposals, prepares its agenda, as well as a general programme of work covering a specific period (Art. 28 WHO-Constitution). An important function of the Executive Board is that it can take immediate action and especially that, according to the Constitution of the WHO, it can authorize the Director-General “to take the necessary steps to combat epidemics” [Art. 28 (i)].

The Secretariat comprises the technical and administrative staff required by the WHO (Art. 30 WHO-Constitution) and is led by the Director-General as the chief technical and administrative officer appointed by the WHA for a five-year term on the nomination of the Executive Board and subject to its authority (Cf. Art. 31 WHO-Constitution). Ex officio, the Director-General serves as Secretary of the Assembly, the Executive Board, and all WHO commissions and conferences, with prerogatives to delegate these functions (Art. 32 WHO-Constitution). The Director-General prepares and submits financial statements and budget estimates of the WHO to the Executive Board, and he employs the staff of the Secretariat while keeping in mind the Secretariat’s efficiency, integrity, and internationally representative character, i.e., geographical basis (Art. 34-35 WHO-Constitution). According to the WHO Constitution,
the Director-General and Secretariat’s personnel are international officers, which means that they shall not seek or receive instructions from any government and any authority external to the WHO (Art. 37 WHO-Constitution). In principle, all WHO member states must adhere to this. A special agreement with the member states may regulate direct access to national health administrations by the Director-General’s (or his representative’s), and he may establish direct relationships with other international organizations dealing with similar issues (cf. Art. 33 WHO-Constitution).

Policies and activities of the WHO are therefore determined through the Assembly and implemented through the Secretariat as an administrative body with the Executive Board overseeing the process. Hence, the authority of the WHO was traditionally based on “delegated” and “expert” models (McInnes 2015, p. 1300). It originated from the member states, on the one hand, and specialized knowledge, on the other hand. This is a “delicate balance” that the WHO must achieve between “the wish for the WHO to act” and the member states’ claims on “their sovereign control over health issues within their territories” (Yi-Chong, Weller, 2020, p. 52).

The further administrative organization of the WHO is currently complemented by six regional offices, which are occasionally defined by the WHA and the Board. They are headed by regional directors who implement WHA decisions within defined regions (Art. 44, 45, 51 WHO-Constitution). This regional organization of the WHO is “somewhat unique” in the entire United Nations system “in its degree of independence and decision-making power”, which is also “a source of constant tension” (Lee, 2009, pp. 25, 31). In addition, there are WHO country offices and representatives in administrative and technical capacities. They are not determined by the WHO Constitution, but practically they have been established in nearly 145 countries (territories or areas) that are deemed to require that level of support. The liaison offices are, usually, housed in state ministries of health and are formed by the WHO competent regional offices to whom they report. They are criticized as “a way for regional directors to distribute political favours” and their contribution to the WHO mission is contested (Lee, 2009, p. 34).

**Decision-Making in the WHO**

Each member state of the WHO has one vote in the WHA (Art. 59 WHO-Constitution), meaning all states are formally equal in the decision-making. Decisions on important questions are made by a two-thirds majority of the WHA.

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5 See WHO offices in countries, territories, and areas (valid from 23 May 2016) at: https://www.who.int/country-cooperation/where-who-works/who-offices-in-countries.pdf
members present and voting. These questions include the adoption of conventions or agreements and the approval of agreements with other organizations (the UN, etc.). Decisions on other questions, including the determination of additional categories of questions to be decided by a two-thirds majority, are adopted by a simple majority. Voting on analogous matters in the Executive Board and in committees of the WHO is conducted in the same way (cf. Art. 60).

The WHO’s conventions or agreements enter into force in the member state only when accepted in accordance with its constitutional procedure within eighteen months after the adoption by the WHA. Each member notifies the Director-General of the action taken, and if it does not accept such a convention or agreement within the time limit, it furnishes a statement of the reasons for non-acceptance (Art. 19-20 WHO-Constitution).

The WHO also has the authority to adopt regulations (Art. 21 WHO-Constitution) designed to prevent the international spread of disease (sanitary and quarantine requirements), nomenclatures with respect to causes of death and public health practices, standards with respect to diagnostic procedures, etc. These regulations come into force for all members after due notice has been given of their adoption by the WHA, except for non-compliant members notifying the Director-General of rejection or reservations within the period stated in the notice (Art. 22 WHO-Constitution). In addition, the WHA has the authority to make recommendations to the members with respect to any matter within the competence of the WHO (Art. 23 WHO-Constitution).

The prescribed decision-making regime is quite interesting and while “some means at hand is rather common or even unexciting, WHO-law provides one very unique feature”: the Organization has the authority to issue legally binding regulations, but “[t]he kicker is the entry-into-force” (Frau, 2016). The way for a state to opt-out of such a binding agreement is to notify the Director-General of its rejection or reservation.

A delicate balance is made here between transnational decision-making (i.e., binding decisions adopted by majority vote) and traditional intergovernmentalism expressed in the right to reject. Ultimately, formal decision-making in the WHO remains within the principle of delegated responsibilities. The WHO has the authority to advise, warn, and provide technical guidance and assistance, but it does not have the authority to compel any government or state to do anything.

**AUTHORITY OF THE WHO IN A PANDEMIC**

The International Health Regulations were adopted on the basis of the WHO Constitution (Art. 21), as a “key global instrument for protection against the
international spread of disease” (IHR, 2005). The substantive revision took place in 2005 following the political events surrounding the first global public health emergency of the 21st century – SARS (2002-2003). The declared purpose and scope of the 2005 Regulations are “to prevent, protect against, control and provide a public health response to the international spread of disease in ways that are commensurate with and restricted to public health risks, and which avoid unnecessary interference with international traffic and trade” (Art. 2 IHR). According to the IHR, a pandemic is defined as a “public health emergency of international concern” (hereinafter: PHEIC), that is “an extraordinary event” which constitutes “a public health risk to other States through the international spread of disease”, and “potentially requires a coordinated international response” (Art. 1 IHR). The WHO Director-General has the authority to determine, “on the basis of the information received, in particular from the State Party within whose territory an event is occurring”, whether an event constitutes a PHEIC (Art. 12 IHR) and to issue “temporary recommendations” (Art. 15 IHR).

In short, the said provision of the IHR “expanded the WHO’s power” (Yi-Chong, Weller, 2020, p. 52) based on “scientific evidence and a contextual risk assessment” (Burci, 2018, p. 683), but the question is whether the IHR did create new binding rules for states. A novelty brought by the IHR regime is the duty of the WHO member states to notify the WHO about any public health event within their territory that might constitute a PHEIC. In addition, the IHR prescribes a detailed procedure for communicating the public response, which could involve, alongside states, expert bodies, as well as the general (national and global) public (such as non-governmental and other intergovernmental organizations).

But it turns out that the WHO’s authority to obtain information independently or compel states to provide information was seriously limited (cf. Berman, 2020). Besides, there is a type of dispute settlement regime concerning the interpretation or application of the IHR, with the World Health Assembly as the main oversight mechanism (Article 54 IHR) to which disputes between the WHO and a member

6 The IHR were first adopted in 1969 (WHO Official Records, No. 176, resolution WHA22.46 and Annex I). The document was preceded by the International Sanitary Regulations adopted by the Fourth World Health Assembly in 1951. Initially, it covered six “quarantinable diseases” and they were subsequently amended (in 1973 and 1981) primarily to reduce the number of covered diseases from six to three (yellow fever, plague and cholera) and to mark the global eradication of smallpox.

7 The IHR of 2005 were adopted by the Fifty-eighth World Health Assembly (23 May 2005) and entered into force on 15 June 2007. In this paper we use the WHO 2016 edition; hereinafter referred to as the “IHR, 2005” or just “IHR".
state may be submitted (Article 56.5 IHR). But this mechanism is effectively obsolete during an emergency, and it has never been invoked.

**Disease Surveillance and Risk Assessment**

The new commitments for the WHO states parties are related to surveillance and risk assessment, i.e., the duty to develop “the capacity to detect, assess, notify and report” health risks on their territory, which may constitute a PHEIC. They are required to notify the WHO Director-General within 24 hours of the health risks and any consequential health measures (e.g., case definitions, laboratory results, source and type of risk, number of cases and deaths, etc.). They should consult the WHO, which might also collect public health reports from other sources, eventually confidential in nature, but it would always consult and obtain verification from the state concerned (Art. 5-8 IHR).

Besides, other states shall, as far as practicable, inform the WHO within 24 hours of receipt of evidence of a public health risk identified outside their territory that may cause international disease spread (Art. 9 IHR). Finally, there is a possibility for the WHO to obtain information from unofficial and, ultimately, non-governmental sources (“other standard-setting organizations”; Art. 10 IHR), but such sources must also be verified by the state concerned within 24 hours.

The received public health information the WHO might communicate, in confidence, to other states parties and, as appropriate, to relevant intergovernmental organizations. Such information shall not be made available to the general public as long as there is no evidence the event is determined to constitute a PHEIC; and until the information has been confirmed in accordance with established epidemiological principles, or the very nature of international traffic requires the immediate application of such measures. But in this case also, the WHO must consult the state party in whose territory the event is occurring (Art. 11 IHR).

The above procedures evidently indicate the WHO is at the centre of gathering information pertaining to events that may constitute a PHEIC. But the Organization does not have the authority to carry out inspections within the states and cannot compel them to notify of emergencies or to provide information. In other words, the WHO has no formal enforcement mechanism for the described disease surveillance and risk assessment regime.

It seems the WHO applied this approach in China at the outbreak of the COVID-19 crisis. The Organization has been accused, mostly by the US, but also by other countries, of relying on information provided by China or having been unduly influenced by that country. But judging by the provisions of the global regulations (IHR), the WHO had to use a “soft approach” to cooperate with the country in whose
territory the event is occurring. In addition, it has no formal enforcement mechanism even if China were to be found to have violated the IHR (cf. Berman, 2020).

The authority of the WHO to obtain information independently from the state on whose territory the threat has emerged or compel the state to provide information is seriously limited. In the described process of information sharing, there is some possibility of “sidelining the states parties in the case of non-collaboration” (Villarreal, 2020), specifically through “the public naming, shaming, or commending of governments depending on their performance against WHO standards”, but that is, in effect, the “strongest tool in the WHO’s emergency box” (Kreuder-Sonnen, 2020). The following section of the paper deals with the nature of the WHO authority and its decisions once a PHEIC is declared.

**Declaration of a PHEIC and Recommendations**

Since the IHR entered into force in 2007, the WHO Director-General has had the effective and powerful authority to assess and declare whether an event of public health interest constitutes a PHEIC. In doing so, only two other “players” must be consulted by the Director-General: the member state in whose territory the outbreak occurred, and the Emergency Committee established for this occasion (Art. 12 IHR). The Committee is composed of experts appointed by the Secretary-General himself (48.1 IHR), selected from the existing IHR Expert Roster (Art. 47 IHR), with at least one member of the Committee being an expert appointed by the state in whose territory the outbreak occurred. The Expert Roster is composed of experts in all relevant fields of expertise appointed by the Director-General himself and in a number determined by him as well (Art. 54.4). One member of the Emergency Committee should be appointed at the request of each state party and, as appropriate, by relevant intergovernmental and regional organizations (Art. 47 IHR).

The state where the threat has emerged remains significantly involved in the PHEIC decision-making process. The Director-General shall consult with the state regarding the “preliminary determination”, but if they do not come to a consensus within 48 hours, he should make the “final determination” after obtaining the opinion of the Emergency Committee (Art. 12.3.; Art. 49.5 IHR). Obviously, the concerned state has room to try to influence the decision-making process, which led some commentators to conclude that “the IHR, by design, institutionalises

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8 It was used on five other occasions before the modern coronavirus crisis, with some of the diseases still active today as PHEIC. The following epidemics were declared PHEIC: swine flu – 2009; poliovirus – 2014; Ebola – 2014; Zika virus – 2016, Ebola – 2019, coronavirus – 2020.
conflicts of interest into the process” (Berman, 2020). But it is fair to stress that the Director-General has the upper hand in the case of disagreement, relying solely on the opinion of his expert team.

The Director-General also has the authority to issue recommendations following the declaration of a PHEIC considering the views of an Emergency Committee. “Temporary recommendations” apply on “a time-limited, risk-specific basis” (Art. 1 IHR) and consist of proposed health measures for the states regarding “persons, baggage, cargo, containers, conveyances, goods and/or postal parcels to prevent or reduce the international spread of disease and avoid unnecessary interference with international traffic” (Art. 15.2 IHR). For routine or periodic application, the WHO may also issue “standing recommendations” (Art. 16 IHR). The WHO can issue several rather technical and regulatory measures as well, including, for example, vaccination, quarantine, isolation, contact tracing, etc. (Art. 18 IHR). But not all the categories of decisions are non-binding advice (Art. 1 IHR), i.e., soft-law measures.

In addition, states could adopt “additional health measures” that have a purely national dimension. Such measures are not prohibited if they achieve the same or greater level of health protection, are not more restrictive on international traffic, and are not more invasive or intrusive to persons (Art. 43 IHR). However, if the measures “significantly interfere with international traffic”, the state shall provide the WHO with “the public health rationale and relevant scientific information” within 48 hours of implementation. In case of disagreement as to the measures, the IHR proposes information sharing, consultations, and the reaching of a “mutually acceptable solution”. The “dispute settlement” mechanism is thereby exhausted.

**CONCLUDING REMARKS**

The focused analysis of the explicit rules and administrative mechanisms of the WHO indicates some institutional features to be summarized in the conclusion. In addition, it gives a hint to the further theorizing, analysis, and investigation of the changing environment of the Organization that might go beyond institutionalism.

**Summary of the Institutionalist Analysis**

The WHO’s institutional arrangement revealed several interesting features that, however, remain of soft-law nature. The general authority of the WHO has traditionally originated from the member states, but, on the other hand, it arises in one part from specialized knowledge. That has created, in effect, some type of “expert and delegated model” of authority (McInnes, 2015, p. 1302), that is a “delicate balance” between the two models that must be achieved in practice. The
general decision-making regime of the WHO demonstrates features that are “somewhat unique” in the United Nations system. Namely, the WHO may adopt legally binding decisions by a qualified or simple majority, but the procedure of entry into force gives the member states a channel for opting out by notifying the WHO of their rejections or reservations. This is not the case in transnational organizations such as the EU, in an increasing number of issue areas where there are no possibilities for opting out of a decision not adopted unanimously.⁹

There is no formal enforcement mechanism for compelling states to provide information prior to or during a pandemic. The WHO has limited authority to obtain surveillance and risk assessment information independently from the state on whose territory the threat has emerged. The state concerned remains involved in the decision-making on the PHEIC determination as well. But, it must be clearly stressed that in the declaration of a PHEIC, the Director-General has the upper hand in relying on the opinion of the expert body. This sole competence is powerful enough, given the social and economic implications of such a declaration as has been witnessed in the COVID-19 crisis. Concerning WHO recommendations (i.e., the Director-General) during a pandemic, they are by nature advisory and exclusively non-binding.

The strongest emergency tool of the WHO is the possibility of public “naming and shaming” through information-sharing with other states, non-governmental and intergovernmental organizations, and the general public. Even when states are reluctant to share information about outbreaks in their countries, the Director-General might “become active” (von Bogdandy, Villarreal, 2020) via the mechanism of public pressure. This “raising alertness about the risk” is “an instance of executive decision-making” (Vierck, Villarreal, Weilert, 2020), but it should be emphasized that “[t]his is in no way a legal enforcement mechanism; it may work for policy reasons only” (Frau, 2016).

**Beyond Institutionalism**

The aforementioned mechanism of public pressure may lead to a growing perception that the WHO regulations are of binding nature, even if there is a certain deficit of mandatory rules. Finally, public accusations displayed in other issues might “play a constitutive role, constructing new norms, including customary international law” (Finnemore, Hollis, 2020). This outlines possible directions of future research, either towards studying the “naming and shaming” process in the context of the WHO, or towards the involvement of other actors in research, which appropriately

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⁹ For the elaboration of these issues in the EU setting, see: Novičić, 2019.
encompasses a multistakeholder concept. Strictly institutional and legal analyses generally “leave this black box unopened” followed by “notable gaps in knowledge” (Scholte, 2020, pp. 16, 26). That is true in international public health issues as well.

“Naming and Shaming” in International Public Health Issues

To say that the current COVID-19 crisis has been accompanied by a “shaming pandemic” (Max, 2020) might feel exaggerated, but “shaming” has been a part of each similar outbreak in the past, from the Spanish Flu of 1918 to AIDS and SARS at the start of the new millennium. Yet nothing prepared the world for the “ubiquity” of shaming in the digital age, at a time when ordinary social life has nearly been eliminated. “Digital shaming” seems to become “particularly virulent” when there is no agreement on what constitutes correct behaviour. Many COVID-19 statutes are “vague”, and the epidemiology behind the disease is “in flux” (Max, 2020). Obviously, the Internet and new social media are empowering an ever-broader pool of state and non-state actors with the means to expose non-compliance and publicly condemn targeted actors. It is assumed that “naming and shaming” are likely to increase in international politics in the future (Friman, 2015b, p. 217).

Given the said “ubiquity” and “constitutive role” of these processes, it seems that carefully theorized explanations and more quantitative research are needed. Some instruction may be found in other areas of international relations where “mobilization of shame” has been extensively examined (Friman, 2015), such as human rights (Risse, Ropp, Sikkink, 2013). “Using public exposure of noncompliance” is a preferred constructivist tactic of “shaming” in which “argumentative discourse” could “mobilize domestic and international support, alter the targeted government’s behaviour, pressure its supporters, and serve as a deterrent to the actions of others” (Friman, 2015a, p. 2). It is not unfamiliar in earlier international relations debates either; for example, Hans Morgenthau assumed that public opinion was mobilized rather than spontaneous (Morgenthau, 1948; in Friman, 2015, p. 12), etc.

Researchers in other areas identified the problem in multiple potential causal dynamics that are at play here (Friman, 2015, p. 18) and that “specific causal mechanism(s)” behind successful and failed naming and shaming efforts have remained “elusive” (Busby, Greenhill, 2015, p. 105). By all means, the potential for further research of “naming and shaming” dynamics exists, and it is especially important in issues with a potential for causing harm, such as international public health issues. In the end, just to mention a “politicization paradox” identified here, i.e., the “practices meant to punish” certain behaviours can also “operate in such a way as to encourage, reward, and perpetuate them” (Terman, 2021).
How to encompass “various state and non-state constituencies who have a stake in (i.e., affect and/or are affected by) the problem at hand” (Scholte, 2020, p. 3), which in this paper is the decision-making authority of the WHO in pandemics. McInnes tried that regarding the events surrounding the Ebola Crisis (2014) and referring to the aforementioned five sources of “global governors” authority. He identified shifts in sources of WHO authority from the traditional “expert and delegated model” to a more technocratic, “capacity-based model”, but concluded that ultimately, the traditional model has not been replaced (p. 1302). One of his indicators was the WHO’s budget and financing (pp. 1314-15), which is still a pressing question for the Organization. According to the data, in recent years, the WHO has received about three-quarters of its support from voluntary contributions (see Note 1). Such a budgetary structure reveals the need for the WHO to be “responsive to the policies, agendas, and preferences of various donors” (Lee, 2009, p. 41). The WHO bodies seem willing to acknowledge that relying heavily on voluntary and private donations poses a systemic challenge, so earlier this year the Executive Board established a working group to make recommendations regarding “sustainable financing” in early 2022 (WHO, 2021).

An insight into the history of the WHO reveals that it has been internally burdened by the longstanding competition between two perspectives on its policy and agenda (Cueto, Brown, Fee, 2019, p. 2): one is a socio-medical perspective (horizontal and multi-sectoral) and the other is a technocratic, biomedical perspective (vertical and mono-focal). The first perspective can be recognized in the WHO constitutive document (Preamble), suggesting that diseases are conditioned both socially and economically, and their restraint requires a broad social response. The second perspective assumes that “epidemic diseases are basically biomedical events that need technological interventions alone to tame them”.

These remarks urge deeper examination of the impact of the funding mechanism and the political economy on WHO decision-making. Here, the multistakeholder approach imposes itself with a claim to assemble business, state and civil society actors under one research umbrella. For example, Scholte’s research has suggested a concept of “complex hegemony” and hints that “global multistakeholder initiatives have emerged due to a combination of sponsorship by leading states, enactment by a transnational elite network, capitalist drives for global accumulation, and certain dominant discourses” (Scholte, 2020, p. 19). It seems that power hierarchies influence the supposed “horizontality” of multistakeholder settings, but obviously, well-grounded synthesizing of academic analyses is lacking.
More research, both theoretical and empirical, is needed on the WHO in multistakeholder settings. And just as Scholte concluded in tracing a “transformed global governance theory” in a general sense (Scholte, 2021a, p. 187), this does not mean advocating a “ politicization” of analysis in which “ passion trumps logic and evidence”, but rather urging “ carefully and explicit attention to the motivations and implications” and anticipating the “ potential political use (and misuse)” of research findings. It seems this is even more pressing in issues with the potential to cause so much damage and polarization for societies and international relations in general as well, such as public health.

REFERENCES


THE WORLD TRADE ORGANIZATION AND COVID-19-RELATED TRADE MEASURES

Sanja Jelisavac Trošić

Abstract: In a short period of time, COVID-19 has become much bigger than just a health problem. Among other things, it has disrupted the global economy and world trade, with the biggest negative impact of the pandemic outbreak in the international services sector. During the COVID-19 crisis, in order to preserve the national economy, states started introducing trade-related measures. These measures had the potential to disrupt trade flows, supply chains, and eventually even the whole system of world trade. The paper examines the compliance of trade restriction measures taken in response to COVID-19 with the WTO rules and what the policy of the WTO was during this crisis. Since the elimination of trade restrictions is one of the WTO basic principles, this introduction of a number of restrictions had to meet certain preconditions prescribed by the WTO agreements, such as transparency, temporality, and not being discriminatory towards different countries, etc. Since the COVID-19 crisis is still ongoing, we concluded that most countries have introduced some form of trade policy measures, most of them in the form of technical barriers to trade and sanitary and phytosanitary measures, and that the introduced measures will not all be removed as long as there is an existing threat and insecurity.

Keywords: WTO, COVID-19, international trade, restrictions, notifications, trade measures.

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INTRODUCTION

In the beginning, the COVID-19 epidemic was predominantly seen as a public health problem. However, it was not long before, due to the introduction of state measures and the impact of disease on more and more countries around the world, COVID-19 became much bigger than just a health problem. Since the COVID-19 epidemic has been spreading at a high pace all parts of the world, it has been declared a pandemic by the World Health Organization (WHO). The existing interconnectedness among countries facilitated the spread of disease and the spread of negative effects on many areas of the economy. At first, the COVID-19 outbreak has caused a deep disruption to world trade. The disruption was felt on both the supply and demand sides of the global economy. Countries have begun to introduce COVID-19-related trade policy measures, such as temporary export bans for certain medical products. States have also been concerned with the security of their food supplies, so they have started to introduce export restrictions on agricultural products. These kinds of behaviour have generated concerns of the potential food shortages in the global market. In a short period of time, the situation has become so serious that the heads of the UN Food and Agriculture Organization (FAO), the WHO, and the World Trade Organization (WTO) issued a joint statement in which they called on governments to minimize the impact of COVID-19 related border restrictions on global trade and food security (WHO, 2020). Only a little over a decade after the major disruption of trade and investment following the Global Financial Crisis, the consequences of the COVID-19 pandemic have resulted in a large number of changes, and maybe even a deep and lasting transformation of international trade and the process of globalization. A possible paradigm shift in international trade relations and governance already has a strong impact on the World Trade Organization and opens the possibility of the WTO’s strengthening or even deeper marginalization of its position in the world.

METHODOLOGY

After the short introduction, the chapter titled The World Trade Organization and COVID-19-related trade measures examines the trade restriction measures taken by the states when it became clear that COVID-19 was spreading and a crisis was arising, as well as the compliance of those measures with the WTO rules. It also views which WTO regulations, under certain circumstances, allow states to impose temporary restrictive measures, and what was the policy of the WTO during this crisis. Finally, an overview of the changes in trade due to the crisis was given, as well as an overview of the future challenges the WTO will face.
The methodology of this study is based on a review of the existing economic literature, as well as the official WTO announcements, on trade measures introduced during the coronavirus pandemic and the regulations governing them. The aim is to analyse the restrictive measures, their compliance with the WTO regulations, for which products the restrictive measures were introduced, the temporary nature of trade measures and whether they were really necessary to protect public health and public welfare.

Desk research has been applied in the analysis. Data from the reference organizations, as well as reference publications, were used.

**TRADE POLICY MEASURES TAKEN IN RESPONSE TO COVID-19**

One of the fundamental principles that guided negotiators in the former General Agreement on Tariffs and Trade (GATT) and now the World Trade Organization (WTO) was the elimination of trade barriers. Article XI of the GATT generally prohibits quantitative restrictions on the importation or the exportation of any product (Bjelić, Jelisavac Trošić, Popović Petrović, 2010, p. 51). However, when there is greater trade instability or other external shocks, countries begin to introduce measures to protect their economies. Precisely because of such situations, the WTO, in addition to the general prohibition of restrictions, provides an opportunity for states to temporarily introduce certain measures. Export prohibitions and restrictions are generally prohibited under the WTO. Article XI:1 of the GATT 1994 prohibits members from introducing or maintaining any form of export prohibition or restriction other than duties, taxes, or other charges. However, certain measures are carved out of the scope of this general prohibition, including Article XI:2(a) of the GATT 1994, which allows “export prohibitions or restrictions temporarily applied to prevent or relieve critical shortages of foodstuffs or other products essential to the exporting contracting party” (WTO, 2020a).

An important precondition for using the possibility of introducing temporary restrictions is to inform the WTO about their introduction, as well as that they must not be discriminatory towards different countries. “While Article XI of the GATT 1994 broadly prohibits export bans and restrictions, it allows members to apply them temporarily to prevent or relieve critical shortages of foodstuffs or other essential products. If members move to restrict exports of foodstuffs temporarily, the Agreement on Agriculture requires them to give due consideration to the food security needs of others. The WTO rules also contain more general exceptions, which could be used to justify restrictions provided that they do not constitute a means of arbitrary or unjustifiable discrimination between countries or a disguised restriction on international trade” (WTO, 2020b).
The liberalized and open trading system of the world suffered a severe shock during the COVID-19 crisis. In response to the spread of the infection, most countries have introduced some form of trade policy measures. Trade policy measures were adopted, revoked, or amended on a daily basis, especially at the start of the COVID-19 crisis. Although the majority of trade measures introduced after the beginning of the spread of COVID-19 seemed to be justifiable, there were also many measures whose coverage and nature were arguable. The question is whether such measures are legal under the WTO rules. In normal times, times without the crisis, those kinds of measures are not allowed, and the WTO prohibits quantitative export restrictions. But in times of crisis, if measures are temporary in nature and aimed at preventing or relieving critical shortages of essential products, they are allowed under the WTO rules on the ground of health. One of the most important conditions is that such measures must be transparent and known to all actors in trade (WTO, 2020c). Over 390 community organizations from 150 countries have called on the WTO to ensure that the intellectual property rules in the WTO agreements do not prevent access to medicines and medical supplies, especially for low-income countries (Civil Society Organizations, 2020, p. 110).

However, there is no way of knowing whether or not any of these measures will be subject to a WTO panel. In general, formal complaints are only launched when a trade measure undermines the core interests of a trading partner, or more precisely, of those companies operating within its jurisdiction. Even in the absence of a formal dispute, the WTO emerges from the pandemic further fragilized and with its capacity to enforce global rules weakened. It will be important to remain vigilant in monitoring and analyzing governments’ trade policy responses to future challenges and, where necessary, highlight their inconsistencies (Curran, Eckhardt, Lee, 2021).

Quantitative restrictions are generally prohibited by the WTO, under Article XI of the General Agreement on Tariffs and Trade (GATT) — “No prohibitions or restrictions other than duties, taxes or other charges, whether made effective through quotas, import or export licenses or other measures, shall be instituted or maintained by any contracting party on the importation of any product of the territory of any other contracting party or on the exportation or sale for export of any product destined for the territory of any other contracting party.” (GATT, 2021, p. 314). However, as we mentioned, there are exceptions to that general rule. Exceptions are allowed under Articles XI:2(a), XX(b) and XXI(b) of the GATT. The exception under Article XI:2(a) states that the mentioned provisions shall not extend to the “export prohibitions or restrictions temporarily applied to prevent or relieve critical shortages of foodstuffs or other products essential to the exporting contracting party” (ibidem). The Appellate Body interprets such exceptions as part of...
of its role as a legal body within the WTO system. The WTO Appellate Body’s interpretation of Article XI:2 of the GATT, considering the current COVID-19 crisis, appears to provide the WTO member countries with the authority to restrict exports of food and medical supplies as long as necessary in order to prevent critical shortages. Furthermore, Article XX(b) of the GATT allows measures “necessary to protect human, animal or plant life or health”, and Article XXI(b)(iii) on “Security exceptions” states that nothing in the GATT should be construed to prevent any WTO Member “from taking any action which it considers necessary for the protection of its essential security interests” in times of “emergency in international relations” (Pauwelyn, 2020, p. 407).

International trade is crucial in ensuring access to medicines and other medical products. Governments are enacting temporary trade measures that aim to restrict exports of vital medical supplies and to liberalize imports of vital medical supplies, as well as other essential products. (International Trade Centre, 2021). As it seems, exceptions are allowed in specific circumstances, but emergencies in international relations usually mean armed conflicts and not health emergencies. But this pandemic has changed this.

The problem with implementing trade-related measures as a response to COVID-19 is that they increase in numbers very fast and can disrupt trade flows, supply chains, and eventually even the whole system of world trade. Although with the emergence and spread of the pandemic came a great desire to react in order to protect the individual state, what may deter a country from imposing export restrictions is the desire not to break its own supply chains, or the fear that other countries will then retaliate with similar measures (ECIPE, 2020, p. 108). There is also the possibility of food or medicine shortages, which would result in rising prices. If these issues are not resolved quickly, it may jeopardize food and medicine security in some countries.

The rapid growth and proliferation of trade measures, which are not compatible with the WTO system, in response to the pandemic and with the desire to protect its own market, undoubtedly obstructs the transparency, immutability and predictability of the WTO trade rules relied on by all companies which operate in the international market. It is a particular challenge to maintain the WTO rules, which were established for decades, in times of crisis and with the great shock and unpredictability that this pandemic has brought to the world. Even if targeted actions to protect “strategic” industries and supplies have relatively minor impacts on, for instance, average tariffs, they would still have major impacts on the targeted sectors. What is called into question by all these measures is trade openness and the implications for the robustness of the international trading system.
It is interesting to point out that some trade restrictions have even been reduced between the US and China, at least temporarily. The two rivals had been stuck in a trade war for at least two years before the COVID-19 crisis. In particular, the US has decided to exclude a range of medical protective gear and equipment from additional duties imposed previously under Section 301, and new products may be added to that list in the future. Similarly, China has granted temporary exemptions from its counter-duties for certain US goods (e.g., reagents or disinfectants) (Layton, Zhang, Li, 2020, p. 340). That is one of the examples that shows how the crisis, i.e., the common danger, forces the state to cooperate in strategic and security-sensitive areas for the benefit of all parties.

THE WTO POLICY WITH REGARD TO TRADE MEASURES IMPOSED BY MEMBER COUNTRIES

In addition to lowering trade barriers, the WTO secures and binds the foreign trade policies of its members, locking them at the existing level. Putting restrictions on the trade policies of the states is in the very essence of the multilateral trade system (Jelisavac Trošić, 2015, p. 139). The WTO agreements require member states to make their trade policy transparent. The WTO monitors the foreign trade policies of member states, which also means that all WTO members must undergo a periodic review of their trade policies and practices.

In general, the WTO rules provide broad space for members to adopt trade measures deemed necessary to protect public health and public welfare. Some of the most used are quantitative restrictions on imports and exports, import and export bans, and non-automatic import licensing (Jelisavac Trošić, Todić, Stamenović, 2018, p. 42). Members should notify the WTO of new restrictive trade measures, and the WTO should process and publish these in a timely manner. It is very important to point out that the measures should be applied in a manner that they do not discriminate between the WTO members and that the measures should not constitute a disguised restriction on international trade.

The WTO members had submitted a total of 406 notifications related to COVID-19 as of 18 August 2021 (WTO, 2021d). Received notifications grouped by type are: technical barriers to trade 172, sanitary and phytosanitary measures 107, market access 87, agriculture 31, and the rest is less than 10 (see graph 1). Technical barriers to trade and sanitary and phytosanitary measures make up more than two-thirds of the total measures.
In order to ensure that there are sufficient supplies to domestic markets, primarily food and medical equipment, states have introduced urgent types of measures, first of all by introducing new trade restrictions (to decrease exports) or by reducing existing trade restrictions (to increase imports). During the second half of 2020, the WTO members largely refrained from protectionist policies that would stifle trade, repealing trade restriction measures imposed at the start of the crisis or introducing new trade liberalization measures. This also helped to limit the drop in global demand (WTO, 2021e).

Regarding the WTO member states, the largest number of notifications, by far, comes from Brazil, followed by the European Union and the United States (see graph 2).
The WTO Secretariat is compiling the list of trade-related measures taken in the context of the COVID-19 crisis, which is updated daily for the purpose of transparency and timely notification of companies engaged in international trade.

In addition to import measures, the introduction of which countries notify the WTO, countries have also adopted unilateral border controls by refusing entry to specific imports. For instance, the total number of import refusals of the US Food and Drug Administration (FDA) against agricultural products increased by 52% in

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January and 27% in the first quarter of 2020 over the previous year. This was the highest year-over-year growth rate since 2002, and the most affected country was China (FDA, 2020). It can be noticed that in the US and the EU during the previous epidemics such as Ebola, H1N1 and SARS, national food safety authorities have also increased refusals and alert incidents involving imports from affected regions (EC 2020).

There is a problem since the epidemic alerts and severity assessments provided by the WHO are not directly linked to the use of trade measures within the WTO’s framework. Consideration of trade measures, implemented because of public health concerns, within the WTO is based on the Agreement on the Application of Sanitary and Phytosanitary Measures (SPS) and the Agreement on Technical Barriers to Trade (TBT). A Declaration of a Public Health Emergency of International Concern by the WHO does not constitute a specific condition for its consideration. The result is usually excessive trade restrictions during epidemics (Chen, Mao, 2020, p. 736).

In order to help countries keep up-to-date with all the changes in the COVID-19-related measures, the WTO has several tools in place. On the WTO webpage, countries can find a full list of the measures being imposed and notified to the WTO, and also a non-exhaustive list of COVID-19 trade and trade-related measures compiled by the WTO Secretariat from official sources. The WTO also monitors new SPS/TBT notifications and offers the service of the ePing SPS & TBT Notification Alert System where more than 63,000 SPS and TBT notifications are included in this system (SPS&TBT, 2021). The system ePing is a collaborative effort between the WTO, the United Nations Department for Economic and Social Affairs (UNDESA), and the International Trade Centre (ITC). Other notifications regarding members’ import and export bans, quantitative restrictions on imports and exports, and non-automatic import licensing are made available through the WTO’s Committee on Market Access and posted on the WTO’s webpage (WTO, 2021e).

With the aim of facilitating trade in these times of crisis, some WTO members have proposed initiatives calling for restraint in the imposition of any new export restrictions on essential medical goods necessary to combat COVID-19, including vaccines, and to eliminate unnecessary the existing restrictions. Some countries have endorsed a proposal calling for the temporary lifting of intellectual property rights on medicines and medical products essential to combat COVID-19. In the meantime, the WTO member countries continue to submit notifications to the WTO regarding their trade-related actions. In the last monitoring report issued in December 2020, the WTO noted that COVID-19 related trade-facilitating measures implemented since the beginning of the pandemic covered an estimated USD 227 billion of goods trade, while COVID-19 trade-restrictive measures covered trade worth USD 180 billion. A positive development is that around 39% of the restrictive
measures on goods adopted by the WTO members and observers in the immediate wake of the pandemic were repealed by mid-October 2020 (Ibidem).

It is necessary to openly and argumentatively discuss trade rules that would apply in a system that includes all governments and that meets the special needs of developing countries. Trade agreements should not be so strong that their implementation prevents governments from regulating public health or the environment. Trade agreements should not strengthen monopolies in medicine, nor give additional legal rights to global corporations that already have enormous market power. They should be based on internationally agreed and fully applicable labour rights and environmental standards (Ranald, 2020, p. 112).

Temporary export bans for certain medical products, for instance, are WTO-compatible because while they may be regarded as prohibited quantitative restrictions on exports, they are potentially justified as necessary to protect public health. Most of the measures introduced by the states were probably justified, but there were still a significant number of measures whose scope or nature was such that they could hardly be justified by Articles XX or XXI. An export ban is an extreme measure that is relatively rare in the global trading system. Nevertheless, we have seen widespread recourse to such actions during the crisis, sometimes without an announced end date, which is not according to the WTO rules. The temporary trade measures taken during the crisis must have a minimum built-in expiration clause which would prove their temporary nature. Otherwise, if there is no specified deadline, there is a high risk that they will persist long after they have outlived their need (Curran, Eckhardt, Lee, 2021). Of course, in addition, they need to be applied in a manner that does not discriminate between the WTO member countries and cannot constitute a disguised restriction on international trade.

Interestingly, the pandemic has forced governments and companies to actively consider the risks created by globalization, like reduced self-sufficiency. The bigger the impact of the COVID-19 pandemic, the greater are the chances that we will see the paradigm shift in international trade relations and governance. A fundamental reorganization of the global economy and international trade and political order has already been going on for some time. While that is happening, some multilateral institutions have already been marginalized, and the WTO may serve here as a perfect example with its partially paralyzed dispute settlement system, deadlocked multilateral trade negotiations in the Doha round, and views of the organization as outdated and complacent. Despite the onset of a pandemic, global trade restrictions have been on the rise for the last couple of years. The rise of restrictions is not limited to the economic relations between the US and China. Traditionally very open to international trade, the European Union has taken a more determined stance
and is increasingly vigorously imposing its anti-dumping duties, countervailing measures and trade sanctions.

THE CHANGES IN TRADE BECAUSE OF THE COVID-19 CRISIS

The outbreak of the COVID-19 pandemic has disrupted international trade. The disturbance was present both on the supply side of goods and services and the demand side. When we look at trade, the biggest negative impact of the pandemic outbreak was in the international services sector. But still, the downturn in world trade, which the WTO originally feared for 2020, was not as sharp as originally forecast. The COVID-19 pandemic led to merchandise trade declining by 8% and trade in commercial services contracting by 21% year-on-year in 2020. World trade in goods and services amounted to US$ 22 trillion in 2020, a 12% decline compared with 2019. The services were more severely affected because while lockdowns led to the cancellation of flights, holidays abroad, restaurant meals, and cultural/recreational activities, the demand for essential goods held up in all major economies (WTO, 2021f, p. 10). The top exporter of merchandise trade in 2020 was China, with US$ 2,323 billion. It accounted for 13% of the world’s total export of merchandise trade (WTO, 2021f, p. 1). On the plus side, the trade decline in 2020 was less severe than forecasters predicted, thanks to proactive fiscal and monetary policies, a trade policy restraint that kept supply chains running, and trade flexibility and adaptation due, for example, to increased demand for products that enable working from home.

Merchandise export and import volumes in the first quarter of 2021 rose to new heights in Asia and reverted to pre-pandemic levels in Europe and North America, but lagged in poorer, less industrialized regions, such as Africa and the Middle East. Regional growth in merchandise trade volume has varied much more than it did before the COVID-19 pandemic, with Asia exceeding growth in other regions for both exports and imports. Perhaps the strongest impact of the virus movement on the success of commodity trade can be seen from the example of the decline in merchandise exports of oil-producing regions, which fell the most in 2021 due to reduced fuel demand because of travel restrictions related to COVID-19. Another good example is the weakness of the year-on-year growth of imports of goods in Europe, partly due to the revival of COVID-19 in the first quarter of 2021 (WTO, 2021f, p. 21, p. 36).

The world commercial services trade, in the first quarter of 2021 compared to the same period in 2019, was down 19% for exports and 18% for imports. Exports and imports of commercial services in Europe were better than the world average in the first quarter of 2021, 15% and 13%, respectively, while all other regions
performed less than the world average. Africa, South America, and Central America, including the Caribbean, recorded the largest decline in exports of commercial services due to the continuation of measures in the fight against COVID-19 as they reduce travel exports (WTO, 2021f, p. 39).

The Goods Trade Barometer from the WTO shows that the volume of merchandise trade was up 5.7% year-on-year in the first quarter of 2021, which indicates ongoing recovery from the pandemic-induced shock of 2020. Recovery from last year’s shock was not regionally balanced. North America, Europe and Asia made the best progress in the recovery, while other regions are still lagging (WTO, 2021g). It is expected that the recovery of trade in goods will continue and that it will be even more pronounced in the second part of the year. The WTO’s most recent trade forecast of 31 March predicts an 8% increase in the volume of world merchandise trade in 2021, following a 5.3% drop in 2020. Since it recorded a sharp decline in the second quarter of 2020 due to the pandemic, global commodity trade has been growing steadily (WTO, 2021h).

Problems in world trade continue to be created by the trade tensions between the big players, regional disparities, persistent weakness in trade in services and lagging in vaccination, especially in poor countries. Unfortunately, the pandemic caused by the COVID-19 virus continues to pose the greatest threat to trade, as new waves of infection could easily undermine the achieved recovery.

There is a real danger that Investor-State Dispute Settlement (ISDS) rules could result in cases where global companies would seek compensation for government actions during a pandemic that were necessary to save lives but reduced their profits. The ISDS has been rejected by the most of low-income WTO members, but it is still present in bilateral and regional agreements. There are currently over 1,000 cases of the ISDS, many against low-income countries (UNCTAD 2020). In order to prevent such potentially dangerous and destabilizing actions, it would be good to include the WTO, which provides the possibility of multilateral negotiations.

It has become obvious that the international trading system has become less secure, and that is increasingly protectionist. The growth of the policy of interventionism, which started even before the COVID-19 pandemic, is more and more noticeable, as well as the growth of tensions in international trade relations. Some time since the initial shock of the crisis, it has become noticeable that companies are shifting to shorter supply chains. Also, supply chains are more regionally oriented than globally oriented, with most likely reduced efficiency and rising costs. Besides the already mentioned tensions, there is also a lot of talk about the process of economic deglobalization. In the meantime, international trade agreements are less and less restricting domestic action. Successful regulation of all
these tendencies requires a deeper re-examination of the success of the work and the future functioning of global institutions, here primarily having in mind the WTO.


Even before the crisis caused by the coronavirus pandemic, the WTO started serious talks and proposals were given by the most important WTO member countries on the reform of this international organization (Jelisavac Trošić, 2021, pp. 431-439). The outbreak of the crisis has, in a way, frozen and delayed this process, but it is expected that with the end of the crisis, it will become relevant again. The ongoing COVID-19 pandemic is still an unprecedented challenge in our time to the global economy as well as to health. Because of that, the countries have put all their forces into the function of resolving the crisis as their priority, while other mutual disagreements will be resolved later. Without some new urgent steps, the world is unlikely to achieve the end-2021 target of vaccinating at least 40% of the population in all countries, which is presented to be a critical milestone to end the pandemic and achieve the global economic recovery.

The world trade is currently evolving. The COVID-19 pandemic has triggered a stronger debate about the shortcomings of neoliberal trade policy toward achieving zero tariffs and other barriers to all trade and investment. In this way, each country would specialize in its most competitive exports, importing everything else at the lowest possible prices, without the existence of an active industrial policy and while minimizing government regulations and expenditures. Neoliberal trade policy, on the other hand, maximizes cheap global production chains for corporations, but can result in a race to the bottom, rather than improving labour rights and environmental standards. The implementation of such a policy has left many economies with a narrow production base, which is incapable of producing basic medical products, as well as scarce public health resources to cope with a pandemic (Ranald, 2020, p. 109). The lack of self-sufficiency became apparent with the outbreak of the pandemic. Private ownership of hospitals, for example, when a crisis occurs, leaves little room for state regulation. Also, when the crisis causes a sharp drop in prices, many sectors of the economy are sensitive to the strong influence of transnational corporations, so there is an increase in monopoly rights at the expense of consumers’ rights. Trade policy after the COVID-19 pandemic could reject both the extremes of neoliberal trade policy and the policy of building walls and returning to high tariffs. Human rights advocates are promoting trade policy after the pandemic that could improve people’s lives.

Given the growing importance of online services, especially during the COVID-19 crisis, the WTO member countries are discussing their efforts to increase the
digital capabilities of businesses and consumers. In this regard, there are a lot of concerns to be addressed, like 5G communications networks, specific trade concerns related to transparency, pre-installed software, satellite operators and cybersecurity, etc. At present, keeping trade open in the face of the pandemic has been the subject of trade initiatives by some countries. Given that the creation of a multilateral trade agreement within the WTO Doha Round has proved unattainable, regional trade arrangements may explore ways to create rules where progress would be more complicated to achieve on a global basis. Since states’ budgets have been strained by fiscal measures to fight the pandemic, multilateral and regional trade agreements and other types of trade regulation are becoming more important than government policies in this reflow from an era of globalization. In the current and future periods, technology and market power will be the biggest factors that determine trading patterns. Ultimately, how businesses view future economic conditions will affect future trade regulations.

In the future, the WTO must focus on the challenge of finding reasonable trade measures that can aid in economic recovery. The WTO must also face the challenge of dealing with the trade aspects of the pandemic and post-pandemic period. The dilemma is how well-prepared the multilateral trading system embodied in the WTO is for the challenges that it now faces and that it will face. The most influential countries in the world acknowledged the need for WTO reform before the COVID-19 crisis began. The need for reform is now even more urgent if the WTO is to fulfil its mission of managing trade conflicts and have transparent trade rules (Wolfe, 2020, p. 177). The most influential member countries of the WTO are planning systemic reforms.

If the WTO member countries had teamed up to face the trade challenges of the coronavirus and the desperately needed economic recovery together, there would not be a need for public criticism of the WTO. States have generally responded to the crisis individually, not collectively. The reaction and individual measures introduced by the states in many cases were without reference to the impact of these measures on the interests of other states. On the other hand, the lack of leadership by the WTO, and the already reduced confidence in its actions, have also led to individual reactions from individual countries rather than to collective multilateral measures.

Since the WTO reform is long overdue, the problems in the WTO’s functioning which preceded the pandemic will continue after the end of the pandemic and the elimination of its consequences if there is no reform inside the WTO.
CONCLUSION

Since the COVID-19 threat is still ongoing, it is too early to provide clear judgements on the persistent impacts of COVID-19 on the international trade system. Besides that, the policy interventions are also shifting. The majority of trade measures introduced after the beginning of COVID-19 seemed to be justified, but there were also measures whose coverage and nature were arguable. In times without crisis, those kinds of measures are not allowed since the WTO prohibits quantitative export restrictions. But in times of crisis, clauses from the WTO agreement are used that allow their use on the ground of health. If measures are temporary in nature and aimed at preventing or relieving critical shortages of essential products, they are allowed under the WTO rules. A precondition for using the possibility of introducing temporary restrictions that must be met according to the WTO rules is to inform the WTO about their introduction, as well as that they must not be discriminatory towards different countries.

Considering the current COVID-19 crisis, the WTO Appellate Body’s interpretation of Articles with exceptions to the general rule of eliminating trade restrictions appears to provide the WTO member countries with authority to restrict exports of food and medical supplies as long as necessary in order to prevent critical shortages. Given the shortcomings identified so far, a recommendation would be to establish some sort of formal WHO-WTO coordination system in order to conduct reviews and assessments of the trade measures imposed during an outbreak.

It is a particular challenge to maintain the WTO rules, which were established for decades, in times of crisis and with the great shock and unpredictability that this pandemic has brought to the world. The WTO has succeeded in providing essential transparency and updating of the obtained notifications of measures from its member countries, which is essential, especially at an uncertain time of the pandemic, for planning both by national policymakers and companies. But the problems are created by import barriers during the pandemic, which often occur outside the WTO framework.

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THE COVID-19 PANDEMIC AND ITS IMPACT ON NATO

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Abstract: The risks of transmission of contagious diseases are increasing as a result of globalization and the increased movement of goods and people. The fact that these diseases can quickly cross national borders is why the international aspect is becoming more and more important. These risks are complex and disparate from direct military threats but also have a negative effect on security and stability both at the state and global levels. The COVID-19 pandemic has become a big problem and a challenge for individual states, as well as for international and regional organizations. NATO is no different and, like other international organizations, the operational and institutional protocols for the work of its bodies had to be amended to maintain the effective functioning during the COVID-19 crisis. This adjustment modified, but did not significantly impact the main aims and previously defined priorities, despite the fact that the unavoidable global economic downturn could reduce the number of members who can meet the spending targets recommended by NATO. In particular, because the COVID-19 crisis did not reduce international rivalry and insecurity, but rather increased it, with long-term consequences for international security and stability.

Keywords: COVID 19, contagious diseases, security, NATO, resilience, international stability.

INTRODUCTION

When a contagious disease spreads throughout the globe and becomes a pandemic, it poses a non-traditional security threat, since it has the potential to disrupt regular functioning health systems, as well as nations’ political and economic

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stability and interests. Recently, humanity was confronted with the COVID-19 virus, which has spread quickly, demonstrating how global connectivity can be both a strength and a vulnerability.

Most countries incorporate non-traditional security threats into their national security strategies and have accordingly engaged all their capabilities in their efforts to respond to the COVID-19 crisis. When the pandemics began, new threats and difficulties required a shift from traditional to non-traditional military operations, as well as the deployment of military personnel to support civilian efforts in various crisis conditions. The important contributions by the military to civilian authorities’ attempts to monitor and prevent the spread of the virus during the COVID-19 crisis underscored the importance of a well-functioning civil-military link. The military, which is trained to react quickly in risky situations, was one of the first to react to the pandemic, distributing medical supplies and protective equipment (Lațici, 2020).

Despite all these efforts, national health systems have been shown to be limited in their capacity to protect their citizens and prevent the spread of the virus. Also, although the borders of many countries were quickly closed, which made transportation and trade extremely difficult, this did not prevent the virus from spreading rapidly around the globe. At the same time, fears of the virus have sparked a global scramble for medical protective equipment and respirators. The lack of mutual support and assistance, especially at the beginning of the crisis caused by the COVID-19 virus, marked the relations between many close countries and close allies.

In these circumstances, it has become obvious that an efficient response to pandemics requires the participation and full coordination of all available resources at the state level but also at an international level, especially through cooperation within the framework of regional and international organizations. Thus, a new health crisis has challenged the agendas of key international organizations, as well as their operational and administrative capacities. Monitoring the outbreak of infectious diseases and timely and efficient management of the distribution of medical equipment, protective equipment and respirators have become priority obligations. It has become obvious that it is crucial for international organizations to react quickly and successfully to the crisis, as well as to use it to adjust their missions and tasks. Like many other countries and international organizations, NATO has had to adapt to new global circumstances.

In the first weeks following its outbreak, NATO was repeatedly accused of doing nothing to combat the COVID-19 pandemic. This impression of inaction and discontent persisted in most alliance states, but criticism was also expressed outside of NATO, by Russia and China. However, the Alliance was particularly concerned about criticism coming from the two countries, accusing them of using highly
effective strategic communication methods to spread untruths about NATO’s allegedly inadequate engagement. Furthermore, NATO has accused Russia and China of using assistance for protective equipment, respirators, and medicine as non-traditional foreign policy tools for influencing recipient countries. It has become clear that, despite not being the first line of defence, NATO has to adapt and find a role in the fight against the global health crisis (Rittimann, 2021, pp. 74-80).

Looking at the spread of contagious diseases as a non-traditional security threat, which focuses on human security, this article examines how NATO responded to this health crisis while staying true to its strategic objectives. How has the crisis affected NATO’s agenda and, as a result, its planning capacity? To address these issues, the article examines various measures and actions taken by NATO in the organizational and communication domains, as well as the potential impact of the pandemic on the organization’s agenda, particularly in terms of military-political planning and response to the broader range of contemporary non-traditional threats.

This article is organized as follows. It begins by presenting the analytical framework by assessing the spreading of contagious diseases as a security threat. Following this approach, the article traces the immediate response of NATO to the pandemic of COVID-19. Then it does a preliminary review of the NATO mandate for dealing with the COVID-19 crisis and the major challenges it faced throughout the outbreak. The article concludes with reflection points on the COVID-19 pandemic and its impact on NATO.

THE SPREADING OF CONTAGIOUS DISEASES AS A SECURITY THREAT

After the Cold War, security analysts began to focus on more complex threats, not just immediate threats to the country’s security, such as military threats. As a result, a wider spectrum of issues might be classified as security threats. Moreover, shifting the focus from threat to risk has allowed security to move away from the concept of a clear danger to more plausible assessments of potential threats. As a result, risks to public health may be viewed as a type of non-traditional security threat. At the same time, questions are raised not only about the challenges posed by security threats, but also about whose security should be protected. Because these threats are not directly related to the protection of the state’s sovereignty, but rather affect individuals within states, the concept of human security was developed. The phrase “global health security” was created by the World Health Organization (McInnes, 2008, pp. 276-277).
response to the security challenges posed by the spread of contagious diseases (Sergeev & Lee, 2020, p. 57). Because it jeopardizes people’s health and well-being, a pandemic may cause chaos in a country’s health, economic, and social systems, generating widespread panic and undermining the country’s stability and functioning (McInnes, 2008, p. 279).

Contagious diseases have always spread across national borders. In recent decades, climate change, rapid population growth, significant depletion of natural habitats, high levels of urbanization that bring people closer to wild species and shifting disease transmission patterns between human and animal populations all contribute to the emergence of different contagious diseases. At the same time, predicting and responding to epidemics, as well as preventing them from becoming pandemics, is extremely difficult, given the wide range of their potential origins and the fact that, due to globalization, contagious diseases may spread quickly (Bloom & Cadarette, 2019). Growing global interconnectivity also creates mutual vulnerability, complicating an already difficult task that requires both a global and a national approach. (Cecchine & Moore, 2006, p. 6).

International organizations have an important function because they represent organized platforms for consulting countries on global issues and agreeing on measures to be implemented at the national level. In the securitization of contagious diseases, the World Health Organization (WHO) has played a critical role. As a result, the WHO has presented the spread of contagious diseases as an existential threat that requires new regulations and behaviour of the international community in order to effectively control them. This organization released a list of contagious diseases for research and development aims in May 2016, which was later revised several times. (Davies, 2008, pp. 295-313). This WHO document also emphasized that contagious disease outbreaks pose a substantial and ongoing danger to global health, economic prospects, as well as to security. The UN has also recognized that contagious diseases can become security threats. A few UN Security Council Special Sessions and resolutions have been dedicated to AIDS, the global reaction to SARS, H5N1, and now COVID-19. They resulted in the initiation of a number of well-coordinated campaigns that were carried out with tactical accuracy and commitment and backed up by military rhetoric. The terminology used to emphasize the need to

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3 The concept of securitization was brought to the study of international affairs by the Copenhagen School. Buzan describes security as a self-referential activity since it is via this practice that the issue becomes a security risk, not necessarily because a real existential threat exists, but because the issue is presented as such (Buzan B. & Waever O. & de Wilde J., 1998, p. 25).
remove certain infections was combative, with references to an “enemy” to be defeated and battles to be won (O’Manique & Fourie, 2010, p. 243).

The crisis caused by COVID-19 has required continuous monitoring and the ability to react and adapt quickly. The outbreak of the COVID-19 virus disease was declared a Public Health Emergency of International Concern by the WHO on January 30, 2020. The WHO Director-General proclaimed a pandemic on March 11, 2020. Thus, the World Health Organization securitized the spread of the COVID-19 virus, prompting a rapid worldwide reaction through a variety of national and global measures. Its Strategic Preparedness and Response Plan, which was released on February 4, 2020, was aimed at incorporating all possible national and global resources in an effort to respond to the virus’s spread and allow its containment and suppression (WHO, February 2020).

The WHO seeks to fulfil its mandate by securitizing communicable diseases at a global level, but national governments are obligated to work to protect the health of their own citizens. Although the state policies of most countries have largely followed the recommendations of the WTO, the crisis caused by the spread of the COVID-19 virus, as Trapara noticed, has restored the importance of decisions at the national level (Trapara, 2021, p.48). Namely, since the beginning of the pandemic, national governments have sovereignly decided on strategies and measures to implement the fight against this virus, often significantly restricting civil and political rights and freedoms. In many countries, they have achieved this with the broad support of the population (Dodds et al., 2020, pp.292-293). On the other hand, as Fiddler pointed out, international cooperation and coordination in the control of contagious diseases are crucial when it becomes a global issue because no state can independently prevent the spread of deadly viruses within its borders (David, 1997). It is crucial to emphasize that, despite interdependence and the necessity for international collaboration and information exchange, outbreaks of the COVID-19 crisis have shown that policies within and amongst states can lead to an atmosphere that disrupts the steps required to protect states and individuals from communicable diseases.

There have been numerous examples of government activities at all levels of the international community that have had a negative impact on coordination activities against the spreading of the COVID-19 pandemic, and which harmed international law. The most obvious thing was the open rivalry and competition between the United States, China, and Russia, which did not stop during the pandemic.4 Furthermore, the pandemic heightened mutual hostility (Fidler, 2020).

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4 Otherwise, for a long time, the relations between NATO and Russia did not coincide with the true interests of strengthening European security on a collective basis (Jović-Lazić,
As Biscop noticed, the pandemic has become another arena in which a great power competition has been played out. Some governments used speculation and false narratives against each other, attempting to influence the WHO and persuade the public to believe in their version of events (Biscop, 2020, pp. 1009-1023). As a result, the WHO, as a multilateral organization, has become a focal point for the growing competition between the US and China. This mutual animosity, in many forms, has hampered collaboration and the accomplishment of an effective global response to COVID-19. As Lefler noted, the pandemic drew attention to the rise of China and the rivalry of the great powers. But he believes that transnational threats, which are related to climate change and global warming, represent the greatest long-term global threat, rather than great power competition (Leffler, 2021, pp. 517-524).

THE IMMEDIATE RESPONSE OF NATO TO THE COVID-19 PANDEMIC

To fully comprehend NATO’s actions and limitations during the COVID-19 crisis, one must first comprehend the overall framework in which the alliance was functioning during the period before its outbreak. Because the patterns of the further development of the pandemic are not obvious, and there is no clear opponent or state that can be identified and fought against, the crisis caused by the spread of the COVID-19 virus is different from the crises that NATO has faced before. Nobody genuinely believed that fighting a pandemic was NATO’s responsibility. In their defence policies, most NATO member nations recognize that the fundamental responsibility of the state is to preserve state security, but they also recognize human security, which implies that citizens and individuals must be protected and safe (Tardy, 2020, p. 16).

At the start of the crisis, relations between the allies were marked by the lack of mutual support and help, as well as the absolute supremacy of sovereign governments, both in terms of legitimacy and resources available to tackle this security danger. Although several EU member states closed their borders during the first phases of the pandemic, the decision of the US president to impose a travel restriction against Europe on March 11, 2020, was interpreted as an unwillingness of the United States to take a leading role in the transatlantic response to spreading

2015, pp. 151-172). In addition to numerous common interests, there are also significant differences and contradictions, both in international positions and in the immediate and long-term goals of the US, the EU, and Russia. An effective fight against a number of new threats and challenges in the world will, ultimately, require the restructuring of EU-NATO relations, as well as the development of a more concrete strategy for cooperation between the USA, the EU and Russia (pp. 303-325; Jović-Lazić & Lađevac, 2021, pp. 215-235).
the virus. As a result of all of this, questions concerning the future of liberal internationalism, transatlantic relations, and NATO’s role as a military alliance have become pretty widespread (Brattberg, 2020).

In an attempt to respond to the new situation, NATO has acknowledged its responsibility for preventing the health crisis from escalating into a dangerous security crisis. NATO insisted that the nature of the COVID-19 crisis required a coordinated response and action at the local and international levels. In this context, its role as an international security organization is to contribute to a more effective response by its member states to this health crisis (NATO, June 2020). In its public pandemic discourse, NATO has emphasized its experience of crisis management and crisis-specific tasks, such as strategic airlift, which proved beneficial during the COVID-19 outbreak (Baciu, 2021, p. 4).

Given the high virulence of COVID-19, as well as the fact that there were no adequate medicines or vaccines at the beginning of the pandemic, the fight against the pandemic was aimed at early diagnosis and prevention of spread (Fidler, 2020). NATO has also focused on preventing the spread of the virus and mobilizing its resources to help allied countries and partners supply medical protective equipment and respirators. At the same time, it has taken the necessary steps to adjust its management and decision-making processes, not only at the diplomatic and political levels but also at the military and operational levels (Latici, 2020).

Because NATO troops are also vulnerable to COVID-19, the introduction of quarantine, as well as a rise in the number of infected military personnel, has had an impact on NATO force planning, deployment, and operations. Thus, in order to prevent the disease from spreading within its forces, the US Military Command in Europe (EUCOM) declared on March 13, 2020, that it had reduced the size and scope of exercise Defender-Europe 20, and that all staff and equipment movement from the US to Europe had stopped. Otherwise, the purpose of these exercises was to see how quickly the US could get 20,000 troops to Europe and position them near the Russian border. Also, it was announced that while the necessary changes were being carried out, the exercises related to the Defender-Europe 20 exercise – Dynamic Front, Joint War Assessment, Saber Strike, and Swift Response – would be cancelled (NATO, March 2020).

NATO has adapted as the crisis caused by the spread of the COVID-19 virus progresses. On the 2nd of April 2020, NATO member states’ foreign ministers met digitally for the first time in the Alliance’s history. To prevent the COVID-19 virus from spreading further, NATO Headquarters implemented preventive measures such as restricting access to the media and non-essential personnel. These regulations obeyed the Belgian government’s movement restrictions, which had been in place since March 18th. This was an opportunity to talk about how to react rapidly and
efficiently to the global health crisis, as well as how to preserve stability during a pandemic while stressing that the economic implications of a pandemic could put the Alliance’s budget in jeopardy. The brief final declaration of the Council on April 2, 2020, stresses the argument that NATO, in the face of an unprecedented pandemic, is fulfilling its role. In that sense, it is emphasized that allies help one another in a variety of areas, such as emergency personnel, medical supply delivery to hospitals, and best practices for treating this disease (NATO, April 2020). Other virtual meetings followed this meeting of foreign ministers. There are opinions that this approach was useful in dealing with pandemic outbreak problems, but because it allows NATO to make rapid decisions, it may be essential in other crisis circumstances and increases the Alliance’s deterrence (Chollet et al. 2020, pp. 2-3).

The possibility of overcrowded and under-resourced hospitals among the Allies severely afflicted by the virus was initially a cause of anxiety. The Allies were compelled to analyze their available stockpiles of a variety of critical protective and medical equipment immediately. As the COVID-19 virus spread around the globe, it was clear that the demand for supplies and equipment was changing. Therefore, the Allies worked together to develop a strategy to ensure that it was delivered as quickly as possible to the locations where it was necessary. NATO’s experience of crisis management and coordinating logistics among Allies has allowed it to contribute effectively to its members’ responses to the COVID-19 crisis. To secure the capacity to transfer the appropriate quantity of supplies and personnel on time, NATO has engaged in a variety of essential instruments to address more effective logistics and supply chain coordination, strategic airlift, and fast air mobility. They were also crucial for leading and managing NATO’s total military operation in support of Allied and partnership activities throughout the crisis (Mesterhazy, 2020).

The Euro-Atlantic Disaster Response Coordination Center (EADRCC), which was established in June 1998, was developed as NATO’s primary response tool for responding to civil crises in the Euro-Atlantic region. Its goal is to make civil and military assistance more accessible during natural and man-made crises, emergencies, and Article 5. It serves as a centre for coordinating relief requests and providing assistance to NATO Allies and Partners. Thus, during the pandemic, the EADRCC has assisted in the coordination of donations to many NATO member countries and partners that have requested them (NATO, EADRCC). The necessity for organized and efficient assistance is significant when the resources are provided at a critical time when they can save lives. While doing so, it is very important to avoid duplication of capacities. In this regard, the EADRCC’s role in organizing assistance across the Euro-Atlantic region during the COVID-19 crisis has been essential. Besides the EADRCC, the NATO Support and Procurement Agency (NSPA) also has decades of expertise in responding to crises, which was crucial in
responding to the crisis caused by the COVID-19 pandemic. The NSPA, established in 1958, integrates procurement, logistical, medical, and infrastructure capabilities, operational and systems support, and services for NATO states, NATO Military Authorities, and partner nations into a single body (NATO, NSPA). As a result, during the pandemic outbreak, the NSPA has provided significant airlift capacities as well as assistance in the acquisition and delivery of critical medical equipment and supplies. The NSPA created the COVID-19 Management Office (CMO) at the onset of the crisis to address the nation’s unprecedented demand for medical supplies, equipment, and services (NSPA, COVID-19). Also, the Strategic Airlift Capability (SAC), the Strategic Airlift International Solution (SALIS), and the Rapid Air Mobility (RAM) have all been launched by the Alliance to help with transportation efficiency for the delivery of vital medical protective equipment to combat the coronavirus pandemic (NATO, RAM). Hundreds of transport missions for medical supplies, equipment or personnel took place during the COVID-19 crisis. Thus, the pandemic has resulted in the largest military deployment in history during a period of peace. About half a million soldiers have been deployed to support the civilian response to the pandemic since it began. For military relief flights, the NATO call sign has been used to ensure a swift response (Lațici, 2020b).

According to the Special Report of the Defense and Security Committee of the NATO Parliamentary Assembly from November 2020, NATO’s pandemic crisis response policy does not jeopardize its ability to provide credible and effective deterrence and that its forces remain on alert in case of an attack. Also, as further stated, missions and operations critical to the Alliance’s security are fully staffed and focused on fulfilling their goals (Mesterhazy, 2020). For the Alliance, it was critical to demonstrate to the international community and its allies that NATO used its capabilities and resources to directly participate in the fight against COVID-19 while also remaining ready to fulfil its primary missions of collective defence, crisis management, and cooperative security (NATO, April 2020).

THE NATO MANDATE FOR DEALING WITH THE COVID-19 CRISIS AND THE MAJOR CHALLENGES IT FACED THROUGHOUT THE OUTBREAK

Dealing with the effects of pandemics is primarily the responsibility of national governments, but given that the COVID-19 crisis had significant security implications for its member states, this prompted NATO to adapt. Crisis management has been critical in responding to the COVID-19 pandemic crisis. As a result, NATO decided to serve as a crisis manager. The importance that NATO countries give to crisis management is reflected in the Strategic concept published in 1999, which sets crisis management as one of the basic security responsibilities of the Alliance. This
concept defines the key security goals and tasks for which effective processes have been established to guide participants in crisis planning, preparedness, and management (NATO, 1999). It was then estimated that this unique instrument for multinational military cooperation could contribute to crisis management by integrating the efforts of its member states and other partners. However, as Roper noted back then, in order to prevent misunderstandings and false expectations, NATO should carefully define its capabilities and accept that it will be as successful as its member states allow (Roper, 1999, pp. 51-61).

Crisis management was also identified as a crucial task in NATO’s 2010 Strategic Concept Strategy. According to this Strategy, NATO is dedicated to collective defence, crisis management, and cooperative security in order to defend its members. This document states that “NATO has a unique and robust set of political and military capabilities to address the full spectrum of crises... NATO will actively employ an appropriate mix of those political and military tools to help manage developing crises that have the potential to affect Alliance security”. It is further stated that the contemporary security environment comprises different threats to the security of the territory and populations of its member states. Health risks are, among others, recognized as a non-traditional threat with the potential to significantly influence NATO strategy and operations (NATO, 2010). Civil crisis planning is particularly critical because it allows allies and partners to help each other improve individual governments’ civilian ability to deal with diverse threats and, as a result, prepare to deal with the consequences of potential crises.

NATO has tried to preserve its operational capacities and its ability to deal with a wide range of security issues, even in times of crisis. During the COVID-19 crisis, NATO adapted by taking on additional crisis-related emergency tasks such as the transfer of medical equipment, resource coordination, and mobility. NATO highlighted the significance of its instruments and capabilities, focusing on risk analysis, healthcare and medical equipment transport, fighting hybrid threats, and the protection of critical infrastructure sectors. (NATO, 2021).

NATO’s mandate to strengthen resilience became essential to the official Alliance discourse and was often underlined in its response to the COVID-19 crisis. The principle is codified in Article 3 of the Alliance’s founding treaty, which states that the parties, individually and together, shall preserve and strengthen their individual and collective resilience capabilities via constant and effective self-help and mutual assistance. In the NATO Secretary General’s Annual Report 2020, resilience is recognized as the “first line of allied deterrence and defence” (NATO, 2021).

The COVID-19 crisis has further forced NATO to assess, adapt, and implement plans for large-scale emergency or crisis scenarios, particularly those involving public health. Planning in a civil crisis is particularly important because it allows allies and
partners to help each other improve individual governments’ civilian ability to deal with diverse threats and, as a result, prepare to deal with the consequences of potential crises. The NATO Civil Emergency Planning Committee (CEPC), which was established decades ago, could play a significant role in dealing with similar crises. It is one of the key tools in the field of civil protection, but also in repairing the consequences of natural and other emergencies (Heuven & Marten, 1970, pp. 391-398).

In an effort to generate recommendations in order to create a basis for the revision of its Strategic Concept, in November 2020, NATO adopted the document “NATO 2030: United for a New Era”. An evaluation of what the COVID-19 pandemic has revealed about NATO’s capacity to deal with multiple, simultaneous, disruptive, and non-traditional threats, as well as meeting basic resilience requirements such as minimizing damage, quickly restoring stability, and catalyzing improved strategies for future challenges, are recognized as essential. As further stated in this document, NATO could continue to undertake lessons-learned exercises from the COVID-19 crisis with a strategy to meet unforeseen challenges in the context of strategic simultaneity. It also highlighted that NATO’s capacity to maintain security and defence requirements in the face of various disruptions should be examined. It also points out that non-military threats such as the outbreaks of contagious diseases can be recognized in NATO’s resilience and crisis management planning. Also, NATO should adopt a regular training plan to provide allies with the ability to predict and simulate strategic shocks caused by natural and man-made disasters. The aim, it concludes, should be to ensure that assigned duties and relevant information exist before any possible crisis (NATO, November 2020).

Governments and international organizations have geostrategic or regional interests in conveying certain messages to areas and countries where they have or want to exert influence. Thus, it is not surprising that the COVID-19 crisis provided another opportunity to demonstrate the obvious geopolitical interests of major international actors. In that context, a pandemic has also increased international rivalry and uncertainty, with long-term implications for international stability.

NATO does not approve of Russia’s and China’s foreign policies, which is why they have been attempting to discredit these countries in numerous ways since the outbreak, accusing them of using the pandemic for commercial and political gain. Thus, NATO claimed that it had noticed a lot of confusion and misinformation and that it had therefore begun to regularly monitor the disinformation and propaganda operations of many state and non-state actors. NATO also accused Russia and China of working together to change the narrative surrounding the COVID-19 pandemic. In its official documents, NATO stated that Russia was attempting to smear the Alliance’s ability to respond to crises, as well as that China wanted to change the
discourse from being the source of a worldwide pandemic to being a state capable of fulfilling the growing demands in moments of a global health crisis. It is also noted that both Russia and China are actively disseminating deliberate disinformation through diversified and numerous media forms and that NATO is taking the required steps to address Russia’s destructive and disinformation tactics, as well as China’s subtle attempt to change the virus’s origin story (Mesterhazy, 2020). Regardless of these NATO accusations, it needs to be noted that there is a belief that, under current conditions, maintaining the Alliance’s traditional political goals will be increasingly harder to explain because ordinary people are unaware of Russia’s and China’s heightened aggressiveness, which NATO views as security challenges. Especially since, as Russel pointed out, China, unlike many Western countries, was able to respond quickly and effectively, which is advantageous in times of crisis (Mead, 2020). Contrary to this, the United States, as the dominant power at the global level, was not ready and did not have the capacity to take a leading role in this crisis (Gullestad et al., 2020, pp. 3-4). But, as Nye observed, although its reputational (or soft) power has suffered as a result of its incompetent response, the pandemic will not change the balance of hard power in favour of the United States. COVID-19, according to Ikenberry, will hasten the fragmentation and disintegration of the global order in the short term. But, as he points out, the pandemic also provides an opportunity to recover the liberal international mission. He claims that this is the final chance to create an open, global system based on a coalition of major liberal democracies (Ikenberry, 2020). Also, despite speculation that the long-term economic effect of the pandemic could jeopardize NATO’s future budget, posing an existential threat to the Alliance, no such outcome is expected. In the official narrative, the justification for national allocations to the Alliance’s budget is already based on the existence of non-traditional security threats, such as health threats, and the need to be more prepared to respond to similar challenges in the future (NATO, November 2020).

CONCLUDING REMARKS

Due to globalization and increased urbanization, an increasing number of new contagious diseases can be transmitted more rapidly to different geographical regions, increasing the risk of a pandemic with global consequences. Although each state is responsible for dealing with health crises that occur within its borders, as we have seen during the COVID-19 pandemics, the repercussions, escalation of harmful implications, or duration that deplete state resources frequently exceed the capacity of individual states, which are unable to deal with the consequences of the negative phenomena that strike them. The COVID-19 pandemic has shown that the spread of the virus can have a negative impact not only on public health
but also on social, economic, and political structures, becoming a real threat to both national and global security. In such cases, international cooperation is essential.

Despite the fact that the pandemic was supposed to be the initiator of international cooperation, in the first reaction to the outbreak of COVID-19, solidarity even between very close states and allies for the supply of critical medical devices and protective equipment did not exist. Although NATO has faced operational, budgetary, and political challenges that have prevented it from having a significant impact on member governments, the COVID-19 crisis has forced the Alliance to adjust to such threats in a credible way. NATO has reduced the scope of its activities, postponed or cancelled some previously agreed-upon exercises, and deactivated some contingents. The virus also affected a segment of the NATO force. Nevertheless, NATO has shown its ability to adapt to the new situation and mobilize its capabilities to directly support the member states’ response to the crisis posed by the COVID-19 pandemic. Thus, this organization has activated some of its existing complex instruments developed before the COVID-19 crisis to support the civilian action of its allies.

In its official rhetoric, NATO sought to show its importance by arguing that it wanted to prevent this, above all, health crisis from escalating into a serious security crisis. In this context, NATO recognized the need for civil-military cooperation, as well as the opportunity provided by the deployment of military capabilities to address the challenges of the COVID-19 crisis. NATO’s main priority in such a complex situation was to maintain its defensive position of readiness and credibility.

During the COVID-19 crisis, NATO also identified new challenges, which is why the Allies reconstructed the organization’s agenda to make it more resilient to future pandemics. However, official NATO documents concluded that the principle of resistance should be applied, not only to the spread of infectious diseases but also to a wider range of non-traditional threats. NATO identified official and unofficial actions and practices of other important global actors during the COVID-19 pandemic, especially Russia and China, as a threat to its security. More specifically, the Alliance wanted to prevent the spread of misinformation about its ability to contribute to the member states’ response to the COVID-19 crisis, which could undermine its internal unity and ability to fulfil its mandate. Especially since the pandemic has highlighted issues that have existed in the transatlantic community for some time. First of all, the lack of American leadership and mutual trust was noticeable, which further weakened transatlantic ties during the COVID-19 crisis. Also, the fact that the pandemic has a direct economic impact, there are fears that the defence sector will not be immune to the long-term consequences of the global recession.

So, although the coronavirus pandemic posed a unique security challenge, at the same time, this type of crisis does not alleviate international tensions. As a result,
some security threats to NATO have worsened, while new ones have emerged. Thus, the COVID-19 pandemic did not significantly jeopardize the Alliance’s existing operations, missions or responsibilities, but presented a request to adapt to new circumstances, which include not only traditional security challenges, but also non-traditional challenges directly related to human security.

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Abstract: In a year when the United Nations celebrated its 75th anniversary, the whole world was struck by a pandemic caused by the COVID-19 disease. Having in mind the importance of this organization, and, specifically, the Security Council as one of its main bodies, this is a good opportunity to reflect on its work. The international community was surprised that it had to wait until the summer of 2020 to hear from this body. Resolution 2532 was adopted on July 1st, 2020 and, up to this day, it is the only resolution the Security Council devoted to COVID-19. This paper aims to analyse the weaknesses of the Security Council with regard to the UN combat in this time of crisis. To achieve that goal, the author researched the Resolution and its impact, given that the focal point of the Resolution was to stop conflicts around the world. The results demonstrate that perhaps the time has come for the long-awaited reforms.

Keywords: Security Council, COVID-19, Resolution 2532, United Nations, pandemic.

It is without a doubt that international organizations have established their role as a subject in public international law in the 21st century. They serve as an instrument for accomplishing mutual interests between states (Blešić, 2020, p. 207). The United Nations (UN) system is perceived as one of the “most important historical moments in the progressive development of humanity” (Gordanić, 2015, p. 50). It was the accomplishment of dreams that many legal scholars and politicians had before the Second World War. When the UN Charter came to life, it settled the main bodies of

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the United Nations. It would not be an exaggeration to say that the Security Council was, and still is, the most important organ due to its duties and competence. It is said in the Charter of the United Nations that the Security Council must maintain international peace and security, and it has the authority to act on behalf of all members of the United Nations. Chapter VI and Chapter VII are devoted to the competence of the Security Council. Chapter VI deals with the peaceful settlement of disputes so that it helps parties to achieve a solution without using force. On the other hand, Chapter VII provides power to the Security Council to impose enforcement measures. It is the only body in the UN system that has permanent and non-permanent members, and it was designed to be small so that it could be more successful in decision making. (Mingst, Karns, Lyon, 2017, pp. 34-37).

Even though this international organization began its work in times of peace, its greatest influence and power can be seen in times of crisis. But, in the year in which the United Nations marked its 75th anniversary, the world was struck by a pandemic not yet seen. The COVID-19 pandemic made the whole world stop and brought insecurities to the international community. Many countries were, and many are still in lockdown. A great number of questions have been asked. Above all, why was the Security Council silent?

RESOLUTION 2532 – THE SECURITY COUNCIL’S ANSWER TO COVID – 19

When the name of the Security Council is mentioned, most people immediately think of world peace and security. And, truly, the UN Charter does impose those topics upon it. Article 24 is dedicated to the functions and powers of the Security Council, and it is said that the primary responsibility of this body is the maintenance of international peace and security (United Nations Charter, 1945). At the beginning of this paper, it should be brought up that the Security Council has shown an interest in topics other than those in its abundant history. For example, climate change. It could be the perfect example to show how the topic of international peace and security and related issues can be differently interpreted. In 2021, the Security Council did indeed discuss this topic, among others. Even in one of the Security Council reports, the question of whether climate change is a topic relevant to the competence of this body was asked. It was said that the potential consequences might be related to international peace and security and, therefore, this topic was discussed by the Security Council, especially given the fact that “international peace and security” are issues not specified in the charter itself, which leaves space for interpretation (Security Council Report, 2021, p. 1-3). Also, there is a broader perspective on the competence of the Security Council that arose from the concept of “human security” defined in one of the resolutions of the General Assembly as
“an approach to assist the Member States in identifying and addressing widespread and cross-cutting challenges to the survival, livelihood, and dignity of their people” (Security Council Report, 2021, p. 4). The same argument may be used for the COVID-19 crisis. Some of the consequences of the latest crisis are visible, but most of them are still only in discussion. This health crisis has had and will have an influence on the economy, market, human rights, traffic, culture, sport, and perhaps every aspect of life. To be more precise, it may influence international combats and potential conflicts. Therefore, it is a question of international security, and the Security Council may pass a resolution on the matter.

When it comes to pandemics and health issues, this is not the first time that the world and the Security Council have had to face such a crisis. Global health has been a major topic on the agenda several times in the last two decades. First of all, in 2000, the Security Council imposed Resolution 1308 on the topic of HIV/AIDS. This resolution was adopted unanimously, and it was the first resolution in which the Security Council tackled this topic. It was also the first resolution in which the Security Council detected a health issue as a security threat. In the preamble, it was stressed how much the coordinated efforts of the member states and other United Nations organs, specifically the General Assembly and Secretary-General, are important in fighting this disease. The main part of the resolution was dedicated to the personnel of the peacekeeping missions. They ought to have proper education, protection, prevention, and counselling (Security Council, 2000). Then, in 2014, there was the Ebola outbreak in Africa. The focal point of Resolution 2177, adopted in 2014, was the situation in West Africa, in particular in Liberia, Guinea, Sierra Leone and Nigeria. The Security Council encouraged the governments of these countries to establish national mechanisms when it comes to dealing with Ebola but also to widen their politics on public health. Some paragraphs were dedicated to the sanctions and economic isolation of the mentioned countries and communication issues. The Resolution urged the member states to provide medical help and assistance and to implement the International Health Regulations from 2005. Finally, the World Health Organization (WHO) and Secretary-General ought to help and contribute to the fight against Ebola (Security Council, 2014).

The coronavirus outbreak, which happened on January 30th, 2020, was declared a public health emergency of international concern by the Director-General of the WHO. The global pandemic was declared by the World Health Organization on March 11th, 2020. The UN Secretary-General issued an urgent appeal for an immediate global ceasefire which received worldwide support on March 23rd. Successively, on April 9th, the Secretary-General addressed the Security Council to bring its attention to the significant threats to the maintenance of international peace and security posed by the COVID-19 pandemic, “potentially leading to an
increase in social unrest and violence that would greatly undermine the world’s ability to fight the disease”. He pointed out eight risks that have emerged from this crisis. It is important to stress that the Secretary-General wrote in the letter that the engagement of the Security Council would be critical in maintaining peace and security and recalled the crucial role that the Security Council had in the HIV/AIDS crisis and the Ebola outbreak. He called for global and overall solidarity. (United Nations Secretary-General, 2020).

But it was not until July 1st that the Security Council issued Resolution 2532. The delay was caused by a political disagreement between the United States of America and China about the language to be used in the resolution. The United States objected to any mentioning and endorsement of the WHO, as the former Trump administration criticised the way it dealt with the pandemic. In particular, the US mentioned “the charges against the Director-General of the WHO as being under China’s control in the wake of the COVID-19 outbreak”. Furthermore, the US used every opportunity to put China’s responsibility in focus by calling the disease the “Wuhan virus” (Pavone, 2021, p. 2-3). On the other hand, China objected to the US proposal to include an open reference to state commitments to transparency and accountability in the management of the pandemic (Negri, 2021, p. 24). China tried to avoid any criticism of how it handled the first phase of the disease, specifically its lack of transparency and hiding information about COVID-19. The debate in the Security Council discussed how states could prevent human rights violations in emergency health responses, which showed that there had been a shift towards putting human rights at the centre of the global health crisis (Sekalala, Williams, Meier, 2021, p. 4). At the time of the adoption of Resolution 2532, the Security Council non-permanent members were Belgium, the Dominican Republic, Estonia, Germany, Indonesia, Niger, St. Vincent & Grenadines, South Africa, Tunisia, and Vietnam. The resolution was drafted by France and Tunisia.

After reaffirming its role in maintaining international peace and security, the Security Council expressed its great concern given the impact of the COVID-19 pandemic across the globe, especially in countries with active armed conflicts, post-conflict countries or in countries affected by the humanitarian crisis. In the preamble of the resolution, the Security Council recognized the key role of the United Nations in the COVID-19 crisis management when it comes to conflict-affected areas. In that sense, with the efforts made by the Secretary-General, Resolution 74/270 “Global solidarity to fight the coronavirus disease 2019 (COVID-19)” was adopted by the General Assembly in April 2020. This resolution manifested the intention of the General Assembly to show the importance of cooperation and its commitment to helping society in times of crisis such as this. It expressed optimism that the COVID-19 pandemic and the current crisis could be overcome with the help of the United
Nations system and cooperation between states. Another important document that was mentioned in the preamble was the Global Humanitarian Response Plan for COVID-19 by the United Nations. It is a public effort by the United Nations and its bodies and organizations and NGOs to give an adequate response to the pandemic and its humanitarian consequences (Security Council, 2020, preamble). This was the first time that the Security Council has called for a global ceasefire and humanitarian pause connected to a public and international health emergency, and this is where the significance of this resolution lies.

The operative part of the resolution consists of eight paragraphs. After demanding a general and immediate cessation of hostilities, the Security Council specifically called on all parties to an armed conflict to take a pause for at least 90 consecutive days. The goal was to enable the safe and sustained delivery of humanitarian assistance. The foundation for this call lies in the principles of humanity, neutrality, impartiality, and independence, but also in international humanitarian law and refugee law. It is important to note that this call does not apply to military operations against the Islamic State in Iraq and the Levant, Al Qaeda and Al Nusra Front, or anyone associated with them. The Security Council has three requests from the Secretary-General. First of all, the Secretary-General is asked to help ensure that all relevant parts of the United Nations system will accelerate their response to the COVID-19 pandemic, with an emphasis on countries in need. Secondly, he should provide updates to the Security Council on the efforts to address the pandemic in countries where armed conflicts take place or countries that are affected by the humanitarian crisis, but also updates on the impact on peacekeeping operations and Special Political Missions to deliver their priority tasks. Thirdly, the Secretary-General is requested to instruct peacekeeping operations to provide help to host country authorities in combating the pandemic and provide humanitarian access to internally displaced persons and refugee camps, and requests both the Secretary-General and the member states to take all steps to protect UN personnel in UN peace operations. Finally, the Security Council acknowledged the critical role that women played in COVID-19 response efforts and called for concrete actions to ensure the full and equal participation of women and youth in the development and implementation of an adequate and sustainable response to the pandemic (Security Council, 2020, para. 1-8).

Unlike the previous resolutions the Security Council adopted on the topic of public health, Resolution 2532 does not have any reference to the WHO, and it recognizes the United Nations as the main and key actor in the global response to the pandemic. As we can see, the operative part of this Resolution is focused on humanitarian assistance and the Secretary-General’s call for a global ceasefire. But if we compare this resolution to its precedents, when it comes to resolutions that
demand ceasefires and encourage the peace process, Resolution 2532 “did not threaten the application of any enforcement measures on states or targeted sanctions on non-state actors involved in armed conflict for non-compliance with the Security Council’s request” (Negri, 2021, p. 25). Also, due to the delay in the adoption of the Resolution, the practical effect of the combat cessation that was sought was minimal. An example of that is the Nagorno-Karabakh conflict, where the fighting has escalated since the ceasefire of 1994 (Pavone, 2021, p. 2). With the request for the Secretary-General to provide updates to the Security Council about the efforts to address the pandemic in countries where there are armed conflicts or that are affected by humanitarian crises, the Security Council created a formal mechanism for the Secretary-General to monitor or update the Security Council on the implementation of the ceasefire (Pavone, 2021, p. 4).

If we look back a year ago when the pandemic started, the eyes of the international community were pointed at the Security Council. Ever since the United Nations came into existence, this organ has been considered the most important one. This importance arises from the competence declared in Chapters VI and VII of the Charter of the United Nations. Therefore, the reaction was expected, and when it finally came, it did not satisfy the needs of the international community. The pandemic has revealed both the limits of the existing multilateral system and the cost of the failure of such a system (Patrick, 2020, p. 40). In 2020, China was holding the rotating presidency of the Security Council, and it used this opportunity to block the Security Council from considering any resolution about the pandemic, with the argument that public health matters do not fall under the Council’s scope (Patrick, 2020, p. 44).

When it comes to the legal foundation of the Resolution, it is Article 36, para. 1 of the Charter of the United Nations, which gives power to the Security Council to adopt the recommendations in “a situation that might endanger peace and security”. So, this document is in the form of a recommendation based on Chapter VI and, therefore, it is not binding on the parties (Pavone, 2021, pp. 4-5). The Security Council missed the opportunity to qualify COVID-19 as a threat to peace and security and missed framing it under Chapter VII, so it does not contain any enforcement measures. Therefore, these are the weaknesses of the Resolution. It is also important to remember that the UN Charter only gives the possibility for the United Nations to intervene. It does not impose any obligations (Blešić, 2020, p. 328). Despite the formal unanimity in its adoption, Resolution 2532 showed a background of sharp contrasts, rivalry amongst the permanent members and the predominance of domestic interests over the need for coordination. The secondary role of the Security Council in the pandemic is a symptom of the crisis of multilateralism and the current state of global health governance where
international law is weak (Pavone, 2021, pp. 9-10). On the other hand, some authors believe that the Resolution can be binding, even under Chapter VI. Keeping in mind the circumstances of the Resolution’s adoption, such an intent might have been pointed out. However, it was not made explicit, so it is unclear whether it is binding or not (Pobjie, 2020).

**THE UN RESPONSE TO COVID-19 – IS IT FINALLY TIME FOR THE REFORM?**

It is now a definite and well-known fact that the COVID-19 pandemic has caused a crisis with an impact that is yet to be seen. The question arises whether the world and the international community are ready to tackle it. Many authors propose the reform of the UN Security Council, especially in the light of today’s circumstances. It is understood that it is one of the most difficult tasks. The humanitarian tragedies and unresolved conflicts in Syria, Yemen, and Libya show the need to open a dialogue to re-shape the Security Council (Caruso, 2020, p. 4).

The COVID-19 pandemic has put the United Nations to the test, and the global response to the pandemic has demonstrated weaknesses in the system regarding peace and security, sustainable socio-economic development and human rights (Özler, 2020, p. 445). The fact that effective action has not been seen in the face of the COVID-19 pandemic highlights institutional weaknesses in the United Nations Security Council (Özler, 2020, p. 448). Some authors believe that Resolution 2532 has brought new clarity about the reasons for the problem in the Security Council (O’Rourke, 2020, p. 324). For all of the above-mentioned reasons, the (never-ending) discussion about reform has again been brought up.

In the previous decades, there have been many authors and many discussions about this topic. The focal point of this paper is not to discuss the specifics of the reform, but some of the proposals will be addressed. The veto power and the membership are two focal points when it comes to reforming. They have been discussed for several decades but without any significant solution yet.

“It goes without saying that all of us agree on the need to reform and enlarge the Security Council in all respects, in order for this vital United Nations organ to reflect the changes of the modern world... The difficulty is in deciding how this should be brought about... Collective human ingenuity created the United Nations in 1945. That ingenuity is still here and better informed than ever before. What is lacking today is political will.” These are the words of Ambassador Gurirab of Namibia in his Opening Remarks as the President of the General Assembly at the Debate on Security Council Reform in 1999 (Kelly, 2000, p. 319).

There seems to be consent among the UN member states that the reform of the Security Council is required, but it is difficult to achieve agreement on specific
options. When we take a look back at the establishment of the Security Council, it is important to remind ourselves that it is an organ that was designed with the task of preventing another war since the effects of the Second World War were still present at the time of its establishment. One important amendment was made in 1963 when the membership was changed. These changes were insufficient, and criticisms were leveled that the composition of the Security Council does not reflect the geopolitical, economic, and demographic picture of the current international community. But, it is important to keep in mind that finding the appropriate solution is one of the biggest challenges for the international community. The reform, if successful, could contribute to making the actions of the UN and its bodies more legitimate and effective in the future. (Hosli, Moody, O’Donovan, Kaniovski, Little, 2011, p. 165, 183).

The reform issue is not a new one. Back in 1950, Hans Kelsen identified the veto power as the probable cause of future challenges when it comes to the legitimacy of the Security Council (Mälkso, 2010, p. 94). It is important to mention the year 1963 when the first (and so far, the only) reform occurred. That year the Security Council membership increased from 11 to 15, and the voting majority changed from 7 to 9. Ever since 1965, when this reform entered into force, the Security Council has not changed. Also, there are two sets of criticism, one relating to the efficiency of the Security Council and the other relating to the equity in the allocation of power that is or is not achieved (Gould & Rablen, 2017, p. 146). When it comes to the later proposals for the Security Council’s reform, they began in 1979, and those that were proposed in the 1980s usually pointed to the increase in the diversity and representation of the non-permanent members, while during the 1990s, it spread to the more diverse proposals (Kelly, 2000, p. 329). In the field of UN Security Council reform, it is worth mentioning that the General Assembly created the Open-ended working group on December 3rd, 1993. This group began to accomplish its task in 1994 by discussing questions such as existing suggestions about the expansion, making decisions in the Security Council, limitation and cancellation of the veto power, advancement of the work methods, and incorporation of non-permanent members. None of the many suggestions had adequate support (Gajić, 2015, p. 43).

The fact about which many authors agree is that the Security Council reflects the geopolitical reality of 1945 and not of today. Tharoor explains this argument in many ways. For example, mathematically, given the number of the member states of the Security Council in proportion to the number of the member states of the United Nations. Geographically, given the composition of the Security Council that represents the balance of power, it is no longer appropriate. Of course, politically, the five states that have permanent membership enjoy their status based on the
victory won in the Second World War (Tharoor, 2011, pp. 397-398). To make any reform of the Security Council, it is necessary to make a change in the UN Charter, and any amendment requires a two-thirds majority of the overall UN membership. Then it would have to be ratified by two-thirds of the member states, which would usually require a parliamentary procedure. This is the case when it comes to structural reform, but working methods reform can be pursued without charter amendments because the Security Council has competence over its procedures. Therefore, the working method reform is perceived as a better solution, but not the best one. For example, the veto question is a structural one and cannot be changed without the charter amendment (Winther, 2020, p. 74). Structural reform is the most important one. One of the most mentioned changes concerns the allocation of seats to countries from the Global South and that the current permanent members have that privilege based on their victories in the Second World War. The discussions about Global North-South relations have an essential role in the debate about the reform (Winther, 2020, p. 93). There has been a critical perspective of developing countries on developed countries in a sense that institutional change can be used either to back up the principle of equality of states or to further undermine it, giving the opinion that there has been a competition between countries based on power and wealth (Mälkso, 2010, p. 101).

So, the Security Council has five permanent member states. These are the People’s Republic of China, France, Russia, the United Kingdom of Great Britain and Northern Ireland, and the United States of America. Apart from having the permanent feature, these countries have veto power. This gives them the capability to prevent adaptation of any resolution, and it has caused many issues. The most important thing is that this veto power is in contradiction with Article 2 of the Charter, which proclaims the equality of the members. The essence of the Security Council is privilege over egalitarianism, said Mälkso (Mälkso, 2010, p. 97). It has also caused issues since the veto power has been used arbitrarily, and so one negative vote from one of these countries can prevail over all other votes. There has been a great deal of discussion about this power, and it is believed that “the five permanent members no longer represent the most stable and responsible United Nations members and that their veto power slows down and even prevents the most important decisions being made on matters of international peace and security” (Gorđanić, 2015, p. 52). As we could see in the previous chapter of this paper, the rivalry between the great powers had once again resulted in adopting a resolution that was meant to be a compromise and therefore not as efficient.
CONCLUDING REMARKS

The primary obstacles to the UN’s reform are political above all. The biggest disagreements derive from the relations between strong and weak states. While everyone agrees that the United Nations is in need of reform, they do not agree on the course of the reform. One of the topics that they do have in common is the Security Council’s reform. This topic is the most controversial, specifically when it comes to membership and voting rules in the Security Council. When it comes to membership, the consensus is that there is a need to augment the geographic representation, but it ought to be done so that the Security Council stays small in size and, therefore, efficient (Mingst, Karns, Lyon, 2017, pp. 56-57).

There has been a lot of commentary on whether 2020 will have transformative effects on world politics. Drezner pointed out years such as 1648, 1815, 1914, 1945, and 2008 as the years used for periodization in international relations. He asked a question about whether 2020 would be viewed as another point for periodization (Drezner, 2020, p. 18). It is inevitable that the COVID-19 pandemic will have its consequences on every part of our lives, including international relations, but will they be enough for the big reforms to arrive? When it comes to pandemics and international relations, the relationship is usually perceived as reciprocal. Most of the pandemics in the last century were short-term and did not have global effects, such as Ebola, SARS, or Zika. One of the reasons these diseases have not had a great influence on international relations must be the progress made in medicine and treatments (Drezner, 2020, p. 25).

Jubilees can influence international organizations as well. So, the year 2020 was not only the year of the COVID-19 pandemic but also the year in which the United Nations marked its 75th anniversary. On that occasion, a global survey was conducted. It included more than 1.5 million people in 193 countries. The survey showed that our world is fragmented but also that the world is united regarding post-COVID recovery. Most people want better access to health care above all, and most of the respondents believe that international cooperation is the most important and look to the United Nations as a leader in addressing challenges in an effective way (Schlein, 2021). In January 2021, five new countries formally joined the Security Council. Those are India, Mexico, Norway, Ireland, and Kenya (AFP, 2021). As the Secretary-General of the United Nations pointed out in April 2020, the role of the Security Council in maintaining international peace and security was perceived as the most important one. That shows us the amount of trust that the Secretary-General put in this body. Nevertheless, just a couple of months later, we could see that maybe that trust was not justified.
It is not unusual for the eyes of the international community to be focused on the United Nations. It often happens in times of crisis. Usually, states tend to take advantage of the moment, so reforms are suggested (Krivokapić, 2015, p. 10). Looking back at the previous times, most authors tend to be pessimistic when it comes to the Security Council’s reform. There has been a chance for this to happen many times, but the bullet always misses. Many of them still believe that reform is unlikely to happen. But, what if the year 2020 has left some changes in the world? What if it has demonstrated how unpredictable everything is and that the world is indeed changing? Therefore, the door to reform should not be closed. The results of the mentioned survey can bring optimism. There is an old saying that even after the darkest night, the sun will rise again. For now, let us wait for that sun that is already breaking through and prepare to use the opportunity to reform.

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THE COVID-19 PANDEMIC AND THE EURASIAN ECONOMIC UNION: STRENGTH TESTS AND LESSONS FOR THE INTEGRATION PROJECT

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Abstract: The coronavirus pandemic is not only in the scale of human and economic losses but in the ability of both national and integration institutions to withstand the pandemic and the economic crisis. Against the backdrop of the current crisis caused by the COVID-19 pandemic, countries are becoming increasingly aware of the need to join forces within the framework of integration organizations to solve global problems and find answers to great challenges. The latter creates significant risks for society, the economy, and the public administration system, but at the same time opens up new opportunities and prospects. The Eurasian Economic Union is no exception.

The author conducted a study of the measures taken by the member states within the EAEU to prevent the spread of coronavirus infection and overcome the negative consequences caused by it.

The work includes the study of the joint activities of the EAEU and the member states, within which, after a pause, the “emergency” regime was switched on and rhythmic work was initiated. The results of the research indicated the need for increased coordination between the Eurasian Economic Union and its member states in response to COVID-19 and the development of a more “visible” and comprehensive program of action and its implementation, which would contribute to the formation of a more holistic response of the entire organisation to new challenges. New crisis phenomena may await us, in connection with which the EAEU needs to have an adequate anti-crisis strategy for future activities ready.

Keywords: Eurasian Economic Union, Eurasian integration, COVID-19, pandemic, interaction, regional integration, emergency regime.

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INTRODUCTION

At all times, human health has been considered one of the most important values of life, as the most personal good. The ancient Romans used to say, “Valetudo bonum est” (health is the greatest wealth). In the modern world, full of numerous natural and anthropogenic threats and cataclysms, especially in the light of the ongoing COVID-19 pandemic, human health is becoming even more important and relevant.

In general, health is interpreted as a natural state of the body, characterized by its balance with the environment and the absence of any painful changes. Human health is determined by a complex of biological (hereditary and acquired) and social factors. The latter are so important in maintaining a state of health or in the appearance and development of a disease that it is written in the preamble of the Constitution of the World Health Organization: “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity” (WHO, 1946). This definition of the concept of “health” is the clearest, understandable, and complete one and includes, first of all, the biological, social, and psychological aspects of this problem.

On March 11, 2020, the new coronavirus COVID-19 was declared a pandemic (WHO Director-General, 2020). This means that this new virus and the disease that it causes have spread on a global scale. A. Guterres, Secretary-General of the United Nations (UN), noted that the current pandemic was the biggest crisis in global health over the past 75 years (Guterres, 2020). The previous disease that had the status of a pandemic was swine flu, which lasted from 2009 to 2010. Why is this new coronavirus causing so much fear?

First, it is the speed of its spread and the long absence of medicines with proven clinical efficacy. It has been confirmed that COVID-19 is dangerous for the elderly and people with chronic diseases. These categories are already vulnerable, and with the spread of COVID-19, their vulnerability has increased significantly.

Secondly, it is the vulnerability of national health systems. Many countries have exceeded their capabilities (material resources, medical personnel) to provide medical care to people who need it. Philosophers and representatives of bioethics have already started a discussion about determining the priority in the provision of medical care (see e.g., Bagenstos, 2020; Holm, 2020). At the same time, A. Guterres notes that the costs of health protection should be increased to meet urgent needs with full respect for human rights (Guterres, 2020).

Thirdly, that is because of the unprecedented measures that countries implement in order to protect the health of their citizens: borders are closed, air traffic is canceled, emergency regimes are declared. A number of freedoms secured by human rights are subject to restrictions, in particular, on free movement.
Fourth, COVID-19 will have a significant impact on the global economy — the sphere of production, international trade, logistics, and business. A significant number of people should support their business or, if they are left without a job, count on their savings and social assistance from the states.

THE PANDEMIC IN THE INTEGRATION CONTEXT

The modern world is globalized and integrated. Freedom of movement is an opportunity to get to another place on the continent within a day through air communication. COVID-19 was detected in Wuhan, the Hubei Province in the People’s Republic of China, at the end of December 2019. The quarantine was introduced about a month later (January 2020), and about three months after the COVID-19 infection was detected, it was confirmed on all continents. Of course, globalization and international integration have become one of the factors contributing to the spread of COVID-19 around the world. The global nature of the epidemic was only a confirmation of the pervasive nature of globalization and regional integration, without which there would have been no instant spread of the disease, as well as the reaction that followed it (Gromyko, 2020, p. 7).

Attention should be paid to the International Health Regulations (hereinafter referred to as the IHR) (WHO, 2005), which, by their legal nature, are an international treaty, a binding document for all UN member states. The IHR are focused on preventing the most serious risks in the field of health of cross-border nature (Ferhani, Rushton, 2020, p. 460).

The IHR determines what constitutes a major health-care emergency on a global scale. Namely, an extraordinary event: 1) carries a risk to the health of the population in other states as a result of the international spread of the disease; and 2) may require coordinated international measures in response. COVID-19 corresponds to these characteristics, and that is why it belongs to the category of emergency situations in the field of healthcare of international importance. Analysing the IHR, it should be noted that measures at the level of public health should be proportionate to the risks to public health and limited by them, should not create excessive obstacles to international transport and trade (WHO, 2005). It is this proportionality that is criticized by some countries: measures to prevent the spread of COVID-19 are not commensurate with the consequences for the economy and society.

In any case, the deepening of integration processes has led to the significant growth of international organisations, which has contributed to mobility among people. In this context, health care, as such, is no longer limited by state borders. The growing mobility of people, one way or another, leads to the emergence of issues
both in the field of social security and in the field of medicine. The Eurasian Economic Union (hereinafter referred to as EAEU) is no exception in this regard. The main purpose of the creation of the EAEU was, on the one hand, to comprehensively modernize, increase competitiveness and cooperation between the national economies of the member states. On the other hand, it is the promotion of stable development of countries to improve the standard of living of the population by ensuring the free movement of goods, services, capital and labour.

The Treaty on the EAEU, which entered into force on 1 January 2015, forms common economic (basic) values, regulates business processes in detail, and creates a favourable organizational and legal environment for national investors from the EAEU member states in the Eurasian space (EAEU, 2014). However, there are certain circumstances of objective reality that can cause economic harm to economic interests despite the strict regulatory regulation of the impact of unfavourable anthropogenic factors. Such factors include force majeure circumstances (natural and man-made emergencies, as well as circumstances that form a situation in a certain territory, often referred to as an emergency).

On the EAEU territory, equality is observed in the legal relations of economic investors from the member states when compensating for damage caused by civil unrest, military actions, revolutions, riots, the introduction of a state of emergency or other similar circumstances (paragraph 77 of the Protocol on Trade in Services, establishment, activity and implementation of investments — Annex No. 16 to the Treaty on the EAEU). At the same time, according to the analysis of the annexes to the Treaty on the EAEU, natural and man-made emergencies are among the force majeure circumstances that can cause not only losses to economic entities but also lead to crisis phenomena in national economic systems. The regulation of the specifics of compensation for damage and collective response to such emergencies is not yet provided for by the agreements within the framework of the EAEU.

The EAEU Treaty imposes certain obligations on the EAEU member states in the field of joint actions in the event of an emergency and activities to prevent it. Thus, by Annex No. 12 to the Treaty on the EAEU (Protocol on the application of sanitary, veterinary-sanitary and quarantine phytosanitary measures), the member states are obliged to take coordinated measures aimed at preventing the spread and eliminating the consequences of sanitary infections and emergency situations, as well as acts of terrorism with the use of radiation, chemical and biologically active substances.

However, at present, the Decree of the Government of the Russian Federation of 21 May 2007 No. 304 “On the classification of natural and man-made emergencies” (Government, 2007) (unlike the similar decree of the Government of the Russian Federation of 13.09.1996 No. 1094, which has lost its force) does
not classify a cross-border type of emergency situation - the damaging factors that go beyond the borders of the Russian Federation, or that occur abroad and affect the territory or economic interests of the Russian Federation. In addition, technical regulations and international agreements on a joint response to emergencies and circumstances have not been developed within the framework of the EAEU at the moment. Thus, the Russian national emergency management system in the field of collective actions to neutralize threats and eliminate the adverse consequences of the emergency situation developing on the territory of the EAEU requires greater legal regulation (Betskov, Tagirov, 2017, p.8). Such a situation significantly affects the entire integration progress, as well as interaction both with the Union itself and with the member states, reducing the effectiveness of the fight against emergencies and of the legal mechanisms for protecting the economic interests of subjects in the EAEU space.

THE EAEU MEASURES TAKEN IN RESPONSE TO THE COVID-19 PANDEMIC

The corona crisis became a challenge for Eurasian integration, but it did not stop it. The work of the institutions has been adjusted to take into account the need to resolve urgent problems of mutual trade. The efforts of the Eurasian Economic Commission (hereinafter referred to as EEC), together with the national governments, were aimed at ensuring economic stability and combating the spread of infection. Against the background of the pandemic, the priority of cooperation between the EAEU member states has clearly identified itself — the regulation of the movement of factors and the results of economic activity (Kondrat’eva, 2020, p. 5). In the context of the COVID-19 pandemic, instruments for regulating foreign trade in goods have become a means of ensuring the food and medical security of the EAEU member states. Initially, on March 16, 2020, the EEC Council adopted its Decision No. 21, providing for the exemption from import customs duties of goods imported to prevent and prevent the spread of the coronavirus infection on the territory of the EAEU (EEC, 2020a). The decision applies to personal protective equipment, disinfectants, diagnostic reagents, certain types of medical equipment and materials.

On 24 and 31 March 2020, the EEC Board adopted decisions № 41 (EEC, 2020c), 42 (EEC, 2020d), 43 (EEC, 2020e), aimed at temporarily banning the export of personal protective equipment, protective and disinfectants, medical products and materials from the EAEU countries. On 25 March 2020, the EEC Council also adopted Order No. 11 on joint and coordinated actions of the EAEU member states on a wide range of issues in the implementation of such measures (EEC, 2020b). In particular, the member states agreed to exchange information and conduct
operational consultations on the actions taken and national regulatory legal acts adopted in order to respond to the spread of coronavirus infection, coordinate the activities of national authorized bodies in the field of health care on an ongoing basis and ensure the sanitary and epidemiological well-being of the population.

On 10 April 2020, the members of the Eurasian Intergovernmental Council approved a set of measures to be adopted to ensure the vital needs of the population, support mutual trade and free movement of goods in the conditions of the COVID-19 pandemic and create conditions for subsequent economic growth (Eurasian Intergovernmental Council, 2020). There are two types of measures.

First, a package of urgent anti-crisis and stabilization measures, including:

– organisation of interaction of the relevant authorized bodies when carrying out sanitary and epidemiological measures to prevent and minimize the consequences of the spread of coronavirus infection
– creating a green corridor for the supply of critical goods,
– introduction of uniform time restrictions on the export of critical goods to third countries
– operational preliminary consultations at the level of members of the EEC Council on draft national legal acts aimed at introducing time restrictions related to the exceptional need to respond to the spread of coronavirus infection
– consultations of authorized bodies in the field of technical regulation
– temporary reduction or zeroing of import customs duties on components and materials for specific industries, taking into account their economic and social significance, etc.

Secondly, measures aimed at creating conditions for recovery and ensuring further economic development, including:

– ensuring macroeconomic stability and the sustainable functioning of financial markets and payment systems
– support for real sector enterprises
– the further digital transformation of trade, including wider use of electronic bills of lading and accompanying documents, digitized interaction of logistics operators, wider use of electronic digital signatures and technologies for automatic registration and release of imported, exported, and transit goods
– implementation of joint measures to create antiviral drugs and vaccines, as well as to establish their mass production
– maintaining and expanding access to public procurement for the functioning of the common market of the Union (ICLRC Report, 2021, p. 52-53).
Some of the taken measures were of restrictive nature and were aimed at preventing the outflow of disease prevention and food products from the territory of the EAEU member States. Another set of measures was aimed at providing foreign trade participants with a number of benefits and simplifications in order to stimulate the influx of high-demand goods in the context of a pandemic, as well as medical equipment, medical products and medicines. During the aggravation of the situation with the coronavirus, a temporary ban on the export of personal protective equipment, protective and disinfectants, medical products and materials, as well as certain types of food products was introduced at the level of the EAEU.

As for the second set of measures to simplify trade procedures, two sets of tariff benefits were introduced at the level of the EAEU in the form of full exemption from payment of import customs duties (for goods of critical import and goods imported to prevent and prevent the spread of coronavirus infection). It is worth noting that in this area, the EAEU governing bodies acted more decisively than the European Union: the proposals of the European Commission on the introduction of a full or partial exemption from import customs duties and VAT for certain goods needed in the context of a pandemic were of recommendatory nature (IRIP VAVT Report, 2020, p. 11).

In general, perceiving the pandemic as a test for the EAEU, the Heads of the member states confirmed their readiness to continue cohesive work to eliminate the negative consequences of the COVID-19 pandemic, maintain the achieved level of integration cooperation, and the further economic development of the member states of the Eurasian Economic Union (EAEU Heads of State, 2020, April 14). And, indeed, despite the difficult situation, all the bodies of the EAEU during this period not only worked to overcome the crisis caused by the COVID-19 virus but also continued their routine, daily activities to promote the integration agenda of the organisation. For example, on May 19, the draft strategic directions for the economic development of Eurasian integration until 2025 were generally approved at the EAEU summit and eventually adopted in January 2021 (EAEU summit, 2020). The planned development strategy should lay the foundation for the activation of import substitution processes in the EAEU countries, the development of industrial localization and the promotion of joint initiatives with a high integration component. Thus, integration during the pandemic did not slow down for a moment. On the contrary, the entire Union, as well as each individual state, were mobilized and focused on effective joint work (Slutsky, Khudorenko, 2020, p. 125).

OVERVIEW OF MEASURES TAKEN IN THE EAEU MEMBER STATES

Along with the measures described above, the EAEU member states separately addressed the following non-tariff barriers to exports:
– a ban on exports. It is important to note that some countries prohibited the export not only within the framework of the customs export procedure, but also other customs procedures: for example, in Belarus, there was a temporary ban on the export, re-export, processing outside the customs territory, temporary export of personal protective equipment, protective and disinfectants, medical products and medical equipment;
– quantitative export restrictions (introduced by Kazakhstan and Russia). For example, Russia imposed temporary quantitative restrictions on the export of grain crops;
– permissive export procedure (introduced by Armenia in relation to medical products). It involves obtaining a license or permission to export goods that are subject to restrictions.

It should be noted that the measures of the majority of the EAEU member states restricting exports were introduced against all third countries, including, unfortunately, the states of the Union. Only Russia has excluded the EAEU members from the temporary restrictions on the export of grain crops outside the country.

At the same time, the analysis of trade statistics shows that Belarus and Kazakhstan accounted for a significant share of the deliveries of goods to the Russian market necessary to combat the pandemic\(^2\) for which export bans were imposed (EEC, 2021). For example, 10.4% of other medical headwear on the Russian market, according to the results of 2019, came from the Republic of Belarus, and the Republic of Kazakhstan accounted for 6.7% of all deliveries of protective medical clothing.

With regard to imports, the EAEU member states imposed bans and restrictions with reference to the sanitary and phytosanitary measures. In particular, Russia had a temporary restriction on the import and transit through the country of all types of exotic and ornamental animals from China (on 19 May, the restriction was lifted).

It is important to note that during the “peak” of the coronavirus pandemic, there was a discrepancy in the actions of the EAEU member states regarding the transit of goods within the Union, which led to the formation of additional barriers.

Thus, Armenia demanded compliance with the self-isolation regime by international drivers. Belarus has limited transit time: road transport transiting through Belarus has to leave its territory no later than the next day.

\(^2\) The World Health Organization has identified 17 products that are considered key in the fight against the COVID-19 pandemic. These include: diagnostic and therapeutic supplies, including enzymes, hygiene products (liquid soap and hand sanitizers), personal protective equipment, including gloves and medical masks, and personal protective equipment such as oxygen concentrators and respirators.
The EAEU member states have also introduced measures to simplify trade procedures at the national level. A common practice has become the launch of “green corridors”, which allow national participants of foreign economic activity to avoid some customs formalities and promptly carry out customs clearance of the imported consignment.

For example, in Kazakhstan, the “green corridor” granted importers of socially significant goods an exemption from inspection, examination, control of customs value. In Russia, the “green corridor” was opened for essential goods and food: according to the order of the Federal Customs Service of Russia, the customs authorities had to ensure a priority procedure for performing customs operations in respect of such goods, speeding up their release into free circulation.

In some EAEU member states, the fiscal burden on foreign trade participants has been reduced. For example, in order to stabilize the food market and the agricultural and industrial complex in the conditions of the pandemic, Kazakhstan resorted to tax incentives. Thus, the VAT rates on the import of socially significant food products were reduced, and the import of biological assets of the agro-industrial complex (cattle and breeding chickens) was exempt from VAT.

In Russia, in addition to the tariff benefit (exemption from payment of import customs duties), which was introduced at the level of the EAEU in respect of goods imported for the prevention and control of coronavirus infection, the Government of the Russian Federation approved a list of medical goods that were also exempt from paying import VAT.

CONCLUSION

The legal regulation of various issues, including healthcare and overcoming the pandemic, within the framework of international regional integration organisations differs depending on the level of integration of the member states of the relevant entity. There are no such mechanisms in the EAEU since this integration organisation is focused more on the freedom of trade between the member states and the implementation of a coordinated policy in economic sectors than on health issues. So, at the level of the EAEU, measures were taken, on the one hand, to abolish duties on the import of goods intended to prevent the spread of COVID-19 on the territory of the EAEU, and on the other, to introduce a temporary ban on the export of such goods from the EAEU countries.

At the same time, measures to help stabilize the economic situation at the level of the EAEU were taken. Nevertheless, it seems that the establishment of more detailed regulation at the supranational level regarding the adoption by states of agreed measures in the areas of trade and economy during emergencies, and then
their national implementation, can contribute to a more effective response to challenges such as the COVID-19 pandemic in the future. At the same time, the effectiveness of the implementation of these measures is not obvious. There is no information about the intensity of communications between the EAEU countries in the context of a pandemic.

It should also be noted that during the aggravation of the situation with coronavirus, the restrictions were imposed on the export of personal protective equipment and food at the level of individual EAEU member states, which were applied to all third countries, including other EAEU member states. It seems that the issue of introducing such measures in emergency situations should be coordinated promptly with other members of the EAEU, so as not to cause an aggravation of the shortage of necessary goods in the Union space but, on the contrary, to ensure the optimal distribution of such goods. In case of the impossibility of preliminary approval, the interested members of the EAEU should be given the opportunity to promptly hold consultations with the state of the Union that introduced the restrictive measure.

The inconsistency of the actions of the EAEU member states regarding the transit of goods during the pandemic led to the formation of additional barriers that prevent the free movement of goods. The resolution of such a situation is possible in the case of expanding the competence of the EEC as the main regulatory body of the Union. The institutional structure of the EAEU is determined by the principle of the institutional balance of national and supranational interests, which is inherent in the Union. Moreover, such a balance should not be unchanged and should include the evolution of the legal status of its bodies. This should correspond to the vector of development of regional integration, the goals set for the Union by the participating states, as well as the principles that are laid down in the basis of its functioning, especially in the context of the ongoing COVID-19 pandemic. Nevertheless, certain innovations are necessary besides the above-mentioned expansion of the powers of the EEC. The introduction of elements of accountability of the state authorities of the member states to the Commission, the introduction of elements of responsibility of the participating states for non-fulfilment of their obligations arising from membership in the Union should help in the successful development of the Eurasian integration project and ensure its resilience.

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CYBER DIPLOMACY AND THE COVID-19
– WHAT IS CYBER DIPLOMACY AND HOW WAS IT AFFECTED
BY THE COVID-19 ERA?

Tal Pavel1

“Diplomacy’s lingua franca in the 19th century was French; in the 20th, it was English. The lingua franca of diplomacy in the 21st century is the mastery of digital tools and platforms”

Abstract: The COVID-19 pandemic has shaken our world since the beginning of 2020 and has had a wide impact on all aspects of life worldwide. Most of these consequences are international and transnational due to the wide scope of this pandemic, and international cooperation was often required even to assist and deal locally with its consequences. That happened mostly due to the limitations of a single country to deal with this pandemic and its far-reaching consequences, as well as the fact that among these were also a variety of cyberattacks against a large number of countries and a wide range of sectors, with an emphasis on the healthcare sector. Therefore, the place of diplomacy and an emphasis on cyber diplomacy is important in dealing with the consequences of the COVID-19 era and with cyberattacks that have occurred in its wake. Thus, this study analyses the extent of the impact of the COVID-19 pandemic on international cyber diplomacy, including the change in the conduct of relevant bodies and institutions, as well as cyber diplomacy decisions and policies to address cyberattacks related to this pandemic. The study concludes that cyber diplomacy, which deals with both the digital aspects of diplomacy as well as the diplomatic management of cyber policies and events, was designed and modified as part of the effects of the COVID-19 pandemic. This includes a greater reliance on digital means of managing diplomatic work over physical encounters, as well as the need to use cyber

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diplomacy to exercise international responsibility in this age of cyberattacks, particularly in the medical sector.

Keywords: COVID-19, cyber, diplomacy, EU, UN, Policy.

INTRODUCTION

Among the many changes brought about by the COVID-19 pandemic around the world since 2020 are the lockdowns imposed by many countries on their citizens in an attempt to reduce the scale of infection, which led to a transition even sharper than on normal days to an online remote-working model. Along with the many conveniences and opportunities, this approach has created numerous challenges, including those of information security and cybersecurity because a large number of employees have been sent to work from their homes, using unsecured work environments such as private email, internet and unsecured home computers, all this for connecting to work computers and connecting to sensitive files and data. Along with this, there has been a sharp and continuous increase throughout 2020 in cyberattacks, with an emphasis on the healthcare industry around the world. In this context, a variety of institutions were attacked, including critical infrastructure, especially hospitals, medical research institutions, drug manufacturing companies, as well as relevant government agencies by a variety of means: from disabling services by various means, including infidelity attacks, to attacks designed to steal data and important information related to and dealing with this pandemic.

The COVID-19 era demonstrates the impact of diverse global events, as well as their effects on cyberspace, and, therefore, the need for cyber diplomacy activities at the regional and international levels as part of the measures to address these crises, including the involvement of international organizations such as the UN, OSCE, G20 and the EU. This is to formulate new diplomatic norms and rules of cyber conduct during this and similar crises having a worldwide impact. All this is now happening while pointing accusing fingers at criminal elements as well as several state actors who are allegedly behind these attacks.

WHAT IS CYBER DIPLOMACY?

To examine the implementation of cyber diplomacy in the COVID-19 era, one must try and answer the question “What is cyber diplomacy?”, and formulate its definition. Examination of various sources reveals that this is not a trivial matter since different terms refer to different areas of practice under these definitions, with the terms most often used: Cyber diplomacy, Digital diplomacy, e-diplomacy.
The affinity for the connection between new technology, the Internet, cyber and diplomacy can be divided into three stages: (1) Publications from the first decade of the 21st century addressing the two-way affinity between diplomacy and new technologies on the one hand and the Internet and the digital transformation of diplomacy on the other hand: their impact on goals, tools and diplomatic activity in the face of such diplomatic activity on the Internet. But all this is without addressing issues related to cyberspace. (2) With the beginning of the second decade of the 21st century and the transformation of cyberspace, its opportunities and threats, internationally and politically, these issues were addressed in the technical aspects of this space as external aspects of domestic policies, including developing cyber capabilities, improving government coordination and deepening cooperation with the private sector. (3) Later, the domain of cyber diplomacy moved from the local to the international level and gained recognition as a major issue in foreign policy due to many events, meetings and issues in cyberspace that required a diplomatic response.

All of these are reflected in the use of the various terms and in the change that has taken place in their usage over the years. Similar to the three steps described above, various researchers propose the following distinction. Digital diplomacy and e-diplomacy refer to the use of digital tools and methods for diplomatic purposes (e.g., the use of digital platforms and tools such as Big Data and data mining), including the use of digital means, such as social networks, by diplomats and foreign ministers. On the other hand, cyber diplomacy refers to the use of diplomatic tools and mindset to solve issues that arise in cyberspace (for example, Internet governance). With the increasing use of technologies on which cyberspace and the Internet are based, the need and importance of cybersecurity and the freedom of the Internet are also increasing. Several researchers have well defined the nature of cyber diplomacy, including “if the cyber dimension is the core reason for the diplomacy, it is cyber diplomacy”, as well as the definition that cyber diplomacy constitutes diplomacy in the cyber domain and “the use of diplomatic resources and the performance of diplomatic functions to secure national interests in cyberspace”.

The roots of cyber diplomacy are found in “standard” diplomacy. It is primarily state-led. However, it is a combination of two worlds: diplomatic-political and technological-cyber. It is a developmental stage in public diplomacy and is therefore also called public diplomacy 2.0. Thus, in recent years, a new role has been created called “cyber diplomats”, who also constitute “cyber ambassadors” of their countries and deal with, among other things, the increasing politicization of cyberspace, for instance, the inclusion of cyber issues into policies dealing with internal and external security, critical infrastructure, and human rights. As well defined by Heli Tiirmaa-Klar, the ambassador of Estonia for cyber diplomacy, “as nuclear engineers do not
represent states at the non-proliferation negotiations, likewise technology experts should not drive the issue of cyber diplomacy” and yet, “Like nuclear-era diplomats, they should understand the effects of destructive cyber tools and how critical infrastructures could be used for paralysing states in future conflict”. This is also because traditional diplomacy is not necessarily appropriate for the type of diplomacy that has changed in a world where cyberspace is a powerful weapon between countries, which requires relevant diplomatic activity to build trust, prevent escalation or misattribution of cyberattacks. This is in addition to activities to create norms, binding and non-binding, for the responsible behaviour of a country in cyberspace through the activities of bilateral, multilateral and regional bodies. Alongside official and government diplomacy, there is the activity of non-state actors, including companies and NGOs, mainly because about 80-90% of critical cyber assets belong to the private sector. The vulnerabilities of those assets and the consequences of harming them should be considered too. These players all work together on issues such as multilateralism, security, capacity building, cybercrime warfare, Internet governance, freedom of expression and online human rights, cyber espionage, regulation of cyber warfare, and issues that form the basis of foreign relations in the cyber domain, with different players emphasizing different aspects. All this is to create a global consensus on norms of responsible state behaviour in cyberspace and with an emphasis on global norms for this purpose over the individual ones. These are reflected in national strategy documents in the field of cyberspace, including cyber security, cybercrime, trust-building, Internet freedom, and Internet governance. In this context, the document titled “US International Strategy for Cyberspace”, which will be mentioned further on, and published in 2011 by the Obama administration, became the world’s first strategy document dealing entirely with international aspects of cyber issues. It outlined, for the first time, a clear strategy for the use of diplomatic tools and resources to achieve goals related to cyberspace.

From the variety of sources, it can be learned that the affinity between the world of diplomacy and the digital world developed alongside the development of the digital world. Its great importance has begun to influence more and more countries, their policies, and conduct. Thus, initially, when affinity focused on the use of the digital world and social networks as a means of managing and promoting diplomacy, the prevalent use was e-diplomacy as well as digital diplomacy. However, as the importance of cyberspace and the awareness of its many and varied effects on the life of a modern country increased, so did the use of the term cyber diplomacy, which describes the shift from using the digital world for diplomatic needs to using the diplomatic world to meet cyberspace needs. So, all in all, it can be said that in “digital diplomacy”, the digital world is a tool for the use
of diplomacy, while in “cyber diplomacy”, diplomacy is a tool for solving threats and problems in cyberspace as well as securing national interests in that space.

CYBERATTACKS DURING THE COVID-19 ERA

The COVID-19 era has created a wide range of changes, challenges and threats for all of humanity in every country and sector. This includes a sharp increase in cyberattacks during 2020, one that is directly related to the pandemic and its consequences, which can be examined in several aspects: (1) the type of attack, (2) the attacked, and (3) the attacker.

TYPES OF ATTACKS

When analysing the types of cyberattacks that occurred during the COVID-19 pandemic, it seems that these were many and varied types that were carried out by a variety of attackers who took advantage of several factors: (1) The transition to the remote working model due to the lockdowns imposed by many countries in which workers were sent to work from home using unsecured means, including email, personal computers and home Internet connections, to connect to work computers and access sensitive files and information; (2) a lack of appropriate awareness and sufficient training for these employees regarding the information security dangers that exist in the remote working model, as well as the way to deal with these threats; (3) the uncertainty, fear and apprehension of the unknown among the entire population, with an emphasis on layoffs or a reduction in the wage level among workers; (4) The need for information on the pandemic, its consequences and the means to confront it, including appropriate equipment and the development of vaccines. In this context, a variety of malicious attacks of cybercrime were carried out for many reasons, which included: ransomware; various scams, including those allegedly related to financial aid and grants, and trafficking in counterfeit medical equipment; data theft, leaking and trading; distribution of malware; malicious emails and phishing; fake news campaigns and the dissemination of conspiracy theories, known as Infodemic; theft of intellectual property, most often associated with dealing with the pandemic and developing a vaccine. In all of these, there has been an unprecedented increase worldwide over the entire year 2020, as reported by a variety of sources and publications.

THE ATTACKED

In many cases, the target of various attacks was organizations and their employees who, due to the lockdowns during the COVID-19 pandemic, moved to
work in a remote working model. Indeed, a variety of publications report a sharp increase in such attacks, as well as in the sense of insecurity of employees working from home and the dependence on various third-party suppliers external to their organizations. At the same time, the healthcare sector has been the most attacked since the beginning of 2020. These attacks were mostly executed by state actors, to the point when, for example, the International Committee of the Red Cross called for them to stop attacking this sector.

**THE ATTACKER**

Along with criminals who took advantage of the changes and security breaches created, especially in the remote working era (Associated Press, 2020), various countries have been accused of involvement in carrying out cyberattacks around the world against laboratories, research institutes, hospitals, drug makers, universities in search of information, equipment, medicines, vaccines and everything else necessary to help them deal with this pandemic.

**CYBER DIPLOMACY DURING THE COVID-19 ERA**

Analysis of the various publications and studies on cyber diplomacy in the COVID-19 era reveals that this field may have changed more than most professions during this pandemic. The reference is indeed divided into two aspects of the essence of cyber diplomacy: (1) The cyber challenges posed by the pandemic and its consequences, (2) the use of digital tools, which have become more common due to the limitations posed by the pandemic, for improving diplomacy work.

The main characteristic of the COVID-19 era is the digitalization of economies and societies. It has brought a huge increase in the use of digital services to create online communication for various needs in a focused manner and as part of an overall policy, including teaching, work (individual or group), banking, health, along with an online alternative to physical meetings. It has created a host of threats and dangers to information security, privacy and even critical infrastructure on the part of a variety of players. It has also heightened mistrust and suspicion between different countries in light of various online attacks and hostile actions that some countries have committed during this pandemic. Among other things, countries aim to advance their various national interests as well as foreign policy goals, or even cyber revenge on the political or military activities of other countries in this era. Various researchers point out that the fog that accompanies these operations, which were below the threshold of armed conflict even before the COVID-19 era and even more so during this period, creates more grounds for conflicts, which requires regional and
international cyber diplomacy efforts to create a more secure environment, even in cyber aspects, while emphasizing the activities of smaller countries.

In addition, various researchers and experts address the changes that have taken place in the work of diplomacy in this age, using digital platforms that allow for greater ease, benefit and efficiency, without cost constraints, travel expenses, logistics and time constraints, while improving verbal and written communication skills. This includes the possibility of expanding the activity to a diverse international audience, with the participation of senior officials, linking many countries, in a wide range of fields and sectors. An example of this is the marine biological diversity of areas beyond national jurisdiction (BBNJ), in which regional and international discussions were held, with the participation of NGOs together with several governments, as well as the conduction of surveys and studies. These moved to an online environment instead of the physical one, with a drastic drop in the rate of face-to-face meetings, as opposed to a significant increase in the use of email, virtual meetings and instant messaging applications. This is in addition to the expected effect of the transition from physical meetings to the use of online means on the results of BBNJ negotiations and the assumption of NGOs that such online negotiations will be more inclusive in the face of state players who have rejected this assumption. Various researchers and experts expect that even with the end of this crisis, the intensified digital use during the COVID-19 crisis will be a lesson for diplomats to “think digitally” and improve their tools and knowledge on this matter, so they can better help their countries to deal with future global crises. However, there are many concerns, including the main claim that online communication is not a substitute for physical presence and the personal aspect of diplomacy, for example, holding the UN votes by sending e-mails over online voting because “WhatsApp chats cannot replace the corridor diplomacy for getting a consensus”.

This is alongside concerns about the impact and consequences of postponing various conferences in 2020 and the burden that will be created in 2021 mainly on small and developing countries with fewer experts and representatives, as well as the cuts these have experienced in diplomatic services. In addition, various diplomats and experts point out that digital solutions do not replace bilateral meetings, or meetings on the sidelines of conferences and events, addressing the need for technologically secure communication for sensitive discussions, as well as the need for appropriate communication capabilities in small and developing countries. In this context, it was noted that in one of the UN discussions of the Warsaw International Mechanism, the Sudanese representative could not participate due to low bandwidth, which prevented continuous and quality communication. Besides, some governments have banned the use of various platforms, including Zoom, for security and confidentiality reasons. In addition, some point out that this pandemic has revealed the growing dissatisfaction with
multilateral governance and the ongoing recognition that the existing system and the multitude of international organizations that are part of it do not fully reflect the strategic reality, are unable to achieve their goals, appear more political than practical, and have become inefficient and even corrupt. Those online meetings will save the many costs involved in having physical meetings, especially in the era of budget cuts as part of the plague consequences.

At the same time, one of the interesting effects of the COVID-19 pandemic on global diplomacy is the so-called “Corona Diplomacy”, which is using the pandemic to promote the political and sometimes even personal interests of a country’s leader. This is done, mainly by China, Turkey, Qatar and Cuba, by sending medical staff and appropriate equipment to promote the status of the offering country among the countries of the region and the international community. The claim is that such aid is nothing new, but due to the pandemic and its devastating international consequences, such aid is gaining widespread international exposure and recognition. This is in addition to diplomatic activities, such as consular assistance to those who are stuck abroad, assistance with procurement performed for medical equipment, as well as international cooperation in the search for a vaccine for the pandemic.

When examining the effects of COVID-19 on cyber diplomacy, one can see the beginning of an important trend in which countries update official policy documents dealing with diplomacy and cyberspace to address the changes that the COVID-19 pandemic has posed to cyber diplomacy around the world. An example of this can be found in an official document of the Estonian government called “Estonian Foreign Policy Strategy 2030” which also addresses these implications:

“An example of the materialisation of such threats is the COVID-19 pandemic (2020), which has caused a deep global crisis, a prolonged duration of which is likely to have serious consequences not only for healthcare and the economy but also for security. The short-term effects of the crisis manifest themselves, among other things, in global rivalries in handling the pandemic and pressures on social and healthcare systems (which may affect the internal functioning of countries), and have had an impact on trust and cooperation between countries. The system of international relations and cooperation based on the current rules may change significantly as a result of the crisis. The pandemic highlighted in particular the importance of international cooperation in tackling global challenges”.

Another expression of the spirit of the period can be found in the document “Cybersecurity Strategy of Ukraine, 2021-2025”, in which, among the four challenges facing Ukraine in the field of cybersecurity, the last challenge is
“impact on economic activity and social behaviour of the spread of the COVID-19 pandemic, which led to the rapid transformation and organization of a significant segment of public relations remotely with the widespread use of electronic services and information and communication systems. This has exacerbated the threat of violations of citizens’ rights when using cyberspace.”.

CONCLUSIONS

The era of the COVID-19 pandemic has created a wide range of changes around the world, challenges and opportunities, some that will pass with the retreat of the pandemic, and some that are likely to stay with us for a long time and even forever affect certain aspects of our lives as individuals, organizations and countries. It seems that, as in many areas affected by COVID-19, diplomacy will not return to what it was. Experts indeed agree that this pandemic will have long-term implications for diplomacy and multilateral governance, with the need to find the golden path between adopting the changes and going back to the pattern of a diplomatic routine. In this context, the field of cyber diplomacy seems to be changing in two aspects of its activity: (1) expanding the use of various online platforms to carry out a variety of activities involving diplomatic work, including multi-participant multilateral discussions, as well as ongoing diplomatic activity; (2) deepening the use of diplomacy to manage regional and international cyber events and crises, as well as deepening international activity to create responsible rules of conduct on the part of countries in relation to cyberspace activities, in times of peace and especially in times of crises. These changes occur both at the international level in the activities of various international organizations and at the level of a single country. They include local activities both in aspects of online diplomatic activity and also on issues such as the exploitation of the pandemic for the purpose of promoting various state interests. They go as far as to update policy documents in the fields of foreign and cyber relations so that they express the pandemic and its effects in the field of cyber diplomacy.

As this era is still upon us and at various stages of development, it is not possible to estimate its full extent and intensity of its consequences and effects in general and in the field of cyber diplomacy in particular. Thus, this study is an analysis of the existing situation when future research will be able to examine things in a broader scope and over a longer period and provide a broader and fuller picture of the effect of the COVID-19 pandemic over cyber diplomacy.
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STATES’ RESPONSE TO COVID-19: COOPERATION AND COMPARISON
NARRATIVES AND DISSENT IN TIMES OF COVID-19

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Abstract: The COVID-19 pandemic exacerbated a whole series of existing confrontations based on the development of a series of narratives in order to accentuate the contradictions. This work, based on a bibliographic review and discourse analysis, aims to present some examples in this regard, demonstrating how the politicization of the pandemic was used to fuel dissent. A qualitative perspective and a flexible design have been used, which takes advantage of different theoretical-methodological perspectives, as well as various methods that offer an interdisciplinary vision.

Keywords: pandemic, narratives, dissent, politicization, infodemic, cooperation

INTRODUCTION

The context of the COVID-19 pandemic, far from fostering a climate of cooperation and concerted international efforts to manage the complex situation, aggravated a strong process of confrontation that had been developing. On the one hand, a group of rising nations driven by China and Russia promote multilateralism, while on the other hand, the United States, under Donald Trump’s administration, assumes a unilateral and protectionist tendency against international agreements

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and the United Nations system – withdrawal from the Nuclear Agreement with Iran, from the Paris Agreement on Climate Change, against UNESCO, and threats against the World Health Organization (WHO).

The United States, once the driving force behind the existing international order, perceives a process of inter-systemic transition that is leading to a relative loss of its hegemony and generating a more consensual international leadership. In this sense, Washington is unwilling to cede quotas of power and tries to hinder the progress of multilateral trends and other actors that could rival its status. To this end, it implements isolationist policies and all kinds of policies that threaten the current international system, while China and other actors promote attitudes that even imply the creation of new international institutions. As a result, a structural systemic crisis is perceived to impact all sectors and regions.

Recent world events, such as climate change or the global crisis unleashed by the advance of the COVID-19 pandemic, show that the world needs new integrated dynamic processes. That is not a process of de-globalization but, on the contrary, of transforming the current international order and moving from neoliberal mechanisms, established in the 1980s, which are obsolete for the world’s current circumstances, to new mechanisms of cooperation.

**COVID-19: COOPERATION VS POLITICIZATION**

In the context of COVID-19, international cooperation has been deployed in different ways. Both Africa and Asia, for example, tend towards openness, i.e., regionalism for the management of the health crisis. Asia and Africa are committed to all sub-regional integration mechanisms and have adopted common policies. Meanwhile, in Latin America and the Caribbean, each country, depending on its own political ideology, has applied national policies to manage the pandemic in a unilateral and disjointed manner, in most cases, ignoring WHO recommendations. The Latin American and the Caribbean region became the epicentre of the pandemic, even more so than the Sub-Saharan African sub-region, with much weaker health infrastructures.

In Asia, the first continent affected by the pandemic, the exchange and assertiveness of experiences and cooperation from the main organizations and integration and collaboration schemes have been essential for the management and control of the health crisis. In this regard, the constant interrelation with the WHO stands out. The effectiveness of the Asian experience, in general, is based on an attitude towards cooperation, a sign of its open regionalism and the coordination of its multilateral organizations, despite the broad framework of differences they share. The Confucian heritage that distinguishes Asians and particularly China, which
puts the welfare of the community before the individual, implies elements of strength in the new situation, evidencing the cultural contrast instead of the misnamed authoritarian policies.

All these experiences at the political-institutional, economic and health crisis management levels should be important lessons for the Latin American region, an area affected by a single internal civil conflict, in the case of Colombia, and other security problems in Central America as a result of migration and drug trafficking.

The Latin American and Caribbean region continues to be the most unequal region in terms of income distribution among its population at the world level. This reality has been exacerbated in the context of the COVID-19 pandemic. Access to and quality of health systems, labour conditions, abandonment of rural areas, access to safe water, educational levels, overcrowding in poor neighbourhoods or access to technology all increase the level of exposure to infection and the limitations on protecting oneself in the region.

In this difficult scenario, each Latin American and Caribbean country, depending on its political party, has applied national policies to manage the health crisis in a unilateral and disjointed manner and, in most cases, disregarding the recommendations of the World Health Organization (WHO). Thus, the region became the epicentre of the pandemic, even surpassing the African continent.

It is important to point out that the Latin American and Caribbean region is marked by a shift to the right. In recent years, it has been characterized by the dismantling of the institutions and the reversal of the policies of “progressivism”, as well as by the implementation of a more aggressive neoliberal agenda, aimed at reducing the role of the State and strengthening processes of privatization and denationalization of national strategic sectors. This change in the correlation of political forces has had an impact on the associative experiences that promoted a more autonomous vision of integration, leaving mechanisms such as UNASUR, ALBA, CELAC and MERCOSUR in a highly vulnerable situation, while at the same time having a negative impact on cooperation.

Thus, for example, in the case of the health crisis, the role of Cuban medical cooperation is fundamental since its role in the region has been prominent at other times. However, the new contexts have reversed this scenario. In Brazil, Bolivia and Ecuador, Cuban doctors who covered an important percentage of the assistance were removed from their posts, leaving millions of low-income people without access to these health services.

However, Cuba strengthened its relations with CARICOM member nations. Since the beginning of the COVID-19 pandemic, several Caribbean countries have requested an increased Cuban medical presence. As a result, several brigades went
to Suriname, Jamaica, Dominica, Belize, St. Vincent and the Grenadines, St. Kitts and Nevis, Honduras, Anguilla and Martinique and others, where they have been progressively incorporated, not to mention their collaboration in other regions. It is important to take into account the policy articulation that was achieved for the effective management of the crisis, which had in Cuba, as well as in European countries, important actors who managed the Cuban collaboration in European overseas territories located in the Caribbean (Collective authorship, 2020).

CUBAN MEDICAL COOPERATION IN THE CONTEXT OF COVID-19

In the difficult context of the pandemic unleashed by COVID-19 and the hostility of the United States government, on March 18, 2020, the first out of the 22 medical brigades that would provide services against this disease left Cuba. Gradually, more than 1,466 Cuban health professionals, integrated into 23 “Henry Reeve” medical brigades, went to 22 nations in Europe, Latin America and the Caribbean, Africa and the Middle East to reinforce health systems in the fight against the pandemic, a number that continued to grow. After the departure of the last group of Cuban doctors (June 26) to an African country and two Caribbean territories, Cuba had a total of 38 brigades in 31 countries with a total of 3,440 health specialists to face the pandemic. It is noteworthy that more than 45 countries in the world have requested assistance from Cuban physicians. The largest number of such medical brigades is in Latin America and the Caribbean, followed by Africa, and, for the first time, a brigade has arrived in Europe.

The economic retribution of Cuban medical collaboration has been one of the most controversial and thorny issues in recent years. This particular issue has been highly politicized in order to delegitimize the Cuban political system, considering that it is one of its main pillars. However, economic retribution is not what distinguishes medical collaboration. At present, there are three modalities of cooperation that are also used in the face of the COVID-19 pandemic: 1) In the case of very poor nations, Cuba assumes the expenses; 2) the expenses are shared with the country receiving the collaboration; and 3) the island receives income. In this regard, a recent example of this is argued by Dr Carlos Pérez Díaz, head of the Cuban brigade in Lombardy, who informed the local press: “We have not discussed any type of payment. We are here to collaborate; the Italian government has assured us accommodation and food. Our action in this region is purely of solidarity” (Collective authorship, 2020).

In the context of the current pandemic, new threats fall on Cuba and the world in relation to the medical cooperation developed. On June 17, 2020, a group of Republican senators in the United States introduced a bill to punish countries that
contract medical missions from Cuba, considering them accomplices in “human trafficking”. The U.S. Secretary of State, Mike Pompeo, led the accusations. He described the deployment of Cuban doctors in countries from Venezuela to Brazil to Ecuador as “sinister interference in their affairs”, and congratulated countries, such as Bolivia, that have expelled them. Pompeo was backed by other top U.S. officials and agencies, including Deputy Secretary of State Michael Kozak, who has also seized on recent claims about the doctors’ working conditions.

At this difficult juncture, Cuba maintains its conviction and commitment to solidarity with the world, including the United States. This country prevented the entry of a shipment of aid from China through the company Alibaba and torpedoed the negotiation with other companies to acquire material necessary to face the crisis and, therefore, makes this type of negotiation wearisome for the Cuban side. Despite that, Havana provided its support to Washington in the current health crisis from the beginning, just as it has helped many other countries, including the passengers of the British cruise ship MS Braemer, which docked on Cuban shores despite having at least five confirmed coronavirus cases onboard and another 52 passengers showing symptoms. The ship, with more than 600 mainly British passengers, had requested assistance from both Cuba and the United States. After being anchored in the Caribbean for five days looking for a place to dock, it was able to reach Cuba. This fact was another of the many that have been manipulated to delegitimize Cuba’s image in the world.

**NARRATIVES IN THE CONTEXT OF COVID-19**

The year 2020 has been marked by a series of trends in the field of political communication, which have been related in one way or another. On the one hand, populist narratives of a nationalist, xenophobic nature, have been exacerbated, and on the other, these have been part of the terrible world scenario marked by the COVID-19 pandemic. These narratives have been used to generate messages in line with these emerging political forces on the confrontation and management of the crisis, which has led to politicization of this complex scenario and polarization in its management.

One of the main narratives generated is the anti-Chinese one. It is associated with the appearance of the disease in Wuhan province. This triggered a context of uncertainty and social alarm. The anxiety caused by the call to confine people to their homes was added to the high levels of stress caused by the threat of contracting a virus, which was showing significant lethality rates. In this context, overexposure to information on the subject accelerated. This was accompanied by fake news, hoaxes, rumours, conspiracy theories, thus generating an environment
of great disinformation (Colomina, 2020). The information-disinformation paradox was ratified as an instrument of power, through which it is possible to viralize fear and confusion and sow social panic.

In this line, the WHO together with the PAHO considered it pertinent to make a call from the issuance of a document warning about this phenomenon associated with the infodemic: Psychosocial and mental health considerations during the outbreak of COVID-19⁴, dated March 12, 2020. Below are some excerpts from the document that point out certain issues that may be relevant to the issue at hand, as they undoubtedly have a direct influence on those trends that were considered from the early stages of the pandemic to be likely to begin to develop:

“This virus should not be associated with any ethnic group or nationality. Show empathy to all affected people, within a given country or from any country. Remember that people who are affected by COVID-19 have done nothing wrong, are blameless and deserve our support, compassion and kindness. (...)”

“Do not refer to people who have the disease as “COVID-19 cases,” the “victims,” the “COVID-19 families,” or the “sick.” These are “people who have COVID-19”, “people who are in treatment for COVID-19”, “people who are recovering from COVID-19” and who, once they have overcome the disease, will move on with their lives, their work, their family and their loved ones. It is important to separate the person from having an identity defined by COVID-19, to reduce stigma.”

“Minimize the time you spend watching, reading or listening to news that causes you anxiety or distress. Seek information only from reliable sources and primarily about practical measures that will help you make protective plans for you and your loved ones. Look for information updates once or twice a day, at specific times. The sudden and almost constant flow of news about an outbreak can make anyone feel concerned. Be informed about what is actually happening, do not listen to rumours and misinformation. Gather information at regular intervals, from the WHO website, the PAHO website, and from national and local health authority platforms, to help you distinguish fact from rumor. Knowing reliable information can help minimize fear.”

Undoubtedly, the indications referred to speak of a warning against the phenomenon of stigmatization in the context of the pandemic: the fear of otherness and all that can be attributed to it in the context of a health emergency. The survival

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instinct in extreme situations, which can be maximized and manipulated by large media conglomerates, so prone to the spectacularization of everything that happens according to certain interests, also has clear intentionality. It may or may not be perceived by the common citizen, and therefore, it is a source of hoaxes, rumours and fake news, or ultimately generates confusion or distrust. The “Theory of Rumour” and the study of “Social Representations” are important theoretical references from psychology and sociology from which the study of this phenomenon can be approached.

Thus, in relation to the pandemic, among the main narratives exploited by the mass media, three fundamental ones can be highlighted, in which the common citizen is a coparticipant and from which he dialogues with the environment around him and explains the events that affect him: conspiracy theories (politic and economic), apocalyptic predictions (religion) and environmentalist theories (naturalist).

Among the debates that have been most controversial by the media, the one referring to the origin of the virus and a whole series of speculations about it stands out. Among others, the most widespread belong to the conspiracy theory and reproduce the confrontation between the three protagonists, China, Russia and the United States.

Thus, for example, one can cite the case of the United States where former President Donald Trump gave a political focus to the issue by identifying the pandemic as “China’s virus”. It can be said that the new context marked by the pandemic of the new coronavirus, unleashed in the Chinese province of Wuhan, and the growing Sino-US confrontation, have greatly nuanced the scenario of the “crusade against terrorism of Islamic origin” that has prevailed in international relations for almost 20 years. Discourses and narratives are beginning to turn against a new target: Chinese stigma and its potent influence on the new world order.

In the context of a health emergency, it is natural that a debate arises as to who is best equipped to deal with the pandemic. Amid the difficult health situation with the advance of COVID-19, few countries have had an effective response based on national health infrastructures, whether in terms of scientific-technological and productive capacity, the development of the biotechnology and pharmaceutical industry, financial resources, and highly qualified or trained personnel. In this regard, the positions of the Republic of Korea, China, Singapore, Japan, India, Thailand and Vietnam have stood out (González, 2020).

However, these debates are frequently simplified by distinguishing between the strategies pursued by so-called liberal democracies and those pursued by so-called authoritarian regimes, the latter being identified with Asian regimes that, allegedly, can impose much stricter measures on their populations due to their
nature of permanent surveillance, centralism, and control capacity. According to the South Korean philosopher Byung-Chul Han, author of “The Tired Society”, in Asia, especially in China, people are less reluctant and more obedient than in Europe, and they also trust the State more. In Korea and Japan, too, daily life is much more strictly organized than in Europe. Above all, to deal with the virus, Asians are betting heavily on digital surveillance. They believe that big data could hold an enormous potential for defending against the pandemic. It could be said that in Asia, epidemics are not only fought by virologists and epidemiologists, but above all by computer scientists and big data specialists. A paradigm shift from which the West still has much to learn. Thus, apologists for digital surveillance would claim that big data saves human lives. According to this author, this is because critical awareness of digital surveillance is practically non-existent in Asia, and there is hardly any talk of data protection anymore, even in liberal states such as Japan and Korea. Nobody gets angry about the frenzy of the authorities to collect data. So, there is a confrontation and a debate about policy models in relation to the disruptive capabilities of technology.

Another debate that has opened up is the role of the nation-state and its institutions in a contingency such as the one we are facing. The crisis reinforced its border and anti-immigrant discourse, as well as the call to reactivate the country’s economy. This reading of the confinements was also associated with the curtailment of freedoms and manifested divergent positions in the management of the crisis between the so-called liberal democracies and the so-called authoritarian regimes. Thus, a whole series of narratives emerged that not only politicized the health crisis and its management, but also international cooperation initiatives such as the Health Silk Road, which is part of the Chinese Belt and Road Initiative, which has been highly questioned and labelled as “mask diplomacy” with which China has the

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5 There are 200 million surveillance cameras in China, many of them equipped with a very efficient facial recognition technique. They even capture moles on the face. The whole infrastructure for digital surveillance has now proved to be extremely effective in containing the epidemic, to the extent that it measures body temperature and, if the temperature is of concern, they receive a notification on their cell phones. Drones are used to monitor quarantines. Chinese cell phone and Internet providers share their customers’ sensitive data with the security services and the Ministries of Health. Thousands of digital investigation teams have been formed in Wuhan to search for potentially infected people based on technical data alone. Based on macro data analysis alone, they find out who is potentially infected, who has to be further observed and eventually isolated in quarantine. More information in Byung-Chul Han. The viral emergency and the world of tomorrow. Wuhan Soup. Digital book. Available on the Internet. Publisher: ASPO (Preventive and Compulsory Social Isolation). March 2020.
opportunity to set itself up as “the donor saviour” and continue advancing its mega project; as well as others coming from Russia or Cuba.

The context of COVID-19, coinciding with an election year in the US, far from being an obstacle for Donald Trump’s campaign, allowed him to exploit this type of discourse and increase his popularity, skillfully managing the concerns of Americans, channelling feelings such as hatred and fear towards the “enemies of the United States”. This phenomenon of demonizing socialism has also been manifested internally in that country. At the level of social representations, the metaphor of “socialism” or “communism” associated with the Democratic Party, first through the figure of Bernie Sanders and then through Joe Biden and Kamala Harris, has had special significance in the discourse and symbolic system of Americans.

The great polarization that characterizes this society became evident in the November 2020 elections, which were conditioned by a climate of tension and exacerbated violence, which has been stoked in the speeches during all these years, and has been revealed in both Republican and Democratic supporters.

In the case of the European Union (EU), it is important to point out that this crisis has manifested and strengthened the phenomenon of fragmentation within the EU in various aspects. The limitations on the part of the EU in coordinating measures whose responsibility lies primarily with the Member States (health policy or border control) became evident. Trends such as “my country first” were also reproduced, resulting in the limitation of exports of health materials between the Member States and closure of national borders. In addition, there was a lack of coordination at the European level of the measures taken by the Member States (Morillas, 2020).

The coronavirus crisis has served the European extreme right to relaunch its discourse against the Schengen area of free movement. The spread of the pandemic has been used to blame migrants and to deepen the stigma against otherness.

The emergency triggered what some specialists considered “social hysteria”. This scenario, for these political forces, represents an opportunity to erode the discourse of traditional governments, promote distrust in institutions and relaunch their border policy agenda. Thus, quarantines, anxious populations, fears, and an economy going into recession have characterized the European scenario and constituted, therefore, a breeding ground for citizens to be attracted by the most authoritarian, xenophobic and racist messages, in favour of the defence of the Nation States and against the European integration mechanisms (Collective of authors, 2020).

In the case of Latin America and the Caribbean, in the face of access to very unequal quality of health care, the inability to manage the crisis of many of the
leaders representing the extreme right, who have opted for a discourse of scepticism in the face of the serious situation, advocating the revitalization of the economy and the cessation of the quarantine, has become evident. The case of the self-proclaimed president of Bolivia Jeanine Añez stands out in her appearance, who, while announcing the quarantine expressed: “Dear Bolivians, I ask you to join us in a permanent prayer. This Sunday begins a total quarantine and I ask that we may fast in prayer, repentance and faith, so that it may be our greatest weapon in the fight against this disease. May God bless Bolivia”. However, the proposal to receive Cuban medical help was rejected de facto by Añez (Hernández, 2020).

For his part, Jair Bolsonaro called the pandemic a “gripecita” and has continued to campaign against the quarantine measures decreed by some state governors, such as Joao Doria in Sao Paulo or Wilson Witzel in Rio de Janeiro. Bolsonaro’s anti-quarantine campaign, which prayed “Brazil cannot stop”, led Judge Laura Bastos Carvalho of Rio de Janeiro to order the Brazilian government to “refrain” from promoting attitudes of rejection of the confinement measures (Ayuso, 2020). Such have been the bolsonarista disasters with the management of the pandemic as, for example, the oxygen crisis in Manaus that has led Venezuela to send oxygen and several parties to request an impeachment in Congress.

Another side of the coin is, for example, Nayib Bukele in El Salvador, an example of a great national division. Several human rights organizations have sounded the alarm about the warnings of authoritarianism shown by the young president, which were accentuated after the arrival of COVID-19. On the one hand, even his detractors admitted that Bukele acted quickly in the face of the pandemic threat with the closing of borders and strict confinement measures. On the other hand, however, there were complaints about the temporary restriction of constitutional guarantees such as the right to free mobility, as well as the detention and sending to containment centres of those who left their homes. At the same time, access to public information was severely restricted, and there were appointments and dismissals that were interpreted as moves to shield certain officials (Morales, 2020).

In general, in the international context, there has been no lack of questioning of certain measures that have been associated with greater social control of governments over individuals. A whole series of narratives have also been developed from religion, and science has been politicized, as efforts to find an effective vaccine candidate have been called a “race” or “competition”. This has been compounded by multiple conspiracy theories. Thus, the politicization of the pandemic and its articulation in the narratives of certain conservative political forces, with xenophobic, radical, nativist projections, and in many cases labelled as neofascist, has intensified the already complex national and international scenarios.
COMMUNICATION SCENARIO

The COVID-19 crisis has shown that the technological sphere has been fundamental for the world not to come to a complete standstill, just as it has been a fundamental space in which geopolitical competition has become evident. Therefore, the technological dispute will persist, but it could be considered, within the possible scenarios, new dimensions and certain nuances around it. The race for control of data and information is perpetuated as the most concrete expression of power. However, within the competition, there will coexist certain levels of cooperation that may be consolidated in the long term.

In addition and closely related to the above issue, the only form of consumption that almost certainly benefited during the crisis has been the Internet, a platform from which it was possible to partially give course to the “daily life” from promoting teleworking, international exchange of scientific communities to address strategies to manage the crisis itself, services to some extent, information, entertainment so important at a time when the call is to stay at home, even expressions of protest, denunciation in social networks, culture, education, among other experiences that will undoubtedly be enhanced and extended in the future.

So, the health crisis exponentially multiplied our dependence on devices and large technology companies. The quarantine has jeopardized the livelihoods of countless entertainment, culture, tourism, and fashion companies, while also bringing massive capital to technology platforms. According to specialists in the field, it is likely that the exponential accumulation of complex knowledge during these months in the fields of biotechnology, computer science, robotics, statistics, systems, or data engineering will complete in record time the technological revolution that has been developing (Carrión, 2020).

The huge injection of money and big data being provided to companies such as Google, Amazon, Facebook and Netflix is expected to give a major boost to the development of algorithmic intelligence. This scenario is especially envisaged for the health sector in terms of computer-based epidemic management, which would give enormous decision-making power to machines.

In this regard, it should be noted that during confinement, children and students, in general, are getting used to receiving information and knowledge through computers; the temperature or the geolocation of those affected by the virus is being monitored through cell phones; grandparents are even downloading applications to which they were reluctant; everyone has become familiar with Skype, Google Hangouts or FaceTime and millions of sports fans, faced with the worldwide suspension of championships, have begun to take to e-sports
competitions (Carrión, 2020). So, the change in routines will mark the new pulses of technological development and its incorporation into everyday life.

At present, the most successful models of epidemic management are mainly Asian. They share the use of applications for monitoring citizens who have been in infected areas or who are suffering from the disease. In general, the world is preparing to implement new biocontrol strategies, which implies the possibility of governments gaining access to our coordinates and DNA or delegating part of their decisions to artificial intelligence.

However, never before, the various technological advances that have a direct impact on people’s lives call for the need to redefine human dignity in their daily lives shared with technology, an issue that has remained an unresolved matter.

In this regard, one of the main challenges is technological change and its impact on production models and employment, for example. We are going through an enormous transformation of the labour market, which will undoubtedly deepen in the future. This change is due to the intervention of technology in the type of functions performed by humans in the professional environment, and this, in turn, is fueling a very marked increase in inequality. Today’s technological development is in direct collision with the functions that humans currently perform in the labour market. This process has a direct impact on the rapid scarcity of workers. In addition, this scenario has also highlighted the complex problem of the digital gap, and the contradiction of a world that is increasingly connected and more unequal in terms of access: The disconnected or the other face of the geopolitics of technology.

Latin America and the Caribbean and Africa are clear examples of this. In this context, the Latin American and Caribbean region underscores its status as the most unequal in the world, and increased dependence on the use of digital technologies exacerbates these inequalities. There are also strong inequalities in the rate of connectivity, according to income segments.6

Although plans have been made to promote the use of digital devices in education systems, many educational institutions do not have the necessary digital

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6 Latin America faces challenges in ICT training for teachers. For example, in Brazil in 2018, only 20% of teachers participated in a continuing education course for the use of computers and the Internet for teaching. Regarding Internet use, 16% reported using it once or more times a day; while 20% used it once a week, and 18% at least once a month (Internet Steering Committee in Brazil, 2019). (See more in ECLAC Special Report Latin America and the Caribbean in the face of the COVID-19 pandemic, retrieved from https://www.cepal.org/es/publicaciones/45337-américa-latina-caribe-la-pandemia-covid-19-efectos-economicos-sociales.)
technology infrastructure. In addition, there are gaps in access to computers and the Internet at home, so distance teaching and learning processes are not guaranteed. There are disparities in access to digital devices and broadband Internet access between urban and rural populations, between genders, between populations that speak or do not speak the official language (Spanish or Portuguese), and between populations with and without disabilities.

The African case is even more worrisome on these issues considering the trends that have become more and more successful in dealing with preventive quarantine and controlling the health crisis. When we talk about the progress of Internet connectivity in Africa, there are many differences that need to be taken into account and not only inequality among countries, depending on the levels of development of each state and government policies regarding investment in the technology sector. There are also social and gender differences within each national reality, and very marked differences between rural and urban areas with respect to their possibilities of access and network coverage. On the other hand, Africa stands out for the scarcity of news in certain scenarios when compared to the volume of news flowing daily on the Internet about other regions and, above all, if it is taken into account the number of political events and structural problems accumulated in many African countries (Abreu, 2019).

CONCLUSIONS

In general, the COVID-19 pandemic has been part of the narratives that had already been developing in the discourses of the most conservative populist political forces. Protectionism has been one of the fundamental features. The defence of the people, understood as nationals, against the stigma of those who are different, foreigners or potential carriers of the virus. In the case of the widespread anti-Chinese narrative, this feature takes on greater significance because it is not only a potential carrier but also a possible generator.

These discourses have led to the development of isolationist tendencies when it comes to managing the health crisis. Added to this are the real limitations revealed in terms of international cooperation and management of this type of emergency. This has undoubtedly generated mistrust and uncertainty, which is conducive to narratives that seek greater political fragmentation, as opposed to the need to foster alliances and integrated dynamic processes.
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ECONOMIC IMPACT OF COVID-19:
A DETERMINING FACTOR OF CURRENT GLOBAL ECONOMIC TRENDS

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Abstract: The purpose of this chapter is to analyse the impact of the COVID-19 pandemic on global economic developments and outline the tendencies to which it led. The research is based on the assumption that the virus is likely to be as contagious economically as it is medically contagious. Studying the world’s leading economies (the US, the European Union and China) from the beginning to the end of 2020, two groups of consequences emerge. First, the introduction of restrictive measures at the start of the pandemic imposed social distancing and reduced the movement of people and goods, which in turn had a major effect on the collapse of the services’ sector and the supply chains. Second, the exponential growth of infected people and the speed of the spread of the virus forced the world’s leading economies to apply more restrictive measures in the form of national lockdowns, curfews, and quarantines, resulting in the total paralysis of the economy and a rapid decline in GDP. Desk research has been applied in the analysis, based on available external and internal sources. Data from national statistical institutes and international organizations have been used. The results clearly indicate that the adopted economic measures became a determining factor for the world’s leading economies not to enter a great recession and laid the foundations of the global economic trends. The beginning of immunization of the population opens the way to an

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accelerated return to normal economic activities, a turn to sustainable development and economic growth.

Keywords: COVID-19, pandemic, global economy, US, European Union, China.

INTRODUCTION

Although it is difficult to determine exactly what the economic damage from the global coronavirus pandemic COVID-19 will be, there is a broad consensus among economists that it will have serious negative impacts on the global economy. Early estimates predicted that if the virus became a global pandemic, most of the major economies would lose at least 2.9% of their gross domestic product (GDP) by 2020. This forecast has already been revised to a 4.5% GDP loss. To put this number into perspective, global GDP is estimated at about USD 87.55 trillion in 2019, meaning a 4.5% drop in economic growth results in nearly USD 3.94 trillion in lost economic output (World Bank, 2021).

The shock caused by the coronavirus pandemic quickly became a global effect, causing several negative impacts to be synchronized. More than 90% of the global economy has experienced a reduction in GDP per capita. The shock spread through three key channels: disruption of the global supply chains, restricting international mobility and reducing international capital movements. The trade experienced a short-lived but deep plunge. In the first wave of the pandemic, trade declined sharply, giving an even greater effect to the economic downturn, but soon recovered, maintaining demand substitution through labour-intensive products.

The pandemic will have short-term and long-term macroeconomic effects. Macroeconomic costs and losses caused by it relate to the loss of gross domestic product in the countries affected by COVID-19, the growth of the unemployment rate in those countries, and the deterioration of other macroeconomic indicators - fiscal indicators and indicators of external equilibrium - which will have an impact on their economic growth rates.

The shock caused by the coronavirus pandemic in the economy certainly showed that non-economic and non-financial factors can have very significant economic and financial effects at the global level and can appear as triggers for starting an economic recession. This will certainly contribute to paying much more attention to them in the future, both in economics and in conducting economic policy.

METHODOLOGY

The chapter examines the initial conditions in the transmission of the shock and the extent of the expected recovery, the assistance of the international
organizations, and the measures undertaken by the states during the crisis. It also views the current economic trends determined as a consequence of the coronavirus pandemic. Beyond the actions of the international organizations, in some cases, COVID-19 has also resulted in inter-governmental cooperation in an effort to overcome shared challenges, so joint efforts to respond to the pandemic are the focus of attention.

The methodology of this study is based on a review of the existing economic literature on the economic and fiscal impact of the coronavirus pandemic on the world’s leading economies and preliminary recovery estimates. The analysis covers the world’s leading economies: the United States, the European Union and China. The goal is to analyse the GDP trends of these countries in 2020, as well as the first quarter in 2021. Also, the set of measures taken by these countries in order to mitigate the economic effects caused by COVID-19 has been explored. Desk research, based on available external and internal sources, has been applied in the analysis. Data from the reference national statistical institutes of the countries surveyed have been used. It is difficult to overcome the limitations connected with the lack of actual papers, especially on China, so current data have been retrieved mainly from the documents of the IMF and other international organizations.

**ECONOMIC IMPACT OF THE CORONAVIRUS PANDEMIC**

The economic setup in the world is still at a high level of fluctuation and uncertainty. Ruinous effects due to the pandemic deepen the perception of risk and instability on the financial markets of the world’s leading economies. The global health crisis caused by COVID-19 has brought about major economic disruptions and inflicted a dramatic slowdown in the global economy (IMF, 2020). Different countries have been affected differently by the pandemic virus, so they have reacted in various ways in terms of policies to address this crisis (Hale et al., 2020; ECPresscorner, 2020). The hardest-hit countries are those that rely largely on services, primarily tourism and hospitality because it is a sector of extreme sensitivity to the COVID-19 pandemic. The spread of the pandemic has left national economies and businesses to calculate costs, while governments are struggling with new locking measures to combat the expansion of the virus. Despite the development of new vaccines, many are still wondering what recovery might look like. Large shifts in stock markets, where stocks and companies are bought and sold, can affect the value of pensions or individual savings accounts. The FTSE, the Dow Jones industrial average and the Nikkei recorded huge declines as the number of COVID-19 cases grew in the first months of the crisis. The major Asian and US stock markets recovered after the announcement of the first vaccine in November, but
the FTSE is still in the negative zone. The FTSE fell by 14.3% in 2020, its worst performance since 2008. In response, central banks in many countries have cut interest rates. This should, in theory, make borrowing cheaper and stimulate spending to stimulate the economy (IMF, 2020).

With the introduction of epidemiological and quarantine measures, the three biggest economies, the United States, China and the European Union, have suffered a huge impact on their economic growth and development (Figure 1). The first economic losses were recorded by the services industry due to reduced demand caused by the restriction measures on the mobility of people and lockdowns in certain countries. Also, small and medium-sized companies without sufficient financial reserves failed to cope with the new situation. At a global level, there is a decline in aggregate supply and demand. Many countries are introducing national lockdowns, restricting the movement of their citizens, curfews and other isolation measures.

**Figure 1. Real GDP growth – China, US, World, Eurozone**

![Real GDP growth graph](image)

*Source: Soebandrija, 2020, p. 142*

The world’s first economy, the United States, is experiencing slight economic growth and recovery. In the third quarter of 2020, GDP grew by 33.1% and represented the highest recorded growth, after a record decline in the second quarter of 31.4%. Measures to help the population and the economy were given a strong financial boost, so personal consumption had the highest growth and was a driver of development for the rest of the economy. Personal consumption increased by 40.7%, while gross private investment increased by 83%, with a growth of 59.3% in the housing sector (US GDP Growth Rate, 2020). Also, the scope and speed of the interventions of the Federal Reserve (Fed) were more significant than those of
the ECB. In mid-March, the Fed lowered the reference interest rate to the range from 0% to 0.25% - the level it was at from 2008 to 2015. The Fed has also increased the amount of funds it holds in bonds. They also came out with a program of measures worth USD 2.3 billion to support local governments and small and medium-sized enterprises. Real gross domestic product increased at an annual rate of 6.4% in the first quarter of 2021, reflecting a continued economic recovery, the reopening of facilities, and continued government response to the COVID-19 pandemic. In the fourth quarter of 2020, real GDP grew by 4.3%. On the manufacturing side, private goods industries grew by 5.4%, led by computer and electronic products, processed metal products and machinery. Industries producing private services grew by 7.7%, led by data processing, publishing on the Internet and other information services, and the government grew by 0.2%. Analysts show that the economy in the second quarter is expanding by about 9%, while the recovery continues, although growing price pressures are already burdening some sectors, i.e., the housing market (Bureau of Economic Analysis, 2021).

After a record drop in China’s GDP in the first quarter of 2020 of -6.8%, the largest in the last decade, the third quarter recorded a much better picture. The Chinese economy recorded growth of 4.9% in the third quarter of 2020, which was still below the expected growth of 5.2%. Despite lower-than-expected growth, consumption growth and recovery of industrial activity supported by government financial measures have been undertaken. The activity of the retail sector in September recorded a growth of 3.3% and represented the highest growth of this sector since the beginning of the year. Industrial production increased by 6.9%. The total economy grew by 0.7%, with the primary industry growing by 2.3%, and the secondary industry by 0.9% and the services sector by 0.4%. Growing global demand for medical equipment and home-based technology has increased exports, while government support includes higher fiscal spending (National Bureau of Statistics of China, 2020). The Chinese National Bureau of Statistics released data for the first quarter of 2021 showing accelerated GDP growth of 18.3%, compared to 6.5% in the fourth quarter of 2020. The main driver of growth in the first quarter was industry and construction, which grew by 24.4%, while services grew by 15.6%. However, monthly data suggest that the growth of services has taken off, while the growth of production is declining. In the coming quarters, we expect that the growth of consumer demand will be moderate because a significant part of the “backlog of demand” has already been realized, while the growth of production will slow down. In addition, reduced support for the policy from the monetary but also the fiscal side will keep the cover on economic growth. On the fiscal side, China’s recent government budget targets a fiscal deficit of 3.2% of GDP, which is relatively conservative (National Bureau of Statistics of China, 2021).
The second quarter of 2020 in the EU was marked by measures to combat COVID-19, which affected the reduction of GDP at the level of the entire Union. In the second quarter, the EU recorded a decline of 11.9% and represented the largest decline in GDP since 1995. In the second quarter, there was a sharp decline in labour productivity by 2.9%. Exports decreased to 18.8%, while imports decreased by 17.8% (Eurostat, 2020). The Union has suffered heavy financial losses due to the shock caused by the pandemic. France and Germany, as the two largest economies in the EU, announced a joint proposal to finance the recovery of the EU economy in mid-May. According to the proposal, it is planned to finance the development of the EU Health Strategy, to finance the Recovery Plan for Solidarity and Growth, to stimulate the green economy and digitalization and to stimulate the single market. Despite criticism of such a generous program coming from more “thrifty” members like Austria, Denmark, and the Netherlands, the European Commission came up with a Recovery Program at the end. In the first quarter of 2021, seasonally adjusted GDP decreased by 0.3% in the Euro area and by 0.1% in the EU. Compared to the previous quarter, according to an estimate published by Eurostat, the statistical office of the European Union, these declines follow a drop in the fourth quarter of 2020 (-0.6% in the Eurozone and -0.4% in the EU) after a strong recovery in the third quarter of 2020. Household final consumption expenditures had a negative contribution to GDP growth in both the Euro area and the EU, while contributions from gross fixed capital formation and changes in inventories were positive. The contribution of the external balance was slightly positive for the Euro area and neutral for the EU, while the contributions from government final expenditures were neutral in both zones (Eurostat, 2021).

The pandemic and its economic consequences are still uncertain and may be revised. One of the key roots of uncertainty stems from the fact that efforts and measures to stop the spread of the pandemic could remain in place for longer than expected. High-frequency indicators for the first quarter of leading economies suggest a recovery in global economic activity, but all of this may be called into question as new strains of the virus spread globally.

ECONOMIC MEASURES UNDERTAKEN BY INTERNATIONAL ORGANIZATIONS AND GOVERNMENTS

It is obvious that the crisis took a severe toll on the economies all over the world. It forced international organizations and national governments to implement diverse measures to curtail the pandemic and support the economy (Vassileva, Simić, 2021b, p. 33).
The United Nations has mobilized its full capacity to support national authorities in developing public health preparedness and response plans to the COVID-19 crisis. The UNDP and its country offices worldwide have been working in close collaboration with specialized UN agencies to assess the socio-economic impacts of the COVID-19 pandemic. They have prepared assessment reports which contain the preliminary findings of regional and country analyses as well as recommendations for their recovery policy (UNDP, 2020). While official development assistance was being directed towards humanitarian and health measures to respond to COVID-19, the UNDP redirected its own funding to kick-start vital recovery efforts in fragile contexts.

In order to recover from this crisis stronger and launch a new path, the UN called for a USD 2.5 trillion support package for developing countries to deal with the coronavirus shock (UNCTAD, 2020b). The financial assistance was allocated as follows:

- USD 1 trillion should be made available through the expanded use of special drawing rights.
- USD 1 trillion of debts owed by developing countries should be cancelled.
- USD 500 billion needed to fund a Marshall Plan for health recovery and dispersed as grants.

The world’s leading economies applied restrictive measures in the form of national lockdown, curfew, and quarantine together with economic measures, which resulted in mitigating the detrimental effects. As it has already been mentioned, in order to help the economy after the COVID disaster, the US declared USD 2.3 trillion Relief and Funding Bill, signed by President Donald Trump in 2020, and another 1.9 trillion Relief Bill, signed by President Joe Biden. In the first quarter of 2021, government payments, such as direct economic consequences, extended unemployment benefits, and payroll loans, were distributed to households and businesses through the coronavirus Response and Assistance Act and the American Rescue Plan (ARP). The ARP includes provisions on aid to state and local governments, hard-hit industries and communities, tax changes affecting individuals and businesses, and other provisions.

According to the consulting company White & Case (2020), China has promulgated a package of financial policies to ease the financial distress of enterprises caused by the outbreak of the coronavirus pandemic. The financial policies include providing loans with preferential conditions through financial institutions to certain frontline companies, reducing the costs of financing guarantee services, postponing the repayment of loans, optimizing corporate bond issuance procedures and facilitating cross-border financing. Among these financial policies,
the Ministry of Finance also released industry-specific policies jointly with the Civil Aeronautics Administration of China to provide financial support to airlines during the COVID-19 outbreak. To reduce the financing costs of agricultural enterprises and SMEs, a Circular on Re-lending and Re-discounting to Promote Orderly Resumption of Operations and Production was promulgated, setting forth the detailed loan facilitation and re-discounting schemes which allocate a total amount of CNY 500 billion to support agricultural enterprises and SMEs. Apart from that, China provided assistance to more than 80 countries in the world.

To reset the economy that has been ruined by COVID-19 and help repair the social damage caused by the pandemic, the European Commission, the European Parliament and EU leaders have agreed on a recovery plan that is targeted to lead the way out of the crisis and lay the foundations for a modern and more sustainable Europe. The EU’s long-term budget for 2021-2027, coupled with NextGenerationEU, the temporary instrument designed to boost the recovery, is the largest stimulus package ever financed through the EU budget. The EU announced a package of €540 billion and later approved €672.5 billion for recovery and a full package of €1.8 trillion (DW, 2021). According to the program, where the recovery is based on solidarity and the budget is focused on the future, as much as 2/3 of the funds would be non-refundable money to members, while the rest of the money would be loans on favourable terms offered in international financial markets (European Commission, 2020).

To support their national economies in coping with the immediate repercussions of the health crisis, the member states of the EU have implemented a wide range of measures, mainly of fiscal nature. The focus was on mitigating the short-term impact of government restrictions, including falling demand and production, income reductions and unemployment. These encompass four main typologies: a) discretionary support: measures targeting expenditure (e.g. income and employment support, interest subsidies, credit loss provisions, exceptional spending on healthcare and research), and revenues (e.g. tax payment reliefs and cuts in tax rates); b) financial instruments: measures aimed at supporting enterprises’ cashflow or solvency position, through liquidity funnelling through loans or equity injections; c) guarantees: measures aimed at supporting enterprises’ liquidity position through guaranteed debts granted by a financial institution undertaken by governments; and d) tax payment: measures aimed at temporarily increasing the liquidity position of enterprises through deferrals of taxes or social contribution payments. By June 2020, almost 1,250 fiscal measures accounting for about €3.5 trillion, namely 27% of EU27 GDP estimated for 2020, were adopted by the member states with the objective of mitigating both the health and economic effects of the pandemic (de Vet et al.). Among these, 59% of the measures consist of guarantees, 19% and 5% of discretionary stimulus measures targeting expenditure and revenues, respectively, 11% of financial instruments and
6% of tax payment measures. The nature of the measures varies considerably across the member states, and their volumes can be directly correlated to the amount foreseen by the state aid schemes approved at the EU level, which also vary substantially across the member states. The largest fiscal packages were implemented by Germany, whose package amounted to about 43% of the country’s GDP, followed by Italy (37% of national GDP), France (23%) and Spain (22%). Lithuania represents a notable exception with a package worth 29% of national GDP despite the relatively low volume of its state aid scheme. The member states that received smaller fiscal packages include Slovakia (5%) and Romania (5%). Bulgaria received the smallest package of all (2%), combined with unsuccessful crisis management - poor organization, incompetence, and potential conflict of interest (Atanasov, 2021).

The second step in combating the coronavirus consequences is the European Green Deal, which turns out to be a gateway to a green economy (EC, 2020). It presents a roadmap for making the EU’s economy sustainable by turning climate and environmental challenges into opportunities across all policy areas. It aims to boost the efficient use of resources by moving to a clean, circular economy and stop climate change, revert biodiversity loss and cut pollution. It outlines the investments needed and financing tools available and explains how to ensure a just and inclusive transition. The European Green Deal covers all sectors of the economy, notably transport, energy, agriculture, buildings, and industries such as steel, cement, ICT, textiles and chemicals (EC, 2019). It launches a strategy for a climate-neutral, resource-efficient and competitive economy, integral to the Commission’s strategy to implement the United Nations 2030 Agenda on sustainable development. The circular economy is considered a key approach in the process of transition to a sustainable economy model and a way to achieve certain SDGs (Bogetić et al., 2021, p. 65). Scaling up the circular economy from front-runners to the mainstream economic players makes a decisive contribution to achieving climate neutrality by 2050 and decoupling economic growth from resource use, while ensuring the long-term competitiveness of the EU and leaving no one behind (EC, 2020). In the post-COVID-19 scenario, the circular economy can become the new normal. It can help address unsustainable trends and find adequate solutions towards a green recovery (Vassileva, Simić, 2021a, p. 32).

CURRENT ECONOMIC TRENDS DETERMINED AS A CONSEQUENCE
OF THE CORONAVIRUS PANDEMIC

It is too early to estimate the total effects of the coronavirus pandemic. Researchers in many fields are busy exploring its positive and negative consequences on a national and international level, comparing it with similar
phenomena. Surely, it will determine the current economic trends for a long time in the following direction:

**Reshaping globalization.**

The coronavirus pandemic contributed to the development of processes, reshaping globalization by stimulating the turnover of goods and services within regional groupings (Vassileva, Simić & Stevanović, 2020, p.590). It has started a dramatic change in how multinational entities strategically approach their business model going forward as they deal with day-to-day operations. This crisis has forced businesses to change the way they operate, manage their workforce, adhere to governmental mandates, and react to customer and employee needs. The social activism of civil society showed its sensitiveness to issues that oppose the health of people with economic measures. The world will look different after COVID-19, and while the short-term outlook may be clouded by worsening economic indicators, history shows that markets and society can recover after a crisis with increased government involvement. The impact of the pandemic on the idea of globalism is more and more perceivable (Karajović, Kaličanin&Kaličanin, 2021, p. 319). “During pandemics, complex interdependence renders connectivity more dangerous, agents more reluctant to depend on one another – precisely because one’s local acts spill over their consequences far beyond”, assumes Pereira da Silva Gama (2020). Other scholars like Weder di Mauro (2020, pp. 31-36) also argue that the COVID-19 crisis will provoke a 21st-century institutional retreat and reframe globalization.

However, due to the current pandemic of COVID-19, the four freedoms of the EU Internal Market have been severely restricted. The EU countries took precautionary measures to protect the health and safety of their citizens. Most businesses were shut down, transportation was restricted, and the movement of people across borders was banned. This situation created inconvenient trends within the intra-EU supply chains, as well as in intra-EU trade. The latest projections point out that the world health crisis will result in a decline of 9.2% in EU exports and 8.8% in EU imports from third countries by the end of 2020. The trade diversion effect is strongly present in the case of the EU, meaning that the EU is trading more with partners within the EU rather than with trade-partners outside the EU (Makrevska, Kikerova &Toshevska-Trpchevska, 2020, p. 138). The EU members diverted their trade to partner countries, as most of them do not have lower comparative costs than the world average.
Disruption of the supply chains

Another aspect of the influence of the crisis is the change in the global supply chains. Value chain disruption remains a salient factor when the disease has become more widespread. The volume of trade has fallen more steeply in sectors characterized by internationalized and complex value chain linkages, particularly in electronics and automotive products (Vassileva, Simić & Stevanović, 2020, p.593). The COVID-19 pandemic unveiled weaknesses, as many businesses were initially unable to cope with shortages in supplies caused by closed borders and manufacturing sites. Nevertheless, most supply chains quickly recovered and have been affected less severely during subsequent waves of infections. The overall view of experts is that value chains can be strengthened through increased diversification rather than reshoring/onshoring. The crisis accentuated the strategic importance of value chains such as microelectronics, autonomous driving, batteries, and artificial intelligence in light of the accelerating digital transformation and growing demand for electric vehicles. These value chains need to receive continued attention and support to ensure access to materials, investment, and skills (de Vet et al., 2021, p. 9).

The crisis has enhanced the development of humanitarian supply chains connected with the trade of medical appliances and pharmaceuticals. The value chain that received the most attention during the pandemics was the production of personal protective equipment. While traditionally not considered a strategic value chain, the COVID-19 and subsequent shortages of medical face masks caused by spikes in demand highlighted the importance of this equipment. While advanced economies such as Germany and other European countries have specialized in the high-tech medical devices sector, low-cost countries such as China and Malaysia have been the leading producers of protective equipment, including face masks. COVID-19 greatly affected this market as many countries boosted domestic output and imposed export restrictions. The EU was among those imposing new export restrictions (de Vet et al., 2021, p. 49). Countries also stressed the importance of keeping supply chains open, and in many cases, import tariffs on face masks were lifted. Overall, the responses of the EU and its Member States to the shortages were a mix of openness and protectionism. While domestic production was increased, the EU overall relied on imports, and buyers were able to find alternative sources from other non-traditional exporters of personal protective equipment at short notice. Moreover, domestic production is likely to decrease once demand decreases again, and factories return to their original business models. Reshoring in this value chain is unlikely due to required economies of scale, established regional supplier networks, and the higher wages and sustainability standards in the EU. Instead, openness and fair access to international markets through collaboration with third
countries, while ensuring sufficient stockpiles of essential medical goods, proved to be the right way to deal with the crisis.

**Acceleration of digitalization and the green agenda**

The pandemic acted as an accelerator of digitalization. The differences in the severity of COVID-19 effects are partially explained by the ability of businesses to go digital. It gave impetus to e-commerce, e-banking, work from home, online education, distant medical assistance, etc., which require wider use of online activities. The implications of globalization for companies do not include only diversification of their international business operations all over the world and the boosting of new modes like e-business, but also other evolving views of the environment which take the form of “green business” and a new attitude towards renewable resources and alternative sources of energy (Vassileva, Talovic & Stojadinovic, 2018, p.76). The commitments are clustered around three areas: providing an enabling environment by improving connectivity and promoting entrepreneurship, increasing learning and innovation by public and private actors, including by raising enrolment in education, employing more researchers and investing more in R&D and transferring knowledge across borders, by expanding foreign direct investment in R&D activities, strengthening online learning and increasing international cooperation.

One of the positive effects of COVID-19 is that it provoked a wider use of “green” business, “green” supply chains, “green” energy, etc. (Vassileva, Simić, 2021b, p.36). The green economy agenda promotes sustainable patterns of production and consumption - resource and energy-efficient, low-carbon and low waste, non-polluting, safe and climate-resilient, phasing out toxic substances, using renewable energy sources, taking increased producer responsibility and reducing overall risks. The crisis has opened an immense opportunity to be used as a reset moment for the world and as a chance for the corporate sector to take leadership and embrace sustainability as a strategy for its own success and as a global target. The crisis forced consumers to re-assess their needs and way of life, and it allowed for a potential acceleration of the green agenda. For example, in the automotive sector, despite the decline in the demand for new vehicles, the impact of the pandemic on demand for electric vehicles seems to be much less severe. This also affects the forecasts positively for the rebound of the battery supply chain. Overall, the pandemic has increased the awareness of the benefits of the digital and green transition, which needs to be coupled with adequate investments and political drives (de Vet et al., 2021, p. 8).
CONCLUSION

COVID-19 has shaken the global economic landscape. It has affected the economy mainly through declining exports, which influences global economic activity, a decrease in demand as a consequence of measures and policies of entry restrictions that reduced travel, and reduction in domestic private consumption, which impacts the slump in business operations.

Alongside the disastrous consequences, the COVID-19 pandemic has some positive effects. It showed the crucial role of collective action and the joint efforts of the governments. Beyond the actions of the international organizations, in some cases, COVID-19 has also resulted in inter-governmental cooperation to overcome the shared challenges and achieve the SDGs. Due to COVID-19, the EU suspended all the austerity measures of the Stability and Growth Pact, allowing the counties to use their budgets according to their national needs and helping them through different types of financial instruments. While it is still uncertain whether the COVID-19 crisis will influence the orientation of the countries, i.e., if the countries use the funds properly and towards the strengthening of the Internal Market, for sure it will increase the importance of their regional policy. A change in the idea of globalism has been noted while increasing regional activities.

One of the key concepts of the analysis is that the virus is as economically “contagious” as it is medically “contagious”. The results of the discussion clearly indicate that economic measures have significantly mitigated the effects of the pandemic but also provoked a decisive transition to a green economy which will be a subject of further research. Locks, quarantines and border closures after the pandemic have led to a reduction in air pollution through reduced travel and production. The follow-up of the study might include analysis of further sequences based on a quantitative approach for a longer period of time. Thus, recognizing COVID-19 primarily as a global catastrophe, it is obvious that the pandemic can inspire future changes with positive effects on the environment and a decisive turn to the green agenda, opening the way to an accelerated return to normal economic activities, a turn to sustainable development and economic growth. Digitalization and investments in innovations and R&D, both outcomes and challenges of the pandemic, are critical for the future of countries and businesses.
REFERENCES


SOCIO-ECONOMIC RESPONSE TO CORONAVIRUS CHALLENGES

Comparative study of Serbia and the selected European countries

Nataša Stanojević
Slobodan Kotlica

Abstract: The strong negative socio-economic implications of the COVID-19 pandemic have spurred governments around the world into interventionism, which goes far beyond its response to the World Financial Crisis (WFC) in the past decade. The interventions of the Serbian government in this area are primarily analysed, but the measures of other European countries are also comparatively researched, as illustrations of different approaches to responding to the pandemic. The aim of the research is to determine the appropriateness of the socio-economic measures in Serbia. In this context, the research question is: Are the implemented socio-economic measures appropriate and sufficient to protect the domestic economy and to maintain the necessary level of supply and demand? The methods used in the research are descriptive statistics, classification and comparison. Socio-economic measures are divided into three groups. The first one comprises support to employment, the second includes direct support to households, and the third deals with the coverage of the socio-economic measures, distinguishing measures according to whether they apply only to the formal sector or both the formal and the informal sectors. The effects of the Serbian government’s measures will be

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assessed by: a) analysing the success of the fight against unemployment, indicated by the rates of formal and informal employment, b) data on the number of closed SMEs, c) assessing the impact on the revenues of the surveyed population by the World Bank, d) the results of the survey of state aid beneficiaries, by CEVES and the Government of the Republic of Serbia.

Keywords: socio-economic policies, COVID-19, unemployment, income support, debt relief.

INTRODUCTION

The COVID-19 pandemic and the subsequent lockdown imposed to prevent the spread of the infection had strong socio-economic consequences worldwide. Prohibitions on movement and work caused the halt of economic activity in many sectors and its disruption in others. International trade, as one of the key drivers of the economies of Southeast Europe in recent times (Antonis et al., 2003, Christie, 2004; Pjerotić, 2008; Kotlica, Stanojevic, 2018), has also been reduced, and occasionally completely discontinued, due to border closures. This is accompanied by losses of certain benefits of an open economy, i.e., a regular inflow of investments from foreign-owned companies, which, despite numerous weaknesses, are a key segment of the Serbian economy, as well as most transition economies (Estrin, Uvalić, 2013; Stanojevic, Kotlica, 2015).

This initiated strong defence mechanisms of companies as adjustment measures to the reduction of business volume: change of working hours, reduction of working hours, forced vacation, unpaid vacation and final dismissal or even forced closure.

In contrast to the previous crisis of 2008, which was usually accompanied by theoretical disputes pro and against state interventionism, during the 2020 pandemic, economists and governments agreed that government action was necessary in order to save the economy. Measures that would have seemed inconceivable prior to the pandemic have become standard around the world as governments try to prevent the economic recession from turning into a catastrophic depression.

Instead of the previously dominant policy of rescuing large companies during the pandemic, the recommendation of leading economists and world organizations was to introduce measures in the socio-economic sphere. Following the theoretical recommendations given in the first chapter, the focus of this paper is on the interventions of the selected governments only in the socio-economic sphere.

The interventions of the Serbian government in this area are primarily analysed, but the measures of other European countries are also comparatively researched as the illustrations of different approaches to the COVID-19 pandemic. The European countries used as examples of specific policies have not been defined in
advance but are selected because of their specific implemented measures for each group of socio-economic government interventions.

The aim of the research is to determine the appropriateness of socio-economic measures in Serbia and to compare them with the policies of other European countries. The analysis of the implemented measures and the achieved results of other European governments serves as a reference point for what the Serbian government could have possibly done better and/or what mistakes it has avoided. In this context, the research question is: Are the implemented socio-economic measures appropriate and sufficient to protect the domestic economy and to maintain the necessary level of supply and demand?

The methods used are descriptive statistics, classification and comparison, and they are part of the second chapter. The appropriateness assessment of the government interventions is based on the statistical description of the effects of these measures in Serbia and the selected countries. The effects are assessed: a) by analysing the success of the fight against unemployment, indicated by the rates of formal and informal employment, b) by data on the number of closed SMEs, c) by assessing the impact on the revenues of the surveyed population by the World Bank, d) the results of the survey of state aid beneficiaries, by CEVES and the Government of the Republic of Serbia.

Socio-economic measures are divided into three groups depicted in chapters 3-5 of the paper. The third chapter explores support for employment. Basically, this is support for domestic supply. Wage subsidy programs aim not only to support workers’ incomes but also to maintain links between employers and employees. The second and third groups of measures have the purpose of supporting domestic demand. The fourth chapter indicates how much of the workforce, thus indirectly the company and society, is covered by the government measures for keeping people employed. This section examines whether the implemented government measures cover only the formal or both the formal and informal employment sectors and whether they include particularly vulnerable groups of the population. The fifth chapter is Direct support to households, which can take two forms: cash payment and debt relief for households.

THEORETICAL CONCEPTS

When governments decide to intervene in the economy, given the limited resources, they are faced with many choices, such as who needs help and whether it is more important to save companies or individuals, large or small companies, what is the optimal scope of that support, etc. During any crisis, these issues lead
to divisions among theorists, as well as between theoretical concepts and government intentions. The 2020 pandemic is very different in that respect.

In June 2020, the Washington Centre for Equitable Growth released the *Statement to Congress Supporting Additional Economic Relief* (2020), signed by more than 150 of the world’s leading scholars. Former Federal Reserve Chairs Ben Bernanke was the first to sign, and the list includes “two former chairs of the Federal Reserve, four former chairs of the Council of Economic Advisers, and two Nobel laureates, among others” (Statement, 2020). These scholars pointed to the key importance of government action in the socio-economic sphere in order to save the economy instead of the dominant policy of rescuing large companies. They favoured solidarity instead of competition and social welfare instead of economic growth. The signers underscored the need for “continued support for the unemployed, new assistance to states and localities, investments in programs that preserve the employer-employee relationship, and additional aid to stabilize aggregate demand.” The signatories pointed out the consequences of insufficient intervention during the WFC: “Insufficiently bold congressional policy responses to the Great Recession unnecessarily prolonged suffering and stunted economic growth. Congress should not make this mistake again” (Statement, 2020). They emphasized that “an adequate response must be large, commensurate with the nearly $16 trillion nominal output gap our economy faces over the next decade” (Statement, 2020).

The latest and already famous report by Klaus Schwab and the World Economic Forum – *Covid-19: The Great Reset* (Schwab and Malleret, 2020) – also highlights the social concept of the desired response of states to the crisis. It is stated that the pandemic has made the government important again, which is also the conclusion of some recent work on the process of deglobalization (James, 2017; Lewis, Monarch, Sposi, 2018; Kotlica, Stanojevic, 2018). “Massive redistribution, on the one hand, and abandoning neoliberal policies, on the other – will exert a defining impact on our societies’ organization, ranging from how inequalities could spur social unrest to the increasing role of governments and the redefinition of social contracts” (Schwab and Malleret 2020).

Joshua Gans from MIT is along the lines of this by underlining the importance of supporting households, not large companies. Due to the dramatic drop in demand, there is an increase in poverty and a decline in the entire economy. He says: “if we let a pandemic run its course without mitigation that lowers economic activity, what happens is a recession. This is a recession where we see a reduction in the availability, ability, and health of the workforce as the virus spreads unabated. This causes a large reduction in economic activity” (Gans, 2020, p. 7).
Besides moral issues, according to all the above economists, “debate about saving lives versus saving the economy… is a false trade-off” (Schwab and Malleret, 2020). They point out two groups of economic reasons. The first is in favour of supply: “we cannot physically interact with one another, and, therefore, to a very large extent, we can no longer produce the economic outcomes we once could” (Gans, 2020). Similarly, more employees and workers would become infected and more businesses would just stop functioning” (Schwab and Malleret, 2021). The second reason is in favour of demand: “Because consumer sentiments are what really drive economies, a return to any kind of “normal” will only happen when and not before confidence returns” (Schwab and Malleret, 2020).

It follows that theoretically, there is actually no dilemma whether to save the economy or health (lives) because they are interdependent. Schwab and Malleret (2020) concluded that “governments must do whatever it takes and spend whatever it costs in the interests of our health and our collective wealth for the economy to recover sustainably, making it clear that only policy measures that place people’s health at their core will enable an economic recovery.”

In addition to these most influential scholarships, government interventions in the economy during the COVID-19 pandemic have been the subject of a huge number of scientific articles. The interest that the pandemics stimulated in science in a few months is equal to the one that is dedicated to the entire World Financial Crisis. We will list some of the most important for this article. Baldwin and Weder di Mauro (2020) edited the thematic Proceedings with the key subject of policymakers’ responses to pandemic effects. Blanchard, Philippon and Pisani-Ferry (2020) suggested a new policy “toolkit” for the time after COVID-19. Felbermayr (2020) edited the thematic Proceedings that consider the effects of the pandemic on future directions of globalization. Schwab and Zahidi (2020) investigated the challenges and the future models of jobs. Alberola et al. (2020) analysed differences between potential fiscal effects in advanced and emerging market economies. Eichenbaum et al. (2020) created a universal model of the interaction between economic decisions and epidemics.

**METHODOLOGICAL APPROACH**

In line with the dominant theoretical orientations towards remedying the socio-economic consequences of the COVID-19 crisis, the key elements of an appropriate policy should be “income compensation and active labour market policies” (ILO, 2020). During the first wave of the pandemic, many national governments have already implemented large socio-economic packages, providing massive fiscal support to protect employment, households and vulnerable populations.
The governments’ interventions in this paper are classified on the basis of the Oxfords’ economic support index (OxCGRT, 2020), which includes:

- income support at a level of less than 50% and greater than 50% of income,
- support for formal and informal employment, and
- measures focused on debt relief of households.

Additionally, we have included the measures of direct financing of households, either in cash or exemption from certain household expenditures, according to the IMF (2020) data on individual government package measures.

Based on the stated principle, we have classified the measures of the Government of Serbia and ten other European countries.

**Table 1. Socio-economic measures of selected European governments**

<table>
<thead>
<tr>
<th>Country</th>
<th>Income support</th>
<th>Coverage of measures</th>
<th>Support to households</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>≤ 50%</td>
<td>≥ 50%</td>
<td>Formal</td>
</tr>
<tr>
<td>Serbia</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Croatia</td>
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<td>+</td>
<td>+</td>
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<tr>
<td>France</td>
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<td>Germany</td>
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<td>Greece</td>
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<tr>
<td>Switzerland</td>
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</tbody>
</table>

Source: Author’s according to the OxCGRT, 2020 and IMF, 2020.

The assessment of the adequacy of government interventions is based on the statistical description of the effects of these measures in Serbia and the selected countries. The effects of the Serbian government’s measures will be assessed by:

a) analysing the success of the fight against unemployment, indicated by the rates
of formal and informal employment, b) data on the number of closed SMEs, c) assessing the impact on the revenues of the surveyed population by the World Bank, d) the results of the survey of state aid beneficiaries, by CEVES and the Government of the Republic of Serbia.

**INCOME SUPPORT OR EMPLOYMENT SUPPORT**

Only in the first month after the state of emergency was declared, approximately 11,000 people in Serbia lost their jobs (IMF, 2021). The most affected sectors are catering, wholesale, retail, business services and real estate.

To overcome this problem, the Serbian government has adopted and implemented the following measures:

- Three-month deferral of payroll tax and social security contributions for all private companies, to be repaid in 24 instalments starting from 2021 (IMF, 2021)
- Net minimum wage for each employee in micro, small and medium enterprises for three months;
- 50% of the minimum wage for each employee in large companies whose workers are on forced leave;
- The Tax Administration has published a list of about 12,000 companies that meet the criteria for state aid in the form of another minimum for December. This aid was aimed at the most vulnerable sectors, catering and tourism.

According to the OxCGRT, income support higher than 50% of the salary was provided by almost all European Union countries, as well as by Serbia. The exceptions are Italy, Croatia and Hungary, which reimbursed less than 50%, and Estonia, which did not provide revenue support. Some countries reimbursed these amounts of salaries to companies in order to preserve employment; others paid these amounts to workers who lost their jobs. The Serbian government focused on providing support to employers to retain workers.

The effects of the implemented measures on unemployment are given in Table 2. The results were calculated according to different methodologies, which is why they are not comparable between countries. They are given to illustrate unemployment trends in the selected countries during 2020.
The data show varying degrees of success in maintaining unemployment at pre-lockdown levels. The Government of Serbia managed to prevent a larger number of the unemployed thanks to assistance measures, first of all, payment of the minimum for three months to micro, small and medium enterprises, deferral of taxes and contributions, application for cheap loans of the Development Fund. What is interesting is that the number of employees in Serbia in the third quarter of 2020 was 2.0%, higher than in the same quarter of the previous year. Still, staff reiterated its expectation that unemployment would likely rise later in 2020 and early 2021 after the minimum wage subsidies and other measures supporting firms expire (IMF, 2021).
The governments of France, Italy and Greece have also successfully maintained employment. The data show a minimal increase in the unemployment rate in these countries. In these three countries, as in the case of Serbia, this is the result of strong government support for employment. France has set aside 31 billion euros for keeping people employed (chômage partiel). “Companies pay their workers 70% of their gross salary (which is roughly equivalent to 84% of net salary) or 100% of net salary for those at the minimum wage” (Anderson et al. 2020). Italy and Greece, as shown in Table 1, have provided strong income support to companies since the beginning of the pandemic in order to retain workers. Greece has a high unemployment rate, but that is not caused by the pandemic. Maintaining employment during the pandemic in the Greek economy, where tourism is the main activity, can be considered a significant success for the Greek government.

Quite different examples were provided by the governments of Ireland and Norway, which provided significant income support and yet recorded a significant rise in unemployment. Norway provided “larger wage subsidies for temporary lay-offs, more generous unemployment benefits, temporary lowering of the employers’ social insurance contributions” as measures for the protection of household income (OxCGRT, 2020). Unemployment in Norway, although not generally high, rose from 3.5% of the workforce in February 2020 to 5.2% by autumn (Table 2). In Ireland, nearly a third of the workforce is receiving the new Pandemic Unemployment Payment (PUP), the benefit for those unemployed due to COVID-19. Before the crisis, just 7% were receiving Jobseeker’s benefits (Tetlow, Pope, Danton, 2020). Ireland has also experienced a large increase in unemployment from 4.9% to 7.5% (Table 2).

What is the cause of that?

Socio-economic measures were not at the forefront of the Norwegian government. Much larger funds have been invested in rescuing large Norwegian companies and banks, grants for start-ups and subsidies for domestic air routes.

However, despite large investments have been made in the preservation of large economic entities, the lack of funds is not the reason for higher unemployment growth than in other European countries because Norway and Ireland do not have a problem with limited financial resources. We believe that the growth in unemployment was contributed by the measures that support income, but not employment. Serbia and other countries that did not record a significant increase in unemployment directed the projected amounts to companies so that their employees would not be a burden. The Serbian government, by providing support for earnings, has also conditioned companies not to lay off workers until March 2021. In contrast, Norway and Ireland have directed huge amounts of income to the unemployed. Thus, no motivation was created for workers to keep their jobs, nor were employers motivated not to lay off workers. Companies are strongly
financially supported regardless of layoffs. So, there was no reason for them to lose profits on surplus workers.

We will focus on the assessment of the appropriateness of the Serbian government’s measures, which is the topic of this research. The government has allocated huge funds and invested a lot of effort, and the effects on unemployment are, as the data show, excellent, at least in the formal employment sector. The IMF and Serbian authorities also estimated that the fiscal support provided in 2020 was widely appropriate and helped households and companies overcome the COVID-19 disturbances (IMF, 2021). The results of the survey of economic entities, conducted by the non-governmental organization CEVES (2020), also show a positive assessment. The majority of respondents assessed the government’s measures as very useful, and the most used measures are those related to the payment of minimum wages and deferral of tax payments. The UN Serbia and UNDP (2020) also stressed that “although the crisis caused by COVID-19 had a significant impact on the economy and society in Serbia, they expressed short-term resilience and ability to recover”.

On the other hand, the same provisions, due to inaccuracies, have incurred costs not only to the state budget but have also damaged many employees. Entrepreneurs, flat-rate entrepreneurs, entrepreneurs in agriculture and micro, small and medium enterprises are entitled to payment of non-refundable funds from the budget in the total amount of three minimum net salaries (three times 30,000 dinars). So, only large companies are exempt. Since no criteria were prescribed for companies to apply for this help, as many as 232,000 business entities (more than a third) applied, with a total of more than a million employees. Among them, there were companies from the sectors that do not have any business risk related to the pandemics (private faculties and schools, which certainly collected tuition fees for enrolled students at regular prices).

Yet, it is noticeable that this segment of socio-economic measures in other countries implies certain requirements. In the EU, there are precisely defined categories of economic entities that can apply for state aid by providing clear evidence that they suffer losses due to the lockdown.

France, with a high degree of intervention in the socio-economic sphere, defined that a “Partial activity scheme can be requested by businesses in exceptional circumstances” (KPMG, 2020). These exceptional circumstances are specified by the already existing French law (KPMG, 2020). This is the simplest solution which did not require redefining and adopting the criteria for assistance.

In Belgium, employment-related measures require that “businesses must file a specific application form wherein they must provide evidence of the financial impact of the crisis on their business” (KPMG, 2020).
In Greece, companies do not have to prove that they are vulnerable to the pandemic, but sensitive sectors have been defined that could not avoid the negative consequences. “Companies in the sector of tourism, air and sea transportation, passenger land transportation, restaurants, culture and sports as well as in any other significantly affected the business sector on the basis of their Professional Activity Codes (ΚΑΔ)...” (KPMG, 2020).

In Croatia, it was quite difficult for employers to receive the assistance of only HRK 2,000 per employee. They had to: “prove that the COVID-19 epidemic has had a negative effect on its business, thereby justifying the need for the expected decrease in total monthly working hours by proving a decrease in turnover of at least 20% in the month for which the grant is sought, compared to the same month of the previous year and providing a reason for the decrease, such as a decrease in orders, inability to deliver finished products, etc.” (KPMG, 2020).

Only in Serbia, whose economic resources are smaller than in all the above countries, it was enough to have a registered company and submit a request in order to get minimum wages for all its workers.

SUPPORT FOR INFORMAL EMPLOYMENT

Informal employment is defined in different ways, but it always refers to work without a formal contract – employees without a contract, self-employed, helping household members, agricultural workers, and domestic workers. The informal economy is present in all societies and at all social levels.

In Serbia, the measures to help with unemployment in this segment of the workforce have been completely absent. An additional problem is that informal employees have borne the brunt of the lockdown during the pandemic, and another problem beyond all this is mostly young people, who are the most vulnerable category in terms of employment. These are employees in cafés, which were closed for health security reasons, promoters in shopping malls (also closed), engaged through youth cooperatives in all kinds of jobs, and students doing practice work in craft service sectors, such as hairdressing and beauty salons (also closed for a few months), and similar.

Informal employment in Serbia is continuously high, and according to the Labour Force Survey for 2019, among 2,901,000 employees, 529,200 were informally employed, which is 18.2% of the total number of employees (RZS, 2019). Udovički and Medić (2021) estimate that a decline in informal employment amid the crisis (late March and mid-April) was up to 80% compared to normal levels, while at the end of the second quarter and during most of the third, it was about 20% lower. “Also, the number of the informally employed does not say anything about the
working hours of informal workers, and there are indications that they also dropped significantly during the crisis, and thus wages” (Udovički, Medić, 2021, p. 6).

Figure 1. Formally and informally employed in Serbia (percent of change)

Source: authors according IMF, 2021, p. 12

Figure 1 shows the changes in employment and unemployment rates in Serbia on a year-on-year basis. We notice great instability in the informal sector (brighter line), and the labour market outlook remains uncertain. The decline in informal employment in the second quarter of 2020 was dramatic, i.e., about 25% lower than in the same period of the previous year (Figure 1). The negative impact of the pandemic on informal employment in 2Q2020 seems to be partially offset in 3Q2020.

Even before the crisis, informal workers were generally in a significantly more difficult position than formal employees. The informal non-agricultural labour market before the crisis consisted of about 180,000 informal workers. Compared to the formally employed, informal workers earn on average about 30% lower wages. Informal employment was marked by a very strong adjustment during the state of emergency, especially in cafés and restaurants, where it fell by at least 90% (Udovički, Medić, 2021, p. 65). As mentioned on the previous page, these are economic activities that otherwise informally employ a large number of workers. According to Udovički and Medić (2021), in 2021, the number of informally employed will decrease by 10,000-42,000 unless additional support from
government measures is provided. However, without the social responsibility of the companies themselves, especially in extraordinary circumstances, no government can fully respond to the social challenges of informal employment.

The previously mentioned measures, which were successful in terms of maintaining formal employment, did not have any effect on the informal segment of labour because they were not applicable. The Serbian government has failed to support this vulnerable population. None of the strategic documents or the mentioned assistance plan related to COVID-19 is applicable to these workers (UN Serbia and UNDP, 2020), except for the one-time assistance of 100 EUR to all adult citizens of Serbia.

Serbia is not the only country that has completely excluded this segment of society from state aid. Other countries that did not include informal employment in the support projects are many EU countries: the Czech Republic, Slovakia, Hungary, Croatia, Romania, Sweden, and Germany, which had a one-time payment for this category in December. Apart from Serbia, among other non-EU European countries, only Albania has included the informal sector in its unemployment support program (World Bank, 2020).

According to the OxCGRT (2020), the governments that supported this segment of the workforce in the same way as the formally employed from the beginning (in March) are the UK, Italy, Denmark, Finland, France and Greece. From October 2020, Austria, Belgium, the Netherlands, and Poland have also started to support this sector.

**DIRECT SUPPORT TO HOUSEHOLDS**

The most common form of direct support to households during the pandemic is debt relief. According to the Oxford support index (OxCGRT, 2020), some countries had a narrow, others a broader debt relief context, but almost all included it in the pandemic mitigation program.

The Serbian government’s direct support to households is more diverse than in other countries. It consisted of:

- Debt relief - instalments of all loans were deferred, without any costs and additional interest;
- A universal cash transfer of EUR 100 to each citizen over the age of 18 (about RSD 71bn);
- A one-off payment to all pensioners (RSD 7bn)

Almost all European countries have debt relief. The exceptions are Norway, Switzerland, and Bosnia and Herzegovina, which failed to implement any debt relief...
measures. Germany might also be put into this group although it had some narrow debt relief for only 3 months during the first wave of COVID-19 (OxCGRT, 2020). Germany has provided large debt relief to German companies, but not to households. The postponement of consumer loans was only for three months, supported by evidence of the seriousness of the situation. “For consumer loan agreements entered into before 15 March 2020, claims for repayment, amortization and interest which are due between 1 April and 30 June 2020 are postponed by 3 months from their due date if and to the extent the consumer suffers a decline of income due to the COVID-19 pandemic, making fulfilment of the relevant obligation unbearable for the debtor, specifically in cases where the debtor’s means for living are endangered” (KPMG, 2020).

Similar to Serbia, Hungary had a universal loan deferral: “Loan repayments are suspended until the end of 2020 for all private individuals and businesses who took the loans out before 18 March” (KPMG, 2020).

Direct support, unlike debt relief, is not widespread. Cash transfer programs in more than 100 countries have been introduced in response to COVID-19, but cash transfers have been targeted at sensitive categories as a way to provide immediate economic relief to households affected by COVID-19.

Germany has had several useful forms of direct assistance: reduced electricity prices for consumers, € 0.2 billion to single parents for additional relief and benefits, Children’s Bonus of € 300 per child (Anderson et al. 2020). These measures are in a way universal. Electricity has become cheaper for everyone, and all children have received financial assistance, so it has not been proven whether someone needs it or not. Due to these measures, in Table 1, Germany is marked as the only European country besides Serbia that had such direct support for the population. According to available information, outside of Europe, only the United States has provided universal direct aid of $600 to all residents.

CONCLUSIONS AND RECOMMENDATIONS

During the COVID-19 pandemic, many governments opted for interventionism that went far beyond responding to the global financial crisis (WFC) in the previous decade. In addition, in the socio-economic sphere, generally, governments have adopted more suitable measures as a response to the pandemic than to the challenges of the WFC.

Serbia stands out for the government’s great commitment to mitigating the socio-economic consequences of the 2020 pandemic, especially given its limited financial resources. According to the results of this research but also the assessments of the OECD, the IMF and the results of CEVEC surveys, which are listed
in this paper, most of the measures of the Serbian government were appropriate and useful. According to the OECD, the most effective measure in Serbia was to cover wage costs (OECD, 2020b). Also effective, albeit somewhat less, were moratoriums on debt repayment.

The shortcomings in terms of the effectiveness of the Serbian measures relate to non-targeted income support to all small and medium-sized enterprises. This failure was corrected with the next aid in December when the funds were directed to the sectors that suffered the severest damage, similar to the above-mentioned Greek strategy. This measure was effective because, by that time, it was obvious which economic sectors were most affected. However, to prevent abuse of the state aid aimed at companies, workers, and socially vulnerable categories, it is necessary to revise the records and establish procedures for different crisis scenarios. A more thorough approach would contribute not only to a fairer distribution of funds, but assistance would be timely and organizationally facilitated. EU countries, as expected, had a more rational distribution, with clearly defined priorities regarding the distribution of aid to companies. However, this is only one of the conditions to mitigate the impact on the economy and society.

The biggest obstacle to the effectiveness of all measures is the invisible informal segment of the Serbian economy. This is a problem that the government will not be able to respond to in a shorter period of time, but it can intensify efforts to achieve greater transparency of employees in temporary and additional jobs, as well as the inspection of labour, especially in the private sector, whose labour market is largely out of control.

In addition, it is necessary to revise and continuously update and control the database of socially vulnerable categories. Identifying these groups in Serbia is inefficient and unfair, also due to the lack of inspection. Social benefits are insignificant in terms of amount for those who really need help, while, on the other hand, there is a large amount of abuse. Reform cannot be carried out in critical situations when thousands of people are endangered. It was not possible during the pandemic crisis, but for future crisis situations, it would be extremely important for the government to have information about the most vulnerable residents and their data at all times. The aid of 100 euros to every adult citizen is a measure that is good for the economy and lots of residents. However, if the total amount of about 600 million EUR had been directed to poor families, in addition to justice and humanity, the effects on the economy would have been immeasurably greater because these are the groups of consumers who generate demand for basic goods. And that is what drives the economy.
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THE POOR DONOR AND THE RICH RECIPIENT. FOREIGN AID AND DONORS’ COMPETITION IN THE COVID-19 ERA

Igor Pellicciari¹

Abstract: Much of the international relations during the COVID-19 period concerned inter-state health aid, ranging from emergency supplies of medical supplies during the virus outbreak phase to the distribution of vaccines during the following phase of immunization campaigns. These were bilateral assistance interventions, with the multilateral dimension effectively absent and unable to act. Motivated by geopolitical logic, they were expressions of the foreign policies of the states involved, re-proposing the pattern of the War of Aid as seen in the main international crises of recent years (from Ukraine to Syria, from Kosovo to Afghanistan). The emblematic case of the emergency phase was that of Italy, the first accessible world pandemic scenario. Alongside a classic competition between donors, won by Russia, there were a series of unprecedented cases, such as that of a Rich Beneficiary, a G7 country with its own strong autonomous spending capacity – assisted by Poor Donors, bearers of symbolic aid. The following phase has seen the clash between a Western Economic Vaccine model, driven by more private and commercial logic, and an Eastern geopolitical vaccine, of public origin and controlled entirely by the States that have used it as an instrument for their foreign policies. The worldwide visible case of the supply of Sputnik V to the micro-Republic of San Marino, the first sovereign country in the world to become COVID-free, has shown that the main importance of the vaccine was in its being an instrument of foreign policy and geopolitical impact.

Keywords: foreign aid, foreign policy, COVID-19, vaccine, Russia, Italy, San Marino.

Writing in 2021 about any topic, especially if linked to the international dimension, requires an attempt to understand how much it has been affected by COVID-19. Paradoxically, this has led us to focus more on the “after” than on the

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“while”, to investigate an uncertain future more rather than a certain present, and to outline some already visible scenarios, defined by trends consolidated since the first months of this emergency.

Among these, one of the main trends concerned the powerful rise of State Aid as the main vector of international relations, particularly in the very first months of the pandemic. Then it opened the door, in the following phases of the pandemic, to the phenomenon of the geopolitical use of the vaccine.

The following article explores these Aid relationships according to a division into three phases that marked the pandemic progress in the first 18 months since its appearance. The first phase of the virus outbreak (February to May 2020), the second phase of stabilization in Europe and surge in the rest of the world (June to October 2020), and the third phase of recurring waves of infection (attenuated around June 2021).

**PANDEMIC PHASE ONE: THE ECLIPSE OF THE MULTILATERAL**

The main characteristics of the initial phase were the fact that the absolute protagonists of this Aid diplomacy were the traditional Nation-States, and that basic medical-sanitary supplies were at the centre of assistance. The states were the only ones to bring to life, on a bilateral basis, an international scene that had suddenly frozen, aggravated by the initial lack of information on the new virus and by the unpredictability of the duration of the pandemic itself. These emergency medical devices (masks, gloves, sanitizing products, etc.) became in the first quarter of 2020 the main object of Aid, real or promised, incoming or outgoing, between countries.

Although COVID-19 highlighted problems of internal cohesion within sovereign states themselves, when imposing restrictive measures on regional and local authorities to contain the virus, what has caused a stir during this phase was the absence of a multilateral dimension.

None of the main international multilateral organizations seemed to be spared by this crisis.

Politically weakened by the unilateral decision taken by the member states to cancel Schengen, the sacred symbol of European integration, the EU has lost months discussing how to organize aid, moreover directed internally to its own member states. In doing so, emergency interventions directed at the bordering areas that were traditional destinations of the EU’s massive aid assistance — making Brussels one of the main donors — have taken a back seat. NATO, for its part, has done even less and has not gone beyond simple statements of political
condemnation of Russian and Chinese Aid to Italy. Furthermore, it was unable to organize any of its own initiatives or to solve “logistical” tensions among allies, such as Turkey’s blockade of protective masks destined for Italy.

Perhaps the most plastic demonstration of the crisis of the multilateral dimension during COVID-19 is the passivity of the United Nations. After having invested considerable energy in an attempt to refocus on the theme of climate change, and also to survive as an organization and to avoid spending reviews applied to its excessive and expensive branches, the UN was particularly unprepared for the virus. The same fate befell the numerous UN agencies, with the sole brief exception of the WHO, which initially seemed to be sheltered from this crisis of the multilateral dimension.

Instead, after a series of delayed decisions with respect to the scenario (the official announcement of the pandemic emergency), or contradictory recommendations (regarding the usefulness of tests and masks), or stances on the genesis and management of the pandemic (openly praising Beijing), the respect for the organization gave way first to suspicion and then to open criticism with widespread sarcastic tones. Unable to secure its own political autonomy from its shareholder nation-states, the WHO has shown the limits of Organizations that have never become autonomous Institutions oriented towards the management rather than policy-making, incapable of imposing inconvenient technical truths on the political pressure of the moment.

THE ITALIAN CASE: RICH RECIPIENT AND CATCH ALL DONORS

The greatest changes in Aid recorded in the first phase of COVID-19 concerned Italy, not so much because of the policies implemented by Rome to fight the pandemic, but because this was the initial “accessible scenario” of the virus outside China. The most evident peculiarity with respect to the past was the sudden and unexpected emergence of a “Rich Recipient”; a country among the world’s leading economies, with a consolidated democratic constitutional political system and its own significant spending capacity. Such a high level of development and stability, both political-institutional and economic-social, was unprecedented for a Recipient country. This has allowed Italy to act as an atypical Recipient. Not in transition and with a functioning political system, it has been able to maintain

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high levels of negotiating power to guide and monitor its territory with respect to Donors coming from outside. In addition, Rome found itself in the rare situation of a recipient that had, regardless of the Aid received, its own pre-existing and large financial resources, typical of a G7 country, to implement autonomous defensive actions against the virus.

These actions concerned the approach related to the procurement of protective devices (which, incidentally, often turned out to be of very poor quality) for about 4 billion Euros, entirely self-financed by the resources of the *Rich Recipient*. Donors had no say over these purchases. The sudden appearance of an unexpected scenario of such geopolitical interest has made many nation-states realize the potential for diplomatic reinforcement that an aid intervention in Italy would have brought, regardless of its size. Therefore, starting in March 2020, there has been an outpouring of various initiatives of emergency bilateral aid, directly emanating from the governments of Donor States. Among the incoming Donors, Russian, Chinese, and US aid moved simultaneously, although with a considerably different intensity, in a strictly separate mode and total autonomy, showing the main political philosophies underpinning their different approaches to aid.\(^3\)

This was a revival, in a new context, of the “War of Aid” already observed in other recent contexts (above all, Ukraine and Syria) and which, in the global reshuffling of the cards and zones of influence at a global level, has increasingly seen the same Key Donors competing for the primacy of intervention towards the “new” recipient of the moment.

Geopolitical competition aside, Russian aid has been the most evident one in Italy during the first emergency phase. What aroused anxiety in the West was the military character of this aid delivery, managed entirely by the Russian Ministry of Defense (it is quite unique to see Russian soldiers operating in a NATO country). As part of the “From Russia with Love” campaign, Russia sent eight mobile brigades specializing in virology and bacteriological warfare to Italy, along with medical equipment and machinery for assisted ventilation and disinfection. In the competition among Donors in geopolitically important Italy, hypothesizing the objectives of the Kremlin’s aid campaign has been of central importance in understanding its goals in politics, not just foreign policy.

Based on the available information, three different types of interest behind the Russian intervention in Italy can be identified: geopolitical, domestic political and strategic health intelligence. The geopolitical motive is the one in best

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continuity with the idea of state aid in the Soviet sense, inspired by the Kremlin’s foreign policy tradition of rewarding allies or more generally friendly countries, with whatever means of support at their disposal. Repeated almost mechanically by diplomats on top of the Russian governmental machine in the second decade of Putin’s legacy, this approach considers the (geo) political objective as prevailing over economic costs, seen with resignation as a collateral price that is acceptable to achieve the goal. Well, Italy has long been consolidated as NATO and the EU’s closest country to the Kremlin, regardless of the governments that have succeeded one another in Rome (Lilik, 2018); reason enough to continue to pay attention to it, even more so after its energy dependence on Moscow has increased due to the Libyan crisis.

The second reason for the Kremlin’s intervention to the benefit of Italy was Russia’s internal political situation, where one of the main changes during the Putin era has been the shifting of the political system from a legitimacy based on the availability of financial resources to a real popular consensus.

In just over three decades, in order to limit the weight and excessive power of the oligarchs and return to the primates politicae of state institutions, efforts have been made to develop a lower-middle class, largely coinciding with the enormous civil service and acting as the backbone of consensus in the country. This led to a new and unusual (in the Russian tradition) attention of the establishment to the views of this class, which in recent decades has developed a popular orientation of widespread attraction towards Italy. Perhaps because it is rigorously de-politicized, the penetration of Italian culture and commerce into Russia has established itself from the bottom up in all sectors of Russian society and the consumer economy, from clothing to services, from tourism to entertainment. Promoting towards Italy a campaign of aid and love (an unusual word for a military mission, generally identified by terms like friendship) was a popular move domestically, intended to strengthen the legitimacy of the Russian establishment.

The third reason at the root of Russian aid to Italy has been evocatively defined as strategic-sanitary intelligence and reveals why Moscow sent a military contingent rather than a civilian one.

As a country traditionally obsessed with the objective of defending from external attacks a territory too vast to be guarded, since the years of the Cold War, Russia has also developed among its possible crisis scenarios those resulting from a chemical-bacteriological attack linked to terrorist attacks.

Consequently, over the decades, considerable resources have been allocated to chemical-bacteriological research and channelled into the military sector, simply because in Russia, high-level technical innovation has always been first developed
within the defence sector, even on topics that in the West are of civil competence. It is credible that the Russian intervention was aimed at collecting directly in the field information on bio-data regarding the progress of COVID-19 in Bergamo and Brescia, both to obtain valuable information on virus mutations in advance and to accelerate its own research work to develop a vaccine against COVID-19.

THE POOR DONOR

Another novelty of the Italian case, until then considered a textbook hypothesis, was the appearance of what could be called Poor Donors. In other words, new Bilateral Donors were coming from countries considered developing according to the common criteria established by the OECD (OECD, 2020). As protagonists of an unprecedented relationship of the type “Poor Donor-Rich Recipient” in Italy, they have enjoyed great international visibility even if their interventions have been very limited in size.

In light of the existing geopolitical relations between the two countries, the most interesting case was that of aid from Albania, which for decades had been relegated to the role of Recipient of Aid, particularly from Rome.

Following the realist approach according to which the Donor dominates the relationship with the Recipient, it is legitimate to ask what pushed Albania to organize aid to Italy and what advantages it received in geopolitical terms. And, equally, why did Rome accept a limited aid campaign worth only 100,000 USD (!!!) and which consisted of a number of medical and nursing volunteers sent to Italy? Actually, with its symbolic intervention, Tirana has immediately capitalized on several important results that justify its effort to be a Donor, such as an international prestige and a return of sympathy collected in public opinion, not only Italian but also a strong surge in domestic popularity, due to the reversal of the narrative of the country-always-recipient that has historically characterized Albania, especially in relations with Italy.


Among the medium-term results, there was Albania’s legitimate expectation of receiving future privileged treatment from Rome on sensitive bilateral issues between the two countries, such as, for example, the regularization in Italy of a large Albanian community of recent arrival, as well as Rome’s convinced support for Albanian membership to the EU, currently undergoing discussions of timing rather than means. Finally, with the foreseeable return after the pandemic emergency to the classic role of recipient of assistance from Italy, Tirana would certainly benefit from greater negotiating power with Rome on the conditions to receive future incoming Italian aid.

In the light of such Albanian intervention of maximum yield at minimum cost, it becomes even more interesting to look for Rome’s realist motivation in accepting (rather than refusing) a small aid coming from a minor country. The motivation can be found in the Italian government’s need to escape the pressure of the competition among American, Russian and Chinese aid, with explicit Western invitations to refuse Moscow’s and Beijing’s aid. In accepting aid from Tirana and other poor donors (such as Cuba, Tunisia, etc.), the centre of gravity of the internal discussion shifted from the insidious level of “which aid to choose” to the more easily manageable and de-politicized level of “any aid, even small, is welcome”. Not to mention that Tirana’s rhetorical statements on the importance of “not forgetting your friends in time of need” came at the appropriate moment for Rome, as the Recovery Fund was under negotiation in Brussels, and they appeared to be addressed in polemic to the countries led by the Netherlands, who promoted a more limited use of the European solidarity instrument.

The perfect timing of these messages for Italy, credible because they came from a third party, leads to the hypothesis that Rome itself advised Tirana to take the field, even if only with a symbolic intervention. This would help make sense of the Albanian aid intervention and how it has easily subverted the traditional belief that the Donor is always politically superior and more influential than the Recipient (Pellicciari, 2020).

Pandemic Phase 2 and 3: Vaccine as Aid

The Donors competition in the first phase soon led to the assumption that the confrontation would shift from emergency medical interventions towards the development of a COVID-19 vaccine.

This became a strategic weapon for those who had full control of it, similar to the impact on international relations, with due distinction, of the nuclear weapon after World War II. Although it has established itself as a primary resource aspired
to everybody without exception, the vaccine has not had the same value everywhere as a geopolitical instrument of aid.

There has been a profound variation in intensity and efficacy of its use between Western countries (especially in the EU) and Eastern countries (especially Russia and China). With a clear predominance of the latter over the former. Between the two, there has been a profound difference in the morphology of the production and distribution chains of a “Western Economic Vaccine” and an “Eastern Geopolitical Vaccine”. The main differences between the two have been generated by a clear dichotomy between the private-entrepreneurial approach of the former and the public-state approach of the latter, respectively (Pellicciari, 2021)

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**The Eastern Geopolitical Vaccine**

The Eastern Geopolitical Vaccine (EGV) was born under a rigid state matrix that sealed its fate from research to distribution. It has been able to count on the support of national governments in states with predominant public economies and specialized know-how in the defence sector, inaccessible to the private sector.

The first geopolitical advantages of this genesis were both the availability of immediate and almost unlimited public resources for research, free from cost-benefit considerations typical of the private market, and the possibility of enjoying unmediated political support and greater operational freedom. The Russians and Chinese have followed protocols (often military ones) that are much more
streamlined than those of the West. At the same time, they were less bureaucratized and less transparent, not subject to the oversight of independent third-party authorities, a crucial aspect in the initial phase of research and testing. This is the emblematic case of the Sputnik V vaccine, whose state imprint was already underlined by the “sacred” name chosen to baptize it, and whose discovery was experienced and presented by the Kremlin with the same satisfaction as when it achieved primacy in the space race during the Cold War.

The few experimental data released by the Russian health authorities – the main argument used at the time by sceptics of the efficacy of the discovery – now suggest that the initial phase of research and first elaboration of the vaccine started in the defence sectors, destined to remain secret by definition. Originally conditioned by the public sector, the EGV has been a monopoly of the State, which has been able to decide its use thanks to the direct political control of the related operational tactics, starting from the crucial definition of the vaccine distribution plans. At the domestic level, starting national campaigns for mass immunization earlier than the West was charged with a political significance of strengthening consensus towards the establishment to the point of placing this objective among the primary goals pursued by the EGV, not only Russian but also Chinese. However, it is at the international level that the EGV has fully expressed its foreign policy potential, which is determining if compared to the almost non-existent one of the Western Economic Vaccine.

The state matrix made it a flexible geopolitical tool, allowing Moscow and Beijing to move as Donors and decide to whom they would deliver it first on privileged terms. Following an established political tradition, the vaccine was conceived as an instrument of aid power politics to be directed to friendly and/or allied countries that formally requested it, exclusively through diplomatic channels. The choice of where to direct Sputnik V beyond national borders was therefore a purely foreign policy decision taken at the government level, with the Russian Direct Investment Fund that entered the field only later to deal with technical aspects without being able to deviate from the strategic indications indicated upstream. The fact that the international target was more important than the domestic one was demonstrated by the strict separation between the rapid progress of the agreements for the export of Sputnik V (in more than seventy countries) and the slow progress of the Russian national immunization campaign.

In light of this strong identification with foreign policy, the final important aspect of the EGV is its clear positioning within the bilateral relations of the Donor State at the expense of the multilateral dimension. Sputnik V has been sent by Russia only to those countries that have formally requested it through institutional governmental and diplomatic channels. Neither parallel negotiation channels on
a commercial basis nor private mediation, tolerated in the past in other fields such as energy, have been foreseen and tolerated.

The Western Economic Vaccine

The Western Economic Vaccine (WEV) has proceeded in the opposite manner to the Eastern one. It was inspired by commercial logic and conditioned by declared primary economic-social goals. The commercial logic was attributable to patent holders and those primarily responsible for its production, i.e., pharmaceutical companies of large dimensions. These were private entrepreneurial subjects driven by declared goals of profitability and, by definition, scarcely sensitive to a political rationale.

The economic and social goals have instead been emphasized by the same Western governments that were concerned about the health crisis and the widespread tensions resulting from prolonged anti-contagion measures, and who hailed the vaccine as the main way to reconcile economic recovery and public health. Surprising, particularly within the European Union, has been the lack of initial political debate on the appropriateness of such a strongly private-commercial connotation of the vaccine, which did not take into account the European political tradition of keeping the essential community services public. This convinced placement in the private sector negatively affected government control over vaccine production as well as its possible future geopolitical use.

First, Western leadership could not take credit for the discovery of the vaccine, which excluded them from the effect of increasing domestic consensus and popularity, observed instead with the Eastern Geopolitical Vaccine. But the most obvious negative impact of the private, de-politicized status of the vaccine on Western countries lies in the failure of their respective foreign policies — American, British, but also European — to develop health aid interventions. Without direct control over the production process and depending entirely on the supplies of Big Pharma, the Western institutional level has been entirely absorbed by negotiations, drafting and signing contracts to ensure the necessary doses for their domestic needs.

This has put into the foreground the target of national vaccination campaigns and extremely weakened, for lack of doses from pharmaceutical companies, international strategies of vaccine aid to third countries (see the weak multilateral campaign Covax), in line with the model of the EGV. Some countries, such as the United States, Great Britain, and Israel, however, have interpreted this orientation with a pragmatic unilateral policy of closed borders, which has allowed them to effectively manage (at least) their respective national vaccination campaigns.
More complex and problematic at the domestic level has also been the approach of the European Union that confirmed the operational crisis already manifested during the first pandemic phase by playing the passive role of the negotiator tasked with purchasing doses to be redistributed to its member states. On this occasion, Brussels has again demonstrated slow reflexes in times of emergency, redundant administrative procedures, sometimes self-referential, and technical inability to negotiate first and then enforce the delivery of supplies agreed with Big Pharma. Initially funded by the public sector as Implementing Agencies in charge of carrying out research on the vaccine, the Pharmaceutical Companies became autonomous, not responding to the Donor’s directives on where and how to direct the distribution of doses for immunization campaigns.

The ineffectiveness of the EU in redistributing the vaccine internally turned to an open political delegitimization when some member states began to move in bilateral autonomy, negotiating with producers, sometimes including Russian ones, without involving Brussels. Even more serious than the case of Germany and Austria independently purchasing millions of WEV doses was the case of Hungary and Slovakia, the first EU member states to unilaterally decide to adopt the EGV. This has created an obvious “Trojan horse” effect of Russian vaccine geopolitics in the EU and an embarrassing precedent for Brussels and the remaining member states, forced to justify the resistance to the entry of the EGV before their public opinions, which were largely in favor of it. The technical arguments used by EMA in this regard and the usual complex legal-bureaucratic procedures for authorizations only reinforced the impression in the public opinion that the EU’s fears about the EGV were related to geopolitical considerations rather than public health ones.

The lonely race of the Eastern Vaccine

The acceptance of the EGV, even under strong popular pressure, represented a major obstacle for the EU countries, facing domestic and international problems. In the immediate future, this would have meant acknowledging the failure of the private-entrepreneurial model of the multilateral WEV to the advantage of the public model of the bilateral EGV and its expansive aid policies. This would not have passed without painful consequences for the already scarce legitimacy of the European institutions, undermined by their inability to impose a common policy on the main pandemic issues (from immigration to tourism to the very defence of Schengen). Moreover, since Sputnik V was not only Russian but also literally “of Russia”, its formal use by the EU would have meant recognizing Moscow as a Donor. Since there have been no international precedents of recipients retaliating against
their donors, the European sanctions policy towards the Kremlin would have been affected, with an inevitable easing of the harshest aspects.

While the EGV was besieging the EU (February-March 2021) and winked at Western public opinion, which was confused and frightened by a mainstream with too much information and too little reliable data, the real geopolitical game of aid was being played out in the countries near the EU. In the vast space that goes from Africa to Central-Western Asia, passing through the Balkans. Here, the deafening absence of a vaccine aid policy on the part of those who, prior to Covid-19, had been the main donors in the area (the EU and the United States), was strongly felt. Engrossed as they were in trying, at best, to immunize their own domestic population, they gave up acting in times of emergency in countries of interest, where they had been the absolute protagonists. The empty space left was promptly occupied by bilateral donors of the EGV, headed by Russia, free to think in purely diplomatic terms and capitalize on the results of foreign policy.

Specific cases have multiplied. Especially astounding were those of Serbia and Moldova, where the mass arrival of Russian and Chinese vaccines has redesigned areas of geopolitical influence to the advantage of Moscow and Beijing and to the detriment of Brussels and Washington. This temporary channel of entry into strategic beneficiaries, if prolonged over time, would have allowed the “new” Donors to institutionalize their presence in the next phase, with future aid programs more structured and diversified, destined to last (Tsygankov, 2016).

This is further proof that the WEV countries have played a defensive game in the international system vis-à-vis the expansive one pursued by the EGV countries. Moreover, in the absence of a real Western competitor in the game, at least until April 2021, technically it was not possible to talk about a war of aid, but rather a Russian-Chinese solo race. This scenario had a decisive impact on the quality of Donor-Recipient relations and laid the foundations for future developments if, as hypothesized by some virologists, the medium-long term has multiple viral mutations and recurrent pandemics in store.

The prospect of continuous and recurrent vaccination campaigns has made the issue of periodic supplies of doses a cross-cutting priority on the government agenda of all countries. The competitive advantage accrued by the Donors of the EGV has been the ability to rely on already stipulated agreements and already active distribution networks in Recipient countries, as well as decentralized pharmaceutical production centres set up to address the enormous demand for vaccines. However, there will likely be a parallel attempt to regain an active role in the vaccine competition among Western actors who have been on the sidelines so far (The White House, 2021, June 21). Going from a situation of shortage to one of excess availability of vaccines offered by multiple manufacturers, the United
States has already hinted that having achieved the immunization of their country, they will focus on the problem of regaining the space lost so far.

The European Union, for its part, has relaunched its Coronavirus Global Response at the Global Health Summit held in May in Rome on the sidelines of the G20, relaunching a multilateral approach with which it aims to regain the role of coordinator of donors on a global scale, abruptly interrupted by the pandemic. This coordinated action of the EU and US has led them to announce upcoming foreign policies of vaccine aid aimed at limiting the influence of the EGV, discouraging its use in friendly and allied countries to the advantage of their own vaccines. Heralding the return of what will be a full-fledged War of Vaccine Aid.

SAN MARINO: THE AID SIZE DOES NOT MATTER

Among the most interesting cases of the vaccine aid phase is that of the Republic of San Marino (RSM), a thousand-year-old independent micro-nation, an enclave located in Italy, between the cities of Rimini and Pesaro. The reason for this sudden attention to a state little known to most was a governmental choice to combat COVID-19 which combined aspects of domestic, international, and health policy that have become an emblematic synthesis of the main political issues concerning vaccine aid.

Despite having signed an agreement in the field of health collaboration with Rome at the end of February 2021, the RSM found itself lacking any vaccine doses due to the recalled initial problems encountered by the EU in distributing vaccines to its member states, including Italy. As one of the most affected countries worldwide (throughout 2020, it held the world record for mortality rate due to the virus), the RSM did not hesitate to start vaccinating its population on February 25, 2021, with Sputnik V, becoming de facto COVID-free at the beginning of June 2021. In the middle of the European discussion on the problems of the WEV and the opportunity to open to the Russian and Chinese ones, the RSM case immediately attracted a wide international interest because of the massive resort to the EGV by a Western sovereign country.

Giving great visibility to the case was the fact that the episode concerned a micro-state “surrounded” by Italy, that is, the country that only a few months earlier had not hesitated to request bilateral Russian emergency aid and now was prevented by the European multilateral dimension from accessing Sputnik V as well, as requested by its public opinion. Furthermore, the rapid results on the effectiveness of Sputnik V in the RSM, as evidenced by the drastic drop in infections in the country as well as clinical studies conducted in collaboration with Italy, had made it clear to the general public that Europe’s aversion to the Russian
vaccine was political rather than health-related. In the space of a few months, the RSM case has become emblematic of the development of foreign policy through aid in the era of COVID-19, from the point of view of both the Donor and the Recipient, and of the dynamics of the relationship between the two actors.

On the Donor’s side, it confirmed Moscow’s approach of a) negotiating and b) implementing under the public aegis of the entire chain of intervention, without involving private intermediaries (Contractors). Treating the decision to give the vaccine as a foreign policy action, moreover, helped to understand the reasons for Macro-Russia’s interest in Micro-San Marino, which was met with surprise in the West. Similarly to the one that two years earlier had accompanied the state visit to the RSM by the Russian Minister of Foreign Affairs, Sergei Lavrov.

In 2014, facing Western isolation due to the Ukrainian crisis, in the European diplomatic desert, Moscow welcomed the fact that the RSM, appealing to its neutrality, had not joined the EU in sanctions against the Kremlin. This gesture had a strong symbolic impact on the Russian domestic front, both institutional – where a hyper-state culture leads to respect for sovereignty (macro or micro, regardless), and popular – where millions of Russian tourists passing through Rimini over the decades have come to know the RSM very well. The Donor’s choice was to put into practice the recalled diplomatic rule of support to non-hostile countries by using the vaccine as a reward for a state that had been “openly non-hostile”, giving visibility to the case both domestically and internationally. The relevant political framework was enough for Moscow to decide to help the RSM, regardless of the limited size of its territory and population.

On the contrary, they represented an advantage since they allowed vaccination of an entire state with few doses, at a time when Russia was facing a shortage of available vaccines because of its choice to anticipate the negotiation phase before the production of the doses had actually taken place.

Finally, an important common aspect of Macro-Russia and Micro-San Marino has been the historically difficult “sovereignty-territorial extension” they have had, with Moscow facing the problem of being too big (to be defended) and the RSM of being too small (to see its sovereignty fully recognized). This specular and opposite issue has impacted the Russian-RSM bilateral relationship of vaccine aid, influencing the political use made of the episode, played on different levels, respectively on the internal one by the Recipient and the international one by the Donor. Once it obtained mass immunization, the RSM promptly promoted it as the main asset to relaunch its domestic tourism, the main industry of the country, under the banner of the message of the first COVID-free country in Europe. Then again, Russia’s ambition to bolster its foreign policy with vaccine aid was summarized in the Interfax news agency’s piece on February 19, 2021, which,
even before a single dose had reached the micro-state, emphatically titled that “The Republic of San Marino is the 30th country in the world to get Sputnik V” (Interfax, 2021).

CONCLUSION

In light of the above, the main conclusions of this article are:

- In the pandemic period, much of international relations was animated by the aid of emergency medical supplies in the first months of the virus outbreak and then, in the following phases, by the supply of vaccines against COVID-19.
- The nation-states in the bilateral dimension were the key players in these aid initiatives, while the multilateral dimension showed a profound crisis of action and reaction.
- Aid has given rise to a repeat of the Wars of Aid seen in the major international crises of recent years, with key players competing with Donors to position themselves in the scenario of geopolitical interest.
- In the first phase of the emergency, there was a Donors’ competition to assist Italy, won by Russia. The Italian scenario has also presented the unprecedented case of a Rich Beneficiary, a G7 country with its own strong autonomous spending capacity assisted by Poor Donors (such as Albania), bearers of mostly symbolic aid.
- The following phase of vaccine aid has seen the clash between a Western Economic Vaccine model driven by more private and commercial logic, and an Eastern geopolitical vaccine, of public origin and controlled entirely by States that have used it as an instrument for their foreign policies, gaining ground in the competition between Donors.
- The iconic case of the supply of Sputnik V to the Republic of San Marino has shown that the main importance of the vaccine was in its being an instrument of foreign policy and geopolitical impact.

On a general level, it has also confirmed once more that in the post-bipolar world, the history of international relations is not complete without a reading of the Aid, both outgoing and incoming, of the State actors involved.

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RUSSIAN-CHINESE COOPERATION
DURING THE COVID-19 CRISIS:
MULTI-VECTOR AGENDA

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Abstract: The article compares the actions of Russia and China in the first stage of the battle against COVID-19 and analyzes the approach of the two countries to international cooperation in the context of the crisis caused by the pandemic. The author aims to find out how the global COVID-19 crisis has affected Russian-Chinese cooperation and to identify positive and negative trends in bilateral relations between Moscow and Beijing in 2020. COVID-19 has become a global challenge for the modern world order and all of humanity. From the very beginning of the outbreak, the international community has closely followed China’s actions to counter the new coronavirus infection. Tough quarantine measures taken in China remain the most effective means of fighting the epidemic. The head of the WHO, T. Gebreyesus, admitted that if it was not for China’s determination to carry out quarantine measures in Wuhan and other Chinese cities, then in the first months of the pandemic “there would be many more cases of disease and deaths from coronavirus in the world”.

At the same time, China has faced unprecedented criticism and accusations from Washington for the emergence and spread of infection. The article analyzes the actions and statements of Beijing and Moscow, which were made by the two sides in order to prevent the transfer of the problem of combating coronavirus infection into the political plane. One illustrative example, in this case, is a comparison of the approaches of different

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countries to the allocation of limited resources, remedies, and plans for the use and provision of international access to the COVID-19 vaccine.

From the very beginning of the pandemic, Moscow and Beijing have been in close contact regarding the development of medicine against COVID-19. In August 2020, both states agreed to set up a joint laboratory to conduct coronavirus research. Such cooperation may be significant in the future, given that experts do not exclude the emergence of new global pandemics in the near future.

**Keywords:** COVID-19, international relations, Russia, China, geopolitics, humanitarian cooperation, vaccines

The new coronavirus infection has become a global challenge for all mankind and at the same time has demonstrated the approaches of various states to the development of international relations in crisis conditions when national health systems cannot cope with the flow of patients in need of help, and governments are forced to literally “pause” the economies of their countries.

In this context, the research interest is focused on big countries with large-scale geopolitical ambitions and on the steps they are taking. Those steps can be used by other participants in international society as guidelines or models for shaping their own foreign policy actions.

Russia and China have this kind of influence in the Eurasian space. Both countries are perceived on the world stage as geopolitical partners. Relations between them have reached a level close to that of allies. It has been repeatedly confirmed in speeches by high-ranking officials of the two countries, and it is also confirmed by the intentions of Moscow and Beijing to extend the Treaty of Good Neighborliness, Friendship and Alliance, which has been in force for 20 years (Zabrodina, 2021).

On January 30, 2020, the World Health Organization (WHO) declared the 2019-nCov (the original name of the COVID-19 virus) epidemic as a public health emergency of international concern (Statement..., 2020). Tough quarantine measures taken in the regions of China most susceptible to infection have become the most effective means of fighting the epidemic. The head of the WHO, T. Gebreyesus, admitted that if it were not for China’s determination to carry out quarantine measures in Wuhan and other cities in China, then “there would be more cases of disease and deaths from the coronavirus in the world” (WHO Director-General, 2020).

The outbreak of a new coronavirus infection, which was first detected in Wuhan at the end of December 2019, was stopped by the Chinese authorities by April
thanks to a number of rather tough (especially at that time) government actions. The resources of almost the entire state were mobilized. At the same time, the high level of citizens’ confidence in the state played an important role. The population supported and strictly adhered to quarantine measures and severe restrictions on mobility. It should be noted that at that time, only a small number of initial statistics on the incipient epidemic had been accumulated. China was forced to respond to the new virus, which was spreading at a rate much higher than the expectations of medical experts, without accurate data on the level of its lethality and infectiousness.

The article analyzes various aspects of bilateral interaction – political, economic, and humanitarian actions taken by the political leadership of the two countries in the context of the global COVID-19 crisis. It enables determining Moscow and Beijing’s long-term intentions: to develop mutually beneficial cooperation or refute this intention.

The author adheres to the position that the COVID-19 pandemic is a classic example of events belonging to the “black swan” political category. It means that it is absolutely unpredictable and has a powerful impact on the subsequent development of international relations. In conditions of a real threat to national security, when there is no complete information about the virus and the degree of its influence on human life, the actions of the political leadership of various countries can be considered a reliable indicator that allows one to draw conclusions about the real state of affairs in relations between states.

UNDER THE PRESSURE OF THE INTERNATIONAL ENVIRONMENT

For China, the problem of combating COVID-19 has gone beyond the domestic agenda. Almost from the very beginning of the pandemic, Beijing was forced at the foreign policy level to protect its image from the aggressive rhetoric of Washington. The United States, led by then-President Donald Trump, tried to politicize the problem of coronavirus as much as possible, openly and (as was later confirmed) unproven accusing China of the infection, calling the virus a “Chinese” virus and calling for compensation from the PRC for the spread of coronavirus infection. The position of the Russian Federation on the accusations of China regarding the spread of COVID-19 was voiced by Russia’s Permanent Representative to the UN V.Nebenzya, who expressed regret over the groundless accusations of the spread of coronavirus in the world.

Beijing has consistently denied the accusations at all levels. In June 2020, the Press Office of the State Council of the People’s Republic of China published the White Paper “China’s Actions to Combat COVID-19”, the purpose of which was to
inform the international community about China’s efforts to combat the epidemic, share its experience in this area and explain its concept of a global response to the epidemic.

It is important to note here that already at the very beginning of the epidemic, the Chinese government took a fundamentally important position. It was decided to protect the lives and health of citizens even at the cost of a long-term economic downturn. The authorities were brave enough to introduce a complete quarantine in entire cities and even provinces.

In Russia, a number of political actions were taken in connection with the threat of the spread of an unknown infection. At the initial stage, they were negatively perceived in Beijing. In particular, on January 2, 2020, Russia already decided to strengthen sanitary control at the border with the PRC in the bordering Amur region. Later, control over the health conditions of all passengers arriving from the PRC in the Angara and Primorye regions was strengthened. At the end of January, flights from Wuhan to Moscow were cancelled, and flights to China were significantly limited (except for Aeroflot flights to Beijing, Shanghai, Guangzhou, and Hong Kong). Under an agreement with China, four more Chinese airlines operated flights to Moscow regularly. There was a separately allocated terminal F for the arrival of flights from China in the main Russian airport “Sheremetyevo”. The issuance of Russian electronic visas for Chinese citizens was suspended, and the sale of tours to China and the reception of tourist groups from China were suspended.

BILATERAL HUMANITARIAN AID AND POLITICAL CONSULTATIONS

At the same time, Russia became one of the first countries to provide humanitarian aid to China. Protective masks, an acute shortage of which was observed in China, were delivered to the PRC by aircraft of the Russian Ministry of Emergency Situations. It was the decision of the Operational Headquarters, which was organized in Moscow to control and prevent the import and spread of a new coronavirus infection in Russia. At the same time, all free stocks of medical masks were sent from Russia to China, which led to their temporary shortage, for example, in the pharmacy chains in Moscow.

On January 29, the development of a Russian test system for diagnosing COVID-2019 was announced. The development of express tests was carried out by Russian virologists based on the genome of the new coronavirus COVID-2019, transferred by the Chinese side to Russian scientists. New express tests have made it possible to identify the coronavirus in the human body within two hours. From that moment, the joint work of scientists from the two countries was launched to develop a vaccine against COVID-19.
Later, Chinese experts spoke extremely positively about the Russian test systems, which proved to be effective and had the advantage of being easier to use. In particular, the storage temperature of the Russian test system was plus 4 degrees, while the Chinese test system should have been stored at minus 20 degrees.

The above examples of bilateral cooperation became possible only thanks to the developed system of political interaction between Russia and China, which includes annual exchanges of official visits of heads of state, a mechanism for regular meetings of heads of government, the work of 5 joint intergovernmental commissions, which include more than 20 sub-commissions. The dialogue was constantly maintained during the pandemic, including a high-level dialogue. In particular, on February 1, telephone talks were held between Russian Foreign Minister Sergei Lavrov and his colleague Wang Yi when they discussed issues of Russian-Chinese cooperation in the fight against the spread of a new type of coronavirus infection. The Russian side gave a high assessment of the measures taken by China in the fight against the spread of the disease. The Chinese side thanked the Russian Federation for providing humanitarian assistance necessary to combat the spread of the epidemic.

In the following days, as part of the political agreements reached earlier, more than 4.5 thousand Russian tourists who were on Hainan Island as part of organized tour groups were evacuated to Russia. On February 4-5, 2020, by order of the President of the Russian Federation V.Putin, the evacuation of Russian citizens from the regions of China most affected by the coronavirus was carried out on aircraft of the Russian Aerospace Forces, accompanied by military doctors and specialists from the Russian Ministry of Defense. In total, 144 people were evacuated, including 128 Russian citizens and 16 CIS citizens, who were taken to a specialized centre in Tyumen for a two-week quarantine.

On behalf of the government of the Russian Federation, a delegation of six representatives of Rospotrebnadzor and the Ministry of Health of the Russian Federation arrived in Beijing on February 5, 2020. Epidemiological experts discussed topical issues regarding the spread of coronavirus infection and analyzed what additional measures could be taken to ensure the safety of citizens. In February 2020, on behalf of the government of the Russian Federation, the Russian Emergencies Ministry sent an Il-76 transport aircraft with medicines and personal protective equipment to China. Humanitarian aid weighing more than 23 tons was formed by units of the Ministry of Emergency Situations from the Moscow, Tver and Voronezh regions, which became an example of the development of regional cooperation between Russia and China. It should be noted that the mechanism of “mutual assistance” applied at the state level made it possible to quickly establish
channels for the supply of scarce goods and equipment to the most affected regions of China.

Political consultations between the two countries were also carried out in Moscow. The head of Rospotrebnadzor, A. Popova, met with the Ambassador of the People’s Republic of China to the Russian Federation, Zhang Hanhui, following which the parties expressed their intention to continue cooperation in the anti-epidemic sphere, including in the field of disseminating information about coronavirus and methods of preventing the disease. The Russian side also noted that China had proven the effectiveness of its measures to combat COVID-19, and expressed its readiness to study the experience of the PRC in countering the spread of infection.

As a result of the agreements reached, new developments of Russian scientists from the Siberian Branch of the Russian Academy of Sciences were transferred to China. These include new test systems for quickly and efficiently determining the presence of the virus and several options for protective masks with unique characteristics. Russian scientists have also put forward a number of proposals for the accelerated development of new types of vaccines and therapeutic drugs based on antibodies from those who have been ill.

Starting from the end of March 2020, when the situation with COVID-19 in China was taken under control, the PRC government began to provide reciprocal humanitarian assistance to the Russian side. On March 23, 2020, as part of the implementation of the National Plan to Prevent the Import and Spread of a New Coronavirus Infection in the Russian Federation, 25.5 million protective masks were supplied to Russia from China. The deliveries were organized by the Russian Ministry of Industry and Trade with the assistance of the Russian Aerospace Forces. The supply of medical masks from China to the Russian Federation continued within the framework of regional cooperation. For example, the Heilongjiang provincial government, in response to a request from the Yakutia region of Russia, announced its readiness not only to send humanitarian aid, a batch of medical masks but also to establish the production of protective equipment on the spot. At the same time, earlier, in early February 2020, Yakutia delivered medical masks and medicines necessary during the epidemic to Heilongjiang. In the same period, 300 protective suits and 50 thousand disposable surgical masks were sent from Harbin, the Heilongjiang province to the Krasnoyarsk Territory. They were taken to Russia through the Heihe checkpoint. Emergency assistance was provided at the request of the government of the Krasnoyarsk Territory, which earlier donated 50,000 masks to the Heilongjiang Province to protect against coronavirus.

Certain actions by large Chinese businesses also indicate their desire to develop political dialogue with the Russian side. If the payments to AliExpress Russia in the amount of about $1.2 million in compensation to Russian consumers for the delay
of parcels from China are solely due to economic interests and the desire to maintain customer loyalty, then the provision of humanitarian aid by the founder of Alibaba to the Russian Ministry of Defense is a political step. The aircraft of the Russian Aerospace Forces delivered from China more than 1 million masks and 200 thousand test systems for detecting coronavirus infection, donated to the Ministry of Defense of the Russian Federation by the founder of Alibaba, Jack Ma. During a telephone conversation with the Minister of Defense of the Russian Federation, Jack Ma thanked Sergei Shoigu for the support provided by Russia to China during the development of the coronavirus pandemic and stressed that “he is helping Russia now and will continue this work as a sign of deep respect and friendly relations with the head of the Russian military department” (Jack Ma, 2020).

RESPONSE TO COVID-19 WITH CHINESE CHARACTERISTICS

By controlling the spread of infection, the Chinese government was able to avoid a long-term decline in economic performance. Since April 29, the PRC has moved from a state of “people’s war” with COVID-19 to a regime of “prevention and control” of the disease and post-epidemic revival of the national economy. By the end of April, 99 per cent of major businesses and 88 per cent of the medium, small, and micro-businesses had resumed operations.

It should be noted that during the coronavirus epidemic in the first quarter, China’s GDP fell by 6.8%, but in the second quarter, it grew by 3.2%. In the third quarter, it grew by 4.9%, and in the fourth, it grew by 6.5%. The economic growth rate reached 2.3% at the end of 2020. The PRC became the only large economy in the world that showed growth in a difficult year of the pandemic.

An analysis of the efforts made by the Chinese government reveals several factors that have become decisive in the fight against the COVID-19 epidemic. First, it is the determination of the PRC leadership to adopt extreme quarantine measures for the 11-million metropolis. The strict restrictions on the social contacts of citizens made it possible to gain time (for the world community as well) and prevent the uncontrolled spread of a new viral infection in the first months of the epidemic.

Second, the mobilization of resources across the country helped to cope with the crisis in Wuhan. The central government of the PRC has clearly stated its position: “The continuous supply of the necessary resources to control the epidemic in the Hubei Province and Wuhan City are becoming one of the national priorities.” The PRC government ensured the delivery of the required resources, and the Hubei provincial administration was responsible for their use and internal distribution. The timely mobilization and dispatch of specialized medical personnel to Hubei province also played a decisive role.
Thirdly, the experience of the mechanism of “mutual assistance” widely used at the state level made it possible to establish channels of assistance to the cities of the Hubei province in the shortest possible time. The principle of operation of this mechanism implies that in the event of a crisis situation in one of the provinces, the central government of the PRC obliges one of the neighbouring provinces, less affected by the crisis, to provide assistance to one of the cities in the affected region. In particular, immediately after the outbreak of the COVID-19 epidemic in Hubei, the PRC government ordered 16 other Chinese provinces to help the cities of Hubei province. Thus, the Shandong province provided assistance to Huanggang city and the Jiangsu province to Xiaogang city. A similar self-help mechanism has been used for years in China to combat poverty, with wealthy provinces in the southeastern region pledging to help cities in poorer regions of northern and southwestern China. The same scheme was applied after the earthquake in the Sichuan province in 2008, which made it possible to cope with the consequences of the disaster within three years.

Fourth, the implementation of the three-level quarantine system, along with the creation of the necessary medical infrastructure within the Hubei province, avoided high mortality rates and shortened the spread of the epidemic in the country.

Fifth, the ongoing information campaign to work with public opinion made it possible to avoid the critical spread of panic in the country. Providing extensive data on the course of the epidemic and informing the public about all aspects of the new viral infection has significantly raised the awareness of the population and also contributed to the improvement of the level of personal hygiene of citizens.

Sixth, the use of psychological measures made it possible to tune the population to constructive interaction with the state. In particular, the active demonstration in the media of the state’s efforts to normalize the situation, the formation of a heroic attitude towards medical specialists working in Wuhan, the environment with a high level of patient care, the construction of new modern hospitals with comfortable wards and the provision of high-quality food, the use of hotels and sanatoriums for quarantining patients with an unconfirmed diagnosis, all contributed to a decrease in the general level of anxiety and increased the willingness of the population to undergo quarantine or voluntarily go for treatment.

Seventh, the Chinese government notes the significant contribution of Internet companies in the fight against the spread of the epidemic. Chinese IT giants Tencent, Alibaba, Baidu, ZTE, iFLYTEK and JD.com have provided their technologies for processing and using arrays of big data, artificial intelligence and communications of the 5th generation (5G) standard for remote monitoring, diagnosis and provision of medical, information and service services.

Eighth, China has made efforts to keep the economy stable. Even with harsh quarantine measures that largely restricted population flows and private and public

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International Organizations and States’ Response to Covid-19

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companies, China kept open the supply channels for materials needed to fight the epidemic in the Hubei province and ensure an acceptable standard of living for the rest of the population.

At the state level, a number of measures were taken to provide financial support to small and medium-sized businesses, including the provision of a deferral for rent payments, the provision of targeted assistance to companies on the verge of bankruptcy. Seasonal workers were given the opportunity to return to production after the New Year’s holidays on specially organized trains and buses. The measures taken made it possible to maintain the industrial base of China in working conditions. According to reports from relevant statistic departments, starting from the second half of March 2020, almost all large companies in the PRC resumed their work.

The actions of the Chinese government show that the adoption of a specific set of multi-tiered measures can successfully stop the spread of the COVID-19 epidemic (Kulintsev, 2020). In the case of China, at the state level, decisions were made: to increase the duration of the general New Year holidays, which made it possible to reduce the level of social contacts; to use the medical resource base on a national scale, which made it possible to provide the regions most affected by the epidemic with the necessary materials. At the provincial level, local governments have closed access to public places (theatres, restaurants, shopping and entertainment centres) and opened new or repurposed existing hospitals to increase the ability to provide specialized medical care to patients with a confirmed diagnosis of COVID-19. On a personal level, a request for information on movements in the previous two weeks was implemented, which made it possible to identify persons who could potentially come into contact with the carrier of the infection and send them to a 14-day self-isolation.

On August 17, 2020, the State Intellectual Property Office of the People’s Republic of China issued a patent for the Ad5-nCoV vaccine developed in China, which was created by CanSino Biologics in conjunction with the PLA Academy of Military Medical Sciences.

China patented its coronavirus vaccine a week after Russia. But in fact, Beijing began testing the vaccine earlier than Moscow but did not dare to register it until the third phase of clinical trials was completed. That is the stage of mass tests of the effectiveness and harmlessness of the drug in the general population. Since the rules for the registration of vaccines at the international level are not officially formalized anywhere, Russia, based on the available experience, registered Sputnik V after phase II, that is, after testing on groups of young, healthy, physically strong volunteers. Phase III was combined with the beginning of mass vaccination.

Formally, the Chinese side congratulated Moscow. However, realizing the potential economic dividends from vaccine exports, Beijing followed Russia’s
example and also registered its vaccine. By September 2020, Sinovac and the Sinopharm pharmaceutical group have also announced their fast-track vaccine registrations for emergency use.

RUSSIAN-CHINESE MULTILATERAL COOPERATION IN THE NEW CONDITIONS

Another feature of the period under review was the transfer of most bilateral and multilateral international events to the online format. For example, the 7th Russian-Chinese EXPO was postponed to July 2021 due to an unfavourable epidemic situation. The exhibition was to be held from 7 to 10 July 2020 in Yekaterinburg. In 2021, ESCPO will be held simultaneously with the Innoprom international industrial exhibition. The Forum of Young Diplomats of the BRICS Countries, which was to be held in Kazan, was postponed to a later date.

The SCO and BRICS summits, which were to be held under the chairmanship of Russia in St. Petersburg, were postponed to a later date. Ultimately, both summits were held online, relying on the world experience of holding high-level international meetings. One of the first events of this kind on a global scale was the April videoconference on coronavirus by the heads of the Ministries of Health of the G20 countries, during which the impact of COVID-19 on society and the health sector, as well as the problems of ensuring the availability of medical services for the population were discussed. After that, online meetings of senior BRICS officials, online meetings of SCO experts, a video conference of the foreign ministers of the RIC countries, a video conference of the foreign ministers of the G20 countries and the final summit of the G20 online summit were held.

The activities of Russia and China within the SCO as an international organization, in which they are the main drivers of development, were characterized by the intensification of the number of contacts and the expansion of the agenda under discussion. It was the SCO that began to be used as a platform for launching and testing the mechanism of operation of multilateral international videoconferences. In particular, the first online meeting was a meeting of experts on the preparation of the Meeting of Ministers of Health of the SCO member states. After that, several dozen meetings with the participation of representatives of the SCO Secretariat took place in the format of videoconferences within the SCO, including a seminar of the SCO Interbank Consortium; SCO round table on the transition to mutual settlements in national currencies; videoconference on SCO regional cooperation; videoconference on the impact of the coronavirus pandemic on interaction within the SCO; expert meeting on the preparation of the SCO Startup Forum; videoconference “The Role of Russia in the Development of the SCO”; Online seminar on cooperation in environmental protection within the SCO; 5th
International Youth Conference “Model SCO”; 1st Meeting of the SCO Economic Analytical Centers Consortium; SCO videoconference on the impact of the COVID-19 pandemic on the development of the global economy; SCO seminar on modern technologies in the field of drug prevention; online consultations of experts and heads of services of the SCO states on sanitary and epidemiological well-being; business conclave of the SCO.

One of the first online events with the participation of high-ranking officials was a video conference of the SCO foreign ministers held in May 2020. After that, the practice of holding such online meetings began to be actively used in the framework of political interaction among the SCO member states. In the second half of 2020, the following took place online:

• The 15th Meeting of the Secretaries of the Security Councils of the SCO States;
• The meeting of the President of the Russian Federation with the Foreign Ministers of the SCO countries;
• The meeting of the Council of Ministers of Foreign Affairs of the SCO States;
• The 7th Meeting of the Ministers of Justice of the SCO States;
• The 18th Meeting of Prosecutors General of the SCO countries;
• The 5th Meeting of the Ministers of Agriculture of the SCO countries;
• The 19th Meeting of Ministers for Foreign Economic Activity of the SCO States;
• The 8th Meeting of the SCO Ministers of Transport;
• The 15th Meeting of the Chief Justice of the Supreme Courts of the SCO States;
• The 10th Meeting of the Heads of the Competent Authorities of the SCO States on Combating Illicit Drug Trafficking;
• The 1st Forum of Heads of Regions of the SCO States;
• The 16th Meeting of the SCO Interbank Consortium Council;
• The 15th Meeting of the SCO Forum;
• The 1st Interparty Forum “SCO +”;
• The 13th meeting of the SCO Youth Council;
• The 20th SCO Summit;
• The 19th Meeting of the SCO Heads of Government Council (Shanghai Cooperation Organization, 2020).

The SCO’s functionality and its rapid adaptation to working in new conditions also serve as a manifestation of the joint political efforts of Moscow and Beijing. In addition, it was within the framework of the SCO that both countries began to discuss and develop solutions to counter the main challenge of 2020 – the COVID-
19 pandemic. In July 2020, the SCO issued a document: “An Overview of Advanced Measures Taken by the SCO Countries to Counter the Spread of COVID-19” that could be applied globally (The member states..., 2020).

The decision to begin joint work by Russia’s and China’s leading virology centres to develop a vaccine against the virus should also be viewed as a political step. In August 2020, within the framework of the Years of Chinese-Russian Scientific, Technical and Innovative Cooperation, the Russian Research Institute of Vaccines and Serums named after I. Mechnikov and the Chinese Institute of Microbiology of the CAS signed a memorandum on the creation of a joint laboratory for COVID-2019 research.

Political interaction between Russia and China in the international arena during the period under review retained continuity and was distinguished by mutual support on the main issues of the global and regional agenda.

In particular, in the UN Security Council, the Russian Federation and the PRC came out with a common position on the Western draft resolution on humanitarian aid in Syria; Moscow and Beijing hold similar positions in the framework of the quadrilateral consultations on a settlement in Afghanistan; on China’s participation in the START-3 treaty; to ban the deployment of weapons in space. Both countries reaffirmed their adherence to the principle of non-interference in the internal affairs of another state regarding the situations in Hong Kong, on the Sino-Indian border, as well as on performances in Belarus.

Political solidarity was shown by Russia and China regarding the statements of the United States on Hong Kong, against accusations of the spread of COVID-19, as well as regarding the charges against the Russian Federation and the PRC of cyberattacks.

An illustrative example of political interaction between Moscow and Beijing should be considered a joint article by the ambassadors of the Russian Federation and China to the United States, published on the occasion of the 75th anniversary of the Second World War victory in one of the leading American magazines, “Defense One.” The article expressed a warning to the international community about the inadmissibility of rewriting history. It also became a call for the United States to abandon the thinking of the Cold War era.

CONCLUSIONS

The political interaction between Russia and China in the context of the COVID-19 pandemic developed in several directions and had a number of features. The multi-vector agenda of the discussed issues was retained; a mechanism has been
developed to allow major political events to be held online; breakthrough results were achieved in certain areas of bilateral cooperation, in particular, in the field of joint work to counter the COVID-19 pandemic, providing mutual humanitarian assistance, stimulating the development of interregional cooperation, but the greatest dynamics was shown by the interaction of medical departments in the development of test systems, vaccines, and exchange of medical experience.

Certain elements of the competition were observed during the registration of the vaccine and the introduction of restrictive measures against entry into each other’s territory. At the same time, at the global level and in multilateral formats, Russia and China have demonstrated similar positions on major international issues. The results of the first meeting of the foreign ministers of the Russian Federation and the PRC after the start of the pandemic, held in April 2021 in person, confirmed that both countries successfully passed the crisis period, showing a high level of mutual trust. The actions of the political leadership of the two countries in the context of the COVID-19 pandemic confirmed the sincerity of the intentions of Moscow and Beijing to develop long-term and mutually beneficial cooperation.

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CHINA-CEEC COOPERATION IN THE CONTEXT OF CHINA-EU RELATIONS AMIDST THE POST-PANDEMIC ERA

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Abstract: Since its launch in 2012, the China-CEE cooperation mechanism has been a powerful catalyst for practical cooperation between China and the CEE countries in various fields and has become an important driving force for the integration of the Belt and Road Initiative into the European economic sphere. As a model of cross-regional cooperation, China-CEE cooperation has created conditions for the high-quality development of the Belt and Road and has effectively promoted the development of the Belt and Road in areas such as connectivity, transport infrastructure, green energy, financial security, local cooperation, humanities exchanges, and international cooperation in combating pandemics.

At the same time, as part of the China-EU relations, China-CEE cooperation has been questioned by Western public opinion and think tanks, which should be calmly analysed and responded to. In accordance with the principle of “common consultation, common construction and sharing” and bilateralism, regionalism, and multilateralism cooperation, China-CEE relations can be promoted by enriching the level of cooperation, exploring the potential of local cooperation, promoting economic and trade through the humanities, and enhancing capacity.

Therefore, it is important to analyse how China and the CEE countries perceive the relationship and how it can be improved in the context of China-EU relations amidst the post-pandemic era.

Keywords: China-CEE relations, COVID-19, Cooperation, China-EU relations.

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Since the China-CEEC cooperation mechanism was in place, cooperation has been carried out in a wide range of areas at multiple levels and has contributed to China-EU relations. Seen at the China-EU level, as an important part of China-EU relations, China-CEEC cooperation has made positive progress in promoting China-EU economic and trade ties, investment cooperation, infrastructural connectivity, and third-party cooperation, and has offered new opportunities for China-EU relations. China-CEE cooperation has contributed significantly to the deepening of cooperation between China and the CEE countries by transforming the loose bilateral cooperation model to the one that combines bilateral and multilateral dimensions, which improved both the quantity and quality of cooperation.

However, in the post-pandemic era, cooperation between the two sides is also facing many new challenges. It is important to take stock of the achievements and experiences of the cooperation between China and the CEE countries and examine the opportunities and challenges that the post-pandemic era brings to China-CEE cooperation in order to promote the cooperation between the two sides in a stable and far-reaching manner.

**NARRATIVES OF CHINA-EU COOPERATION IN CHINA-CEE COOPERATION DOCUMENTS**

Guidelines published by the successive China-CEEC Summits (except the one in Warsaw in 2012) have references to the relations between China-CEEC Cooperation and China-EU relations from different angles. China-CEEC cooperation is usually defined as part and parcel of China-EU relations and represents a useful supplement to the China-EU comprehensive strategic partnership.

At the second China-CEEC Summit held in Bucharest, Romania, in 2013, the first guidelines for China-CEEC Cooperation were published. It stressed that China-CEEC cooperation was in concordance with the China-EU comprehensive strategic partnership. Premier Li Keqiang pointed out at the Summit that China-EU cooperation was a fundamental element of the Bucharest Guidelines, and that China-CEEC cooperation was part and parcel of both China-Europe cooperation and China-EU cooperation (FMPRC, 2013). The Belgrade Guidelines for China-CEEC Cooperation, published at the third China-CEEC Summit, pointed out that China-CEEC Cooperation was in line with China-EU relations and reaffirmed the commitment to deepening the China-EU partnership for peace, growth, reform,

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and civilization based on the principles of equality, respect, and trust, thus contributing to the implementation of the China-EU 2020 Strategic Agenda for Cooperation (FMPRC, 2014). At the fourth China-CEEC Summit, the Medium-Term Agenda for China-CEEC Cooperation was published, where it was believed that China-CEEC Cooperation would further advance relations between China and the CEECs and promote the all-round and balanced development of the China-EU comprehensive strategic partnership (FMPRC, 2015). The Riga Guidelines for China-CEEC Cooperation, published at the fifth China-CEEC Summit, pointed out that synergy should be developed between China-CEEC Cooperation and the China-EU comprehensive strategic partnership through the China-EU Connectivity Platform and other channels.\(^5\) The Budapest Guidelines for China-CEEC Cooperation, published at the sixth China-CEEC Summit, reiterated that China-CEEC Cooperation was part and parcel of the overall China-EU cooperation, and the Chinese side reaffirmed the high importance it attached to the China-EU comprehensive strategic partnership, its support for European integration, and its commitment to the China-EU partnership for peace, growth, reform, and civilization, and that it was happy to see a Europe enjoying solidarity, stability, and prosperity (FMPRC, 2017). At the seventh Summit, the participants stressed that China-CEEC cooperation was an important part of and a useful supplement to China-EU relations and expressed their readiness to work together, through the China-CEEC format, and in line with their respective competences and existing commitments, to ensure China-EU relations continue to develop in a balanced way. It was also emphasized that the EU member states and candidate countries within the 16 CEECs supported the China-EU partnership for peace, growth, reform, and civilization, as well as the China-EU 2020 Strategic Agenda for Cooperation (FMPRC, 2018). At the eighth Summit, the participants underlined that China-CEEC Cooperation constituted an important part of China-EU relations and complemented China-EU comprehensive strategic partnership and China-EU 2020 Strategic Agenda for Cooperation. They reaffirmed their commitment to deepening their partnership for peace, growth, reform, and civilization.\(^6\)

The narratives of China-EU relations in the successive Guidelines for China-CEEC Cooperation are completely in line with China’s EU policy paper. First, it was clearly


stated in China’s Policy Paper on the European Union released in 2018 that China-CEEC Cooperation is a platform for win-win, open and transparent cross-regional cooperation based on common interests and needs of China and the CEECs and welcomes the support and constructive participation of the EU and other parties (FMPRC, 2018a). This proves once again that China welcomes the involvement of the EU, other European countries and organizations. Second, the content and agenda of China-CEEC Cooperation enrich and complement those of China-EU Cooperation, but are somewhat different in a way that the China-CEEC Guidelines have never stressed the political dimension of the cooperation. Instead, the focus has been on economic cooperation, trade, investment, connectivity, people-to-people exchanges. With practical cooperation as its focus, China-CEEC Cooperation has no intention to undermine China-EU political relations, and the last thing it wants is to bypass the EU and start a regional mechanism on political cooperation with the CEECs. Third, a number of China-CEEC Summits invited representatives of the EU to attend as observers and this shows that the principle of openness and transparency of China-CEEC Cooperation is strictly followed and the EU is always respected as an irreplaceable player in the region.

**CHINA-CEEC ECONOMIC COOPERATION IN THE CHINA-EU ECONOMIC RELATIONS**

Through diversified cooperation mechanisms such as economic and trade interaction and investment collaboration, “China-CEEC Cooperation” has become a highlight of the cooperation within China-EU economic relations. Since the establishment of China-CEEC Cooperation, China-CEEC economic cooperation and trade have produced fruitful results, with two-way trade steadily growing and becoming a highlight in China-EU economic relations. We have seen constantly improved bilateral cooperation mechanisms, expanded mutual investment, and smooth infrastructural cooperation. China-CEEC investment cooperation in the infrastructure, energy, and manufacturing sectors has significantly contributed to China-EU economic and trade ties, as evidenced in the following three aspects:

Since the establishment of China-CEEC Cooperation, China-CEEC economic cooperation and trade have produced fruitful results, with two-way trade steadily growing and becoming a highlight in China-EU economic relations. We have seen constantly improved bilateral cooperation mechanisms, expanded mutual investment, and smooth infrastructural cooperation. China-CEEC investment cooperation in the infrastructure, energy, and manufacturing sectors has significantly contributed to China-EU economic and trade ties, as evidenced in the following three aspects:
First, economic and trade cooperation mechanisms have been improving. The China-CEEC Ministerial Conference on Economic and Trade Promotion, the Business Forum, the Investment Promotion Agencies Contact Mechanism, the Business Council, and the SME Coordination Mechanism were established under the China-CEEC Cooperation framework. Meanwhile, the China-CEEC Investment and Trade Expo and the China International Import Expo have become an important avenue for the CEECs to promote their quality products in China, significantly raising the awareness of Chinese customers towards CEEC products. Bilaterally, China and Hungary established working groups on trade promotion with Romania and working groups on e-commerce and investment cooperation with Estonia and Croatia.

Multilaterally, trade mechanisms under the China-CEEC framework play a complementary role in China-EU trade relations. Take the China-CEEC SME Coordination Mechanism, for example. It takes into full account the share of SMEs in CEEC economies and their importance in creating jobs and enhancing competitiveness, and aims to step up SME cooperation and exchanges between China and the CEECs. From 2018 to 2019, two China-CEEC Forums on SME Cooperation were held in Cangzhou, Hebei Province, where multiple cooperation projects were agreed on, with a total value of over 16 billion RMB yuan. Besides, a China-CEEC SME Cooperation Zone was established in 2018, and efforts have been made to put in place a China-CEEC research findings commercialization base, an industrial cooperation base, a CEEC products presentation and trade base, and a cultural exchange centre. Since 2015, the China-CEEC Investment and Trade Expo has been organized in Ningbo. The Expo has since become an important platform related to trade and investment between China and the EU, offering the CEECs a useful opportunity to present their products. In fact, most CEEC businesses are associated with the EU in one way or another, and their trade with China is an important part of China-EU trade. Therefore, the above-mentioned China-CEEC mechanisms have helped advance China-EU business ties.

Second, two-way trade has been steadily growing. According to Chinese Customs statistics, China-EU trade stood at 705.1 billion US dollars, up by 3.4% year on year, making the EU the largest trading partner of China for 16 consecutive years. As mentioned earlier, the share of China-CEEC trade-in China-EU trade showed a trend of growth in 2019, as China-CEEC trade has been growing year by year, at a rate faster than that of China-EU trade, making it a new driver for China-EU trade. The CEECs have a unique advantage and a special role to play in promoting

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7 Based in Cangzhou City of Hebei Province of China.
8 Statistics of Trade between China and European Countries from January to December 2019, March 2, 2020, Ministry of Commerce (PRC).
By taking advantage of China-CEEC Cooperation, the CEECs are well-positioned to become a hub connecting China with the European high-end market and its advanced industrial capacity. The CEECs are also able to make use of the spillover effect of the fast growth of the Chinese economy to help upgrade their own industries and improve people's livelihood. The constantly improving industrial chain among China, the CEECs, and the EU as a whole has helped develop various sectors in Europe and narrow the economic and social gap between the CEECs and other more advanced parts of Europe.

In addition, the years since the inception of the China-CEEC Cooperation have seen rapid growth in the number of Chinese tourists in the CEECs. According to Chinese statistics, more than six million Chinese tourists visited Europe in 2018, out of which 36.3% visited Eastern Europe, ranking the first among all parts of Europe, higher than Western Europe (32.8%), the Nordic states (16.6%) and Southern Europe (14.2%). In the first half of 2019, the number of Chinese tourists visiting the CEECs grew by three to five times (China Outbound Tourism Development Annual Report: 2019). The immense attraction of the CEECs to Chinese tourists has been translated into an important impetus for economic cooperation and trade between China and the CEECs. Despite a surplus in trade in goods on the part of China towards most CEECs and the EU, there has been a clear surplus on the part of the CEECs and the EU when it comes to tourism.

Third, mutual investment has been expanding. As China-CEEC Cooperation deepens, China’s investment in the CEECs has been growing rapidly, with a bigger share in China’s total investment in Europe and total foreign direct investment. Although Chinese investment is becoming less concentrated in certain CEECs, distribution among regional countries has been improved. In 2019, Chinese direct investment stock in the 17 CEECs was 2.512 billion US dollars 2019, up by nearly 20% over 2018, much faster than China’s total FDI stock growth. The investment is largely made in machinery manufacturing, chemicals, finance, environmental protection, logistics, and new energy sectors. Mutual investment has brought about cooperation on industrial capacity, a new driving force for China-EU business cooperation. In 2019, EU investment in China stood at 10.42 billion US dollars in real terms, up by 25.7% over the previous year, while Chinese direct investment in the EU stood at 8.11 billion US dollars, up by 7.1%. As China and the CEECs continue to upgrade their relations and the CEECs continue to improve their business environment, China’s direct investment has been accumulated to a certain extent,

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and China-CEEC Cooperation has gradually become a highlight in China’s business ties with the EU and the world as a whole.

In the context of difficult times for European integration and Brexit, it is important to strengthen China-CEEC Cooperation, as it will surely help China and the EU in their joint efforts to uphold multilateralism, oppose trade protectionism, increase mutual investment and trade, and step up cooperation in global economic governance.

**CHINA-EU CONNECTIVITY ENHANCED THROUGH CHINA-CEEC COOPERATION IN INFRASTRUCTURE CONSTRUCTION**

Infrastructural cooperation between China and the CEECs has not only improved connectivity among the CEECs but also connectivity between the CEECs and other parts of Europe.

China-CEEC Cooperation has made visible progress in infrastructural connectivity. Since 2012, a large number of infrastructural projects in the Balkans have been undertaken by Chinese businesses, such as the Zemun-Borca Bridge and the E763 Highway in Serbia, the Smokovac-Mateševo Highway and a railway renovation project in Montenegro, the Miladinovci-Štip and Kičevo-Ohrid Highways in North Macedonia, and the Peljesac Bridge in Croatia. Chinese businesses also invested in joint projects in the energy and communications sectors in Bosnia and Herzegovina, Romania, Albania, and Estonia to provide the region with better energy and communications support. Good progress is being made in the energy and transport infrastructural projects undertaken by Chinese businesses in Serbia, Bosnia and Herzegovina, Montenegro, and North Macedonia. Many of these projects are part of the pan-European corridors. Apart from China-financed projects, other projects are funded by the EU and built by Chinese businesses, such as the Peljesac Bridge. Through projects invested and constructed by Chinese businesses, China capitalizes on its capital and technological strengths in the infrastructural sector to improve connectivity inside and among the CEECs and between the CEECs and other parts of Europe.

As an important China-CEEC connectivity project, the China-Europe Land-Sea Express Line represents a new trade route connecting the Far East and Europe, on the basis of the Port of Piraeus in Greece and running through North Macedonia, Serbia, Hungary, Austria, the Czech Republic, and Slovakia (Xinhuanet, 2017). While traditional shipping routes run through the Strait of Malacca, the Bay of Bengal, the Indian Ocean and the Cape of Good Hope across the whole south Atlantic and the western African coast before reaching the heart of Europe, this new route, once completed, will open up a brand-new fast track of transportation for trade between
China and Europe in both directions, reducing transportation time by at least seven to eleven days, compared with traditional shipping routes. The development of this Express Line will create a new situation by improving the logistics of countries along it and speeding up the movement of people, goods, and capital.

As Greece joined China-CEEC Cooperation in April 2019, and its relations with China continue to grow, it will surely make full use of its shipping strengths and ports to be more actively involved, giving the Express Line better prospects. In 2019, 1,000 trains carrying around 80,000 TEUs of goods were operated along the Express Line. It is planned that up to 100 thousand TEUs of goods will be shipped in 2020. This integrated transportation corridor on land and at sea is bringing China and Europe closer to each other.

**SIGNIFICANCE AND PROSPECTS OF CHINA-EU THIRD-MARKET COOPERATION IN THE CEECS**

Third-party market cooperation has gradually become a promising field of cooperation between China and European countries. Such cooperation between China and the more advanced economies in Europe also has great potential. The more economically advanced European countries usually have a profound knowledge of the history, culture, and social systems of the CEECs, and their businesses have a strong presence there, who have, over the years, developed rich experience in operating in the region and the EU as a whole. Third-party market cooperation is a good way to facilitate the participation of more developed European countries in the CEEC projects, reduce the risks of Chinese investment in the CEECs, and remove suspicions of certain EU members over the transparency, source of funding, investment returns, and debt risks of China-invested projects. The prosperity of the CEECs will not only help ease the trend of a multi-speed Europe but also narrow the gap between the eastern and western parts of Europe.

So far, China has signed intergovernmental documents on third-party market cooperation with France, Italy, Austria, and the UK, while Germany and Spain have expressed an interest in entering into similar cooperation. For example, the Joint Statement of the fourth round of China-Germany Inter-governmental Consultations (13 June 2016) stated explicitly that China and Germany support third-party market development and cooperation in the infrastructure, finance, and connectivity sectors. The Spanish government was one of the first to establish a working group on third-party market cooperation with the Chinese government, and so far, the two countries have carried out quite a number of joint energy and infrastructural projects in North Africa and the Middle East.
Third-party market cooperation in the CEECs is still at an early stage. The Devnya Cement Plant project, invested by Italcementi and built by CBMI Construction Co., Ltd. of China, was completed in February 2015. This was the largest contracting project undertaken by a Chinese company in Bulgaria. In November 2019, the Čapljina section of the Corridor 5C Motorway project in Bosnia and Herzegovina, jointly undertaken by China State Construction and PowerChina, started construction. It is financed by the European Investment Bank, with a contractual value of about 100 million euros. It was the first time that Chinese businesses carried out third-party market cooperation in Bosnia and Herzegovina together with the EU. PowerChina plans to implement the Belgrade Subway project in 2020 with a French engineering company involved. Despite the small number of projects jointly implemented by Chinese and Western European companies in the CEECs, China has been able to accumulate some experience in third-party market cooperation after a number of exemplary joint projects with France, Germany, the UK, Italy, Spain, and Austria in Africa and Latin America. This has laid a solid foundation for similar cooperation in the CEECs.

**VIEWPOINTS ON CHINA-CEEC COOPERATION AND ITS INFLUENCE ON CHINA-EU RELATIONS**

There have always been doubts and misgivings about China-CEEC Cooperation inside the EU, and the major viewpoints are as follows:

First, “split and rule”. Since the establishment of China-CEEC Cooperation, the EU has been suspicious of the intention of the format to split the EU, describing the format as a Trojan horse sent to Europe from China. Such suspicion has always been there. In March 2019, the European Commission released a paper entitled *EU-China: A Strategic Outlook*, in which China was called a systemic rival of the EU (Hillman & McCalpin, 2019). This is echoed by some European scholars who think that the EU has realized that China-CEEC Cooperation may further erode the European values and uniformity and result in the division of the EU. In recent years, hit by the migration crisis, populism, and Brexit, the EU has become more sensitive to changes in its external environment, and it has become imperative that the EU maintains internal solidarity and mitigate risks of instability. Chinese efforts to deepen cooperation with the CEECs at this juncture are easily understood by some in the EU as negative.

Second, “rule breaker”. The EU attaches great importance to rules and standards and prides itself on being a normative power or rule-based actor. As China grows stronger, the EU sees China as a rival when it makes the rules, especially after China proposed the Belt and Road initiative. Some EU member states pay close
attention to the increase of Chinese investment in Europe via the Belt and Road platform and keep stressing the importance of compliance with the rules and standards when the Belt and Road initiative is being implemented. European think tanks criticize some of the Chinese-invested projects in the CEECs for not complying with rules, such as the Budapest-Belgrade Railway (Hungarian section) and highway projects in North Macedonia. Other projects are criticized for adding to the debt risks of the CEECs, such as the Smokovac-Matešević Highway in Montenegro, and the Stanari Thermal Power Plant in Bosnia and Herzegovina is disputed to be environmentally friendly. These projects are labelled as negative investment projects for alleged non-compliance with EU regulations.

Third, “geopolitical motives”. Worried about potential geographical and economic implications brought by China-CEE Cooperation, the EU is concerned that China may gradually take control of major European infrastructure through its investment projects, which will result in closer relations with the CEECs and more leverage in pressurizing the EU and major EU member states. There are also fears that China may take advantage of the geopolitical and economic influence that it is gradually developing in the CEECs to block some of the EU common policies towards China. Meanwhile, some CEECs may make use of their strong relationship with China to bargain with the EU.

In the face of doubts and misunderstandings of one kind or another, China has been responding through constant dialogue and communication with the EU. It argues that on the one hand, China-CEE Cooperation is not directed against any other country or organization, and it is merely developing normal state-to-state relations. On the other hand, China will not view its relations with the CEECs in isolation from the larger picture of China-EU relations. On the contrary, it sees China-CEE Cooperation as an important part of China-EU relations.

**POST-PANDEMIC COOPERATION BETWEEN CHINA AND CENTRAL AND EASTERN EUROPE**

China-CEE Cooperation has never been conducted in disregard of the larger picture of China-EU cooperation. It will not only inject positive energy into the European integration process but also help China-EU relations develop in a more balanced manner. The COVID-19 pandemic since the beginning of 2020 has dealt a heavy blow to countries all over the world, including China, both economically and socially. Since the outbreak of this pandemic, the largest public health emergency facing humanity, China and the CEECs have worked hand in hand to weather the challenges.
While some countries have issued travel bans to and from China, the CEE countries did not show any hesitation to provide aid and have been “working on all fronts” to help the Chinese authorities to fight the disease. The EU’s Emergency Response Coordination Centre immediately coordinated all EU Member States to facilitate the delivery of needed personal protective equipment. Firstly, the Commission, under the Cross-border Health Threat Decision, coordinates with the Member States through three key mechanisms (the Early Warning and Response System, the Health Security Committee, and the Health Security Committee’s Communicators’ network), which “support cooperation, rapid exchange of information, swift monitoring and coordination of preparedness and response measures to COVID-19”; secondly, the Commission, with support from relevant EU agencies, is providing technical guidance related to case definition for diagnosis, infection prevention and control in health care settings, updated information on therapeutics and vaccines, etc.; thirdly, the Commission, with the aim of boosting global preparedness, prevention, and containment of the Coronavirus, offered a fund that is allocated to various sectors; fourthly, the Commission, through the EU Civil Protection Mechanism, has been coordinating the delivery of assistance to China and financing the transport costs of the EU Member States’ repatriation flights. At the same time, when China was at its most difficult time, the CEECs lent a helping hand. Hungary and Poland provided China with medical supplies immediately. Polish President Andrzej Duda, Czech President Milos Zeman, and Serbian President Aleksandar Vucic sent letters to President Xi Jinping. First Deputy Prime Minister and Foreign Minister Ivica Dacic of Serbia visited China, bringing with him the firm support and friendship of the Serbian people towards the Chinese people. The Czech Philharmonic Orchestra and a Polish blues-rock band voiced support for China through music. The sincerity and assistance of the CEECs were well-received in China.

China understands Europe’s circumstances and problems as the virus spreads in EU nations, recalling that the EU and its members expressed their sympathy and support in various forms for China’s pandemic prevention and control efforts not long ago. Chinese President Xi Jinping sent a message to President Charles Mitchel of the European Council and President Ursula von der Leyen of the European Commission, conveying sympathies to the EU and the people of its member states over the COVID-19 outbreak. The response to the pandemic should not stop at national borders. China reaffirmed its position to stand firmly with Europe to jointly safeguard regional and global public health security and to protect the lives, safety, and health of people on both sides and beyond. In terms of supporting Europe’s outbreak response, China now also actively carries out commercial channels to facilitate Europe’s purchase of medical supplies.
As China gradually put the pandemic under control, the virus quickly spread across Europe. China worked fast to assist the CEECs. On 13 March, a video conference on tackling COVID-19 was organized by the Chinese Ministry of Foreign Affairs, the National Health Commission, the General Administration of Customs, and the Municipal Government of Beijing to share the experience with the CEECs on tackling COVID-19 and step up public health cooperation. The Chinese government, businesses, and NGOs also provided the CEECs with large quantities of supplies necessary for combating COVID-19 by various means. The China-Europe Rail Freight trains and Chinese air carriers shipped a lot of suppliers to the CEECs. A Chinese medical team was sent to Serbia. BGI donated two test laboratories to Serbia and the core facilities of nucleic acid test laboratories to Greece. By donating medical supplies, keeping transportation passages open, dispatching medical experts, and sharing best practices and information, China has taken concrete actions to help the CEECs fight the virus. Meanwhile, projects under the China-CEEC framework are making steady progress. Construction of infrastructural projects undertaken by Chinese businesses in the CEECs, such as the Szczecin Port in Poland and the Peljesac Bridge in Croatia, is underway as planned. The Stanari Thermal Power Plant in Bosnia and Herzegovina and the Smederevo Steel Plant in Serbia, invested and operated by China, are running well. An online Information Exchange and Matchmaking Conference between Chinese and the CEEC SMEs on Resuming Work and Production was held in June in Beijing, and over 300 businesses took part and signed nearly 70 cooperation agreements. These have offered the CEECs support and help as they work hard to stabilize their economies. Cooperation during the pandemic has added a new dimension to China-CEEC Cooperation and opened up new possibilities and prospects for their cooperation in the future.

**CONCLUSION**

China-CEEC Cooperation is a cooperation platform jointly built by China and the CEECs that aims to promote growth in both China and the CEECs and contribute to European integration. China has no geopolitical intentions behind its cooperation with the CEECs, and firmly supports European integration. The EU is an important force for world peace and stability and the largest trading partner of China. A united, stable and prosperous EU is in the fundamental interest of China. Just like proposals such as a multi-speed Europe or reshaping Europe, China-CEEC Cooperation is also committed to more balanced and thorough development of the European economy and, ultimately, European integration. China-CEEC Cooperation has always abided by internationally recognized rules, including the WTO rules, respected EU legislation and regulations, stayed committed to consultation and sharing benefits, and urged businesses to follow the market and business rules when they bid for...
European projects without making any exclusive arrangements. It has proven to be an open, transparent, and inclusive cooperation platform that injects impetus into China-CEEC relations and contributes additionally to China-EU’s comprehensive strategic partnership.

In a globalized era, shared opportunities and risks are inevitable. People and goods are constantly moving all over the world, so do pathogen agents. Public health emergencies are a common problem facing mankind. Viruses have no barriers. Humanity has become a community of prosperity but also of destruction. In this globalized era, there is no country able to develop without associating with others. At this moment, the top priority is to cooperate, share experience, as well as work together. Developing a sense of community with a shared future for humanity, thereby winning the battle against the novel coronavirus pneumonia pandemic is our common goal. After the outbreak of this pandemic, China has made enormous efforts to protect its people and assume responsibility as a major power to contain the spread of the virus worldwide. China’s combat against COVID-19 has set an example of building a global community with a shared future for all mankind. The most radical and strictest measures taken by China are not only to safeguard and ensure the health of Chinese people, but also to secure the health of people around the world.

We are now facing a new world where there are new insecurities and health is a rising issue on the agenda of China-CEE relations. Today, both China and the CEE countries are key players in global health governance, and a health partnership has emerged between them. The COVID-19 crisis is a significant test for their health partnership. By now, the two partners have maintained close contact, and health aid has been delivered mutually. The pandemic underlines the global interdependence and the critical role of China and the CEE countries in dealing with such challenges. In the short term, the two partners should keep in close contact about the disease’s progression and offer assistance to one another. In the long run, China and the CEE countries may consider further lifting the role of health on their political agenda, and the CEE countries may engage with China’s health system reform more actively. The “Belt and Road” Initiative could serve as a platform for strengthening their health cooperation, so as to jointly build a community with a shared future for mankind.

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JAPAN AND SOUTH KOREA’S POLICY IN RESPONSE TO COVID-19: A COMPARATIVE PERSPECTIVE

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Abstract: The similarities and differences in the South Korean and Japanese approaches to the pandemic response have been compared since the first cases were registered in both countries. South Korea became a famous example of how to deal with the outbreak effectively, despite the concerns about the aggressive methods of gathering data about its citizens. The Japanese government has been dealing with criticism concerning its management of the Tokyo Olympics, the COVID-19 response, economic countermeasures, and the slow vaccination rollout. This paper offers a brief analysis of the questions of how and what is influencing both governments and what makes an efficient response to the crisis of this scale.

Keywords: COVID-19, Tokyo Olympics, Moon Jae-In, Japan-Korean relations.

2020 was the year when the Japanese government planned to make its great comeback to world politics by organizing the “Tokyo 2020 Olympic Games”. The great enthusiasm, followed by years of preparation on the Japanese side, was stopped by the outbreak of the COVID-19 pandemic. Starting with the People’s Republic of China (China), many countries have suffered from numerous cases of the coronavirus among their citizens. Among them were Japan and the Republic of Korea (ROK/Korea3).

The importance of standing against this new disease was emphasized by Korean President Moon Jae-in during his speech on the occasion of commemorating the March 1st Movement (First Independence Movement Day). Dealing with the memory

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of the anti-Japanese uprising, he announced that: “(...) We will be able to overcome the COVID-19 outbreak and revive our shrunken economy. (...) The government has started providing support tailored to microbusiness owners and SMEs, as well as various service industries such as tourism, dining, and air and maritime transport. In addition to the provision of stronger support for overcoming the damage, a support package to respond to the COVID-19 outbreak will be swiftly implemented. These contain unprecedented plans to stabilize the livelihood of ordinary people and enhance economic vitality. (...) By overcoming the pressing COVID-19 outbreak at home and achieving peace and common prosperity on the Korean Peninsula, we will build a Republic of Korea that cannot be shaken. That is genuine independence and the completion of a new independence” (Address by President Moon Jae-in on the 101st March First Independence Movement Day, 2020).

Meanwhile, the Japanese Prime Minister, Abe Shinzō, mentioned that the danger of COVID-19 was coming to Japan, but it was still not that hard as in Korea. He calmed: “We will do everything possible to minimize that burden by putting into place, to the greatest possible extent, measures to provide care for small children. The government will do everything possible to support local government efforts, including making the same arrangements at after-school care programs as during spring break. We also intend to establish a new grant scheme to squarely address the reduction in income resulting from parents taking leaves of absence from work, for both permanent and non-permanent workers. As the one who made that decision, taking full responsibility, I am determined to thoroughly address the various issues that arise. We will also swiftly compile within roughly the next 10 days a second emergency policy package that utilizes this fiscal year’s contingency funds, which amount to more than 270 billion yen” (Press Conference by the Prime Minister, 2020). A few days later, a special state of emergency was introduced in Japan, and 6 months later, Abe resigned.

In this article, the authors decided to raise the case of the governmental response to COVID-19 in both countries. Since the Japanese-Korean relations in the times of the pandemic were examined by Justyna Filipowicz (Filipowicz, 2021), we claim that the pandemic became a moment that, instead of showing the new, modern role of Japan, created a severe crisis in internal politics and revealed the features that were attempted to be solved, such as the isolation of Japan. In the case of South Korea and its specific approach towards the policies that ruled over the pandemic response, multiple internal and external factors were at play, including the topic of privacy of its citizens, previous experience gained during the SARS outbreak in 2015, and relations with its neighbours.

Therefore, we ask: What were the first measures taken by both governments when the pandemic started? What is the impact of the governments’ COVID-19
strategy on the political moods in Japan and Korea? But the deepest analysis is devoted to answering the questions: What is the vaccination program in both countries, and how is it implemented? What is the current course and major challenges of the vaccination process in both countries? This structure will help to understand the complex aspects of the anti-COVID-19 strategy of each country and its results.

JAPANESE AND KOREAN REACTIONS TO THE COVID-19 OUTBREAK

At the beginning of the pandemic, Japan decided not to allow foreigners to come to Japan. The residents of Japan were also included in this order. That meant that the people who had their families in Japan were not able to return to the country. Moreover, foreigners who were abroad were not able to come back to their homes and workplaces. Blaming non-nationals for the COVID-19 spikes was also reported by the media (Kyodo News, 2020). After a few months, the voices claiming that non-Japanese residents should be able to enter Japan have become stronger (Osumi, 2020). Nonetheless, Japan continues to request visa applications, even from nationals of nations that were granted visa-free admission to Japan prior to March 2020.

In Korea, the country where, at the very beginning of the pandemic, COVID-19 came from China, openness and social trust became the keys to success (Osumi, 2020). The data analysis and testing system became the reason for avoiding the situation as it was at the beginning in China. Similarly to the situation in Japan, tourists are not allowed to come to Korea, and all the applicants that were able to participate in the visa-free program are now asked to have this document. The situation with non-Korean residents was slightly different to this in Japan, but discrimination cases still happened. For example, non-Korean residents could not benefit from governmental economic help during the COVID crisis. The local authorities managed to change it in Seoul but not in, for example, Gyeonggi, where the population of foreigners is quite large (Ester, 2020).

THE TOKYO OLYMPICS 2020 – THE MOMENT JAPAN WANTED TO COME BACK

Although both countries suffered from COVID-19, they were not only dealing with the virus but also with the lack of tourism. Japan lost even more – the opportunity to show that it is back on the international stage by organizing the Olympic Games. By hosting the Olympic Games in the 21st century, Japan hoped to use its so-called soft power. The idea was to draw the international audience’s attention to the high level of robotization or popular culture. Japanese politicians
remembered well the Chinese promotional success during the 2008 Olympics. However, they were aware of the People’s Republic of China’s dominant economic role in Asia. Japan is gradually losing its economic importance. Hosting the Olympic Games was the moment the country wanted to demonstrate its comeback, presenting Japan as a modern country operating according to Western standards, with recognizable and desirable culture and technology around the world.

However, the organization of the Games was associated with high levels of public discontent and protests across political camps. According to a May 2021 “Asahi Shimbun” public opinion poll, 83% of people surveyed were against holding the event (Asahi Shim bun, 2021). Eventually, the government decided to hold the Olympics without the presence of fans – including those from Japan.

THE COVID-19 VACCINATION PROGRAM IN JAPAN AND SOUTH KOREA

South Korean and Japanese approaches to the pandemic have been compared since the first cases were registered in both countries. South Korea was both praised and criticized for its aggressive methods of gathering data about its citizens, which eventually led to some concerns voiced by the Human Rights Commission (Byoung-il Oh, Yeokyung Chang and SeonHwa Jeong, 2020). But according to the prognosis made by the OECD, in the same period, the country accomplished a great economic victory – its GDP was estimated to decrease only by 0.8% in 2020, significantly less than Japan’s GDP, which was lowered by 6% (Ujek, 2021). The Japanese approach, especially now when the vaccination processes are being rolled out, has been put under scrutiny by the domestic political opposition and many international experts.

Despite a significant acceleration in the vaccination process, the world’s third-largest economy does not fare well in terms of the number of fully vaccinated citizens. As of July 6, 2021, Japan has vaccinated 14.5% of its population, just 4 percentage points above the global average. By comparison, Poland has 36.7% of its citizens vaccinated (Our World in Data, 2021). Japan also compares particularly poorly with other G7 countries, with the United Kingdom having over 50% of its population vaccinated, the United States at 48%, Germany at 39%, Canada at 38%, France and Italy at 34% (New York Times, 2021). At the same time, as of July 15, South Korea has 11.4% of its population fully vaccinated, which translates to roughly 5.87 million people who have received both doses and 20.3 million people who were vaccinated with at least one dose. The South Korean population is roughly 51 million people, whereas Japan’s is 126 million people.

The Olympic Games, scheduled to take place in Tokyo on July 23, 2021, are a very powerful catalyst to highlight the Japanese government’s efficiency and decision-making during the pandemic. The biggest concern among Japanese citizens
is precisely the safety rules associated with it. In late June 2021, the Tokyo council under the Ministry of Health warned of another wave of mass infections. Between June 24 and July 6, the level of new cases in Tokyo remained at about 570 cases per day. In the week from June 17 to 24, it was 452 cases, and the week before, it was 386 (Japan Times, 2021).

The Olympics are accompanied by a significant acceleration of the mass vaccination process, but they encounter a number of structural problems. As late as June 18, more than 6,000 people involved in the organizational activities of the event queued up for vaccination (Pawnik, 2021). By the end of June, one in two Japanese aged 65 and over had received at least one dose of the vaccine, but only since June 21 have they been available to younger people, not excluding athletes representing Japan at the Olympics (Steem, 2021).

On the other hand, the South Korean government is struggling with criticism as well. By April 2021, Seoul secured vaccines for 99 million people, almost twice the total number of its population and more than 2.5 times the intended target for the country’s immunity. (Shin, 2021). However, the ambitious plans for the first half of 2021 were not met – the original goal of vaccinating 20% of the population in July has failed. The young workers of the companies, who are working and interacting with each other daily, with little to no remote working solutions at all, are often pointed out as a reason for the fluctuating numbers of cases and are unlikely to get vaccinated anytime soon (Shin, 2021).

On July 14, South Korea registered more than 1,600 new cases to the toll of 174 thousand people and 2 more deaths, which rounds up the number of fatal infections to a little bit more than 2 thousand people. This marks the 7th consecutive day of cases involving more than 1,000 cases daily (SangmiChaHyonhee, 2021). Despite the relatively high numbers of cases, especially compared to the beginning of the pandemic, a great majority of people who contracted COVID-19 in South Korea survived – the highest death toll registered on July 14 was 982 people in Indonesia, 791 in Russia, and 230 in Mexico. All of these countries, however, register substantially more sick people every day- Indonesia more than 50 thousand people, and Mexico more than 12 thousand (Our World in Data, 2021).

The situation in South Korea is becoming more and more complicated. More than 1.67 million people aged from 55 to 59 have been put on hold for a week due to the shortages and the crashes of the governmental websites used for the online application processes. The country deals with shortages of jabs and the highest ever daily increase in cases (SangmiChaHyonhee, 2021).

This article hopes to outline the major logistical and structural problems that are slowing down the mass vaccination process in Japan and in South Korea, with
a particular focus on the process of large corporations taking a more prominent role in it.

THE COURSE AND MAJOR CHALLENGES OF THE VACCINATION PROCESS IN JAPAN AND SOUTH KOREA

Among the biggest obstacles to mass vaccination in Japan are slow decision-making processes in approving vaccines for use. Japanese laboratories have been testing the performance of Moderna and Pfizer vaccines since late January 2021. In the first half of February, Japan confirmed the efficacy and safety of the Pfizer-branded formulation and began testing processes for the AstraZeneca vaccine. Despite this, the vaccination process for citizens over the age of 65 only began in April. Before that, health care workers stood in queues to receive a jab.

AstraZeneca was approved for use in May, but the vaccine process was stopped the same day due to concerns about side effects. On May 24, Japan also opened mass vaccination centres in Tokyo and Osaka (SangmiChaHyonhee, 2021). Local government structures and the Self-Defense Forces are responsible for administering vaccines in Japan. According to the Japanese Ministry of Health, the country “hopes” to complete the vaccination process for “citizens who are willing to receive the vaccines” in November 2021 (SangmiChaHyonhee, 2021).

Another significant factor slowing down the vaccination process is Japanese law. Until the amendment of the Immunization Act (予防接種法) in 1994, Japanese citizens were obliged to be vaccinated (Mainichi News, 2021), but later the law mentioned a “commitment of effort” to obtain the vaccine (Immunization Act, 1994). The amendment came as a result of a series of lawsuits for compensation due to side effects after receiving Japanese MMR preparations decided in favour of the victims. In 2010, there was another series of vaccine controversies, this time against the HPC virus, which was included in the National Vaccine Program until 2013. As a result, demand for domestic production fell sharply, the government stopped supporting the development of new formulations, and large pharmaceutical companies withdrew from the market. Thus, campaigns to popularize vaccination in Japan on the same scale as before ceased (Bohorodycz, 2021).

Japan, which is sometimes referred to as the world’s only “super-ageing” society, faces a number of challenges in vaccinating a population nearly 30% of which is 65 years old or older (D’Ambrogio, 2020). As of early July, nearly half of Japan’s 36 million seniors have received at least one dose of the vaccine. Here, the logistical problems of enrolling and administering the vaccine to people with varying degrees of mobility and access to the Internet come into play but also citizens’ anxiety about the safety of the available products (Mainichi News, 2021).
Beata Bochorodycz cites an Ipsos survey conducted with the World Economic Forum in late January 2021, during which 64% of Japanese respondents were willing to be vaccinated. This was the third-lowest result among the countries surveyed, just ahead of France and Russia, which registered 57% and 42% willingness, respectively (Bochorodycz, 2021).

During the first wave of the pandemic, South Korea’s approach based on mass testing and a relatively liberal policy toward lockdown was successful. The government did not close its borders and loudly criticized its Japanese neighbour for doing so (Pawnik, 2020). The clusters were highly localized, including the infamous case of patient 31, a member of the Shincheonji church, who is sometimes described as a “superspreader”. To tackle this, the South Korean government decided to reach for the data stored on the security cameras, online banking documents, and data stored on the personal phones of its citizens (Pawnik, 2020).

South Korea approved the usage of the vaccines by Pfizer, AstraZeneca, Novavax and Janssen by April 2021 and quickly reached its daily vaccination targets. However, shortages and infrastructural obstacles have led to a sharp decrease in the daily doses, from 850,000 to less than 30,000 daily. Around 13 July, the government cited the non-disclosure agreements to avoid giving a certain date of the next arrival of the Moderna vaccine (SangmiChaHyonhee, 2021).

As it was mentioned before, the infections have become gradually less severe with more and more of the older and more vulnerable groups being fully vaccinated. The concern lies within the groups of younger people, mostly employed by companies and large corporations. According to the governmental data from 12 July, 63% of the cases in this particular group were connected to the Delta variant (SangmiChaHyonhee, 2021).

The slow rollout of the vaccines in South Korea is often attributed to the success of the first wave’s management. Perhaps the sense of urgency felt by the politicians of the United States, the United Kingdom or the European Union was not shared by Seoul, which registered far fewer confirmed cases than the world’s average. According to the government data accessed on 15 July, the positivity rate of the confirmed cases in South Korea is now 1.6%, while other countries, such as the United States, register roughly 10% (Ministry of Health of South Korea, 2021). However, it is a major and worrying increase from the statistics from April 2021, when the rate was around 0.002% (SangmiChaHyonhee, 2021).

‘JAPAN INC.’ AND THE KOREAN ECONOMY IN THE MIDST OF A PANDEMIC

In response to protracted vaccination processes, more and more Japanese corporations are choosing to provide vaccines to their employees. On 21 June 2021,
the government issued official permits to companies such as Toyota Motor, SoftBank Group and Nomura Hold. to dispense Moderna vaccine doses to employees inside their offices (Strait Times, 2021).

This unprecedented private sector involvement in Japan is winning more supporters. Tokyo-based oil company Eneos Holdings, Aeon and one of Japan’s most popular clothing chains, Uniqlo, have also expressed interest in employee vaccination programs. As of the second half of June, 3,419 Japanese companies employing a total of 13.7 million people had signed up for the program, according to The Straits Times (2021).

All of this is causing the term “Japan Inc.” to resurface in the Japanese and foreign press, this time in the context of taking over processes to prevent further spread of the COVID-19 pandemic. The sentiment of “Japan Inc.”, a combination of the Japanese government and business structures, made its way into the literature in the 1980s (Drucker, 1981). Over the years, it has also been used to describe the role of Japanese companies at the world’s industrial forefront. “Japan Inc.” is usually paired with a description of Japanese business culture in an attempt to answer the question of why distinctive hierarchical rules or rigid rules of etiquette and language survive in Japanese corporations.

Here, however, further structural problems and slower decision-making processes emerge. Despite strong interest from Japanese small and medium-sized enterprises, which account for 99.7% of all companies in Japan (独立行政法人中小企業基盤整備機構, 2021), the office vaccination program targets only large entities. In response, some Japanese startups have begun to unite so as to meet the government requirements (Straits Times, 2021).

As of 15 July, South Korea does not have a similar program available – instead, it is focusing on the largest players, crucial to the economy, such as the Samsung Group, LG and semiconductor company SK Hynix Inc. These representatives of the South Korean private sector are helping to ramp up the vaccination program by offering employees a jab of the Moderna vaccine at the end of June 2021. This initiative is being monitored closely by the Ministry of Labour, which is responsible for assessing the needs of the companies (Telecom, 2021).

Supporters of the program hope that peer and supervisor pressure will help encourage hesitant younger corporate employees. Both Japanese and Korean office workers are reluctant to change jobs, and companies tend to hire employees for their entire careers, so many people rely on their workplace for health care and periodic check-ups. Vaccines issued in offices are somewhat of an extension of these features of Japanese and South Korean work culture.
This would prove especially useful in the case of the South Korean office workers, often considered to be the main spreaders, despite being at the back of the lines for the vaccines. Unless listed in the vulnerable category, only teachers, social workers, and workers at high-risk facilities are eligible for the jab outside of the queue.

Japanese citizens clearly show that they are not satisfied with the policy led by the ruling Liberal Democratic Party of Japan (LDP). In September 2020, the longest-serving Prime Minister, Abe Shinzō, resigned. The new political leader of Japan, Suga Yoshihide, failed to halt declining support for the ruling party.

The biggest test was the recent local elections in Tokyo. If the LDP does not win outright, it risks losing power to KoikeYuriko, whose local party Tokyo Citizens First won 31 seats in Tokyo at the beginning of July (Kyodo News, 2021). Prime Minister Abe was losing support in June and July 2020, when the Olympic Games were planned to start. Half of the respondents did not support his policy at that time (Asahi Shimbun, 2020). After Suga became Prime Minister, the social moods showed some optimism in the opinion pools, only to fall suddenly to 47% in May and 42% in June of respondents who did not support Suga’s policy (Asahi Shimbun, 2020).

In Korea, the situation is quite similar, with voices of dissatisfaction – but in the case of this country, it is caused by the housing policy, which is unpopular among Koreans. Support for President Moon Jae-in is at an all-time low of 34.1%, and support for his Democratic Party is also very low, reaching 32% (Hallup, 2021). The opinion of Koreans on governmental reaction to COVID-19 was critical even in March 2020. At that time, 56% of respondents were against the governmental policy in this matter.

CONCLUSION

Korea and Japan were some of the first countries to which the coronavirus spread from China. We can analyze Korea in the context of the country’s help to business, but the vaccination program in the case of Japan, as one of the important aspects, was postponed because of the 2020 Olympic Games. The moment when Japan decided to “come back” was the moment when the ruling party lost support and was waiting for the results of the Autumn Elections. The anti-Olympic mood of Japanese citizens is a serious difficulty for the COVID-19 struggle of the Japanese government, which is still under the criticism of a large part of the nation. Even though the international corporations, both Japanese and Korean, help with the vaccination process, the speed cannot be compared to the one in Europe in the case of Japan. The vaccines which are allowed in the Country of the Rising Sun are only Pfizer and Moderna, while Korea uses four different types of vaccines, making
the pace faster compared to Japan. Moreover, the big blow was the closure of the countries which disabled tourists to visit Japan and Korea that benefit from the tourist movement. The “come back” to the regular visitors’ exchange will be a long and hard process in the post-COVID world, which can be challenging and healing for Japan and Korea.

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COUNTRIES’ APPROACH TO COMPULSORY LICENSING
IN THE TIME OF THE COVID-19 PANDEMIC

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Abstract: This paper deals with compulsory licensing for pharmaceuticals based on the TRIPS Agreement during the COVID-19 pandemic. Considering that the vaccines are under patent protection, and a pandemic is in effect, questions are arising about the timely delivery of the new vaccines on a global level at the time of a global health crisis. In this research, we provide an additional view on the question of the approach of the selected countries to compulsory licensing in the time of the COVID-19 pandemic. We examined multiple cases of countries and their approach to compulsory licensing during the pandemic, and we assessed examples of compulsory licensing in the past regarding antiretroviral therapy. We are also interested in understanding countries’ profiles considering the pandemic through factors that have potentially triggered decisions in preparation for compulsory licensing or in initiating such a request. To address this question, we use inductive and deductive methods in the analysis and synthesis of the observed literature, including a statistical showcase of the data. The results put additional light on the selected factors impacting countries’ decisions for compulsory licensing and the approaches of the observed countries/cases to the compulsory licensing considering national legislation and pandemic effects on the observed country.

Keywords: TRIPS Agreement, compulsory licensing, COVID-19, national legislation, vaccine.

INTRODUCTION

The SARS-COV2 virus has marked the previous period since the end of 2019. With its spread from China to the territory of Italy and later to all countries of the world, a global pandemic never before seen in the recent history of mankind was
created. This pandemic has definitely had and still has an extremely negative and strong impact on all areas of society, such as the economy, health, politics and others. However, two aspects are important for this chapter, namely the health of the population and the consequences for economic development in the context of finding solutions to reduce the impact of the COVID-19 pandemic. The World Trade Organization (WTO) provides opportunities for its member states to obtain the necessary pharmaceuticals for their populations in crisis situations through the flexibilities provided by the TRIPS Agreement.

In this chapter, we analysed the characteristics of countries that have tried to obtain the necessary pharmaceuticals for their populations through these arrangements. We focused on the flexibility provided by Article 31 of the TRIPS Agreement — compulsory licensing. It is important to note that the countries that sought to obtain the necessary drugs in 2020 did not yet have enough information about the best way to treat patients and combat the pandemic because the scientific community worked effectively globally during 2020 and 2021 to reach adequate solutions. However, it is interesting that some countries (e.g., Israel and Russia) have sought the solution to the SARS-COV2 treatment with drugs like lopinavir/remdesivir (which belong to the group of antiretroviral drugs and have positive effects on HIV/AIDS infections). Russia and Israel did not seek these drugs because of HIV/AIDS infections in their populations (as other countries did in the past), but because of a mechanism of action that was thought to be able to help treat COVID-19. For this reason, we are interested in analyzing selected countries from the angle of their desire to enter compulsory licensing for the same type of drug but with different indications. This procedure arose due to the impossibility of solving the current problems caused by the COVID-19 pandemic, as well as the fact that the vaccines that were made were not approved as a public good. This was a decision made at the 73rd World Health Assembly (18-19 May 2020). In principle, it is defined that in addition to the fact that newly created vaccines that are necessary for humanity cannot be considered a public good, they fall under the regulations on patent protection regardless of the severity and significance of the current COVID-19 pandemic. This resolution, however, recognized the importance of immunization as a public good, which is paradoxical if it is understood that vaccines themselves are not. Interestingly, the EU has advocated (with the support of about 100 countries) defining vaccines as a public good. However, the US has rejected and reformulated this request (Third World Network, 2020).

There were also other initiatives for finding solutions in the field of vaccination at the global level. Therefore, Costa Rica and the World Health Organization created the action (The solidarity call to Action) in order to approve the voluntary licensing
of the drug for COVID-19 when it becomes available without being directly linked to Article 28 of the TRIPS Agreement which defines exclusive rights (WHO, 2020).

In addition to the problem of patent rights to newly created drugs (or vaccines), there is also the problem of their production and distribution (Stamenovic, 2020; Stamenovic, 2020a). In these processes, the production capacities of the patent holder are especially questionable, as well as the regulations that should ensure the timely delivery of pharmaceuticals to countries around the world. In addition, a significant problem is related to the patients themselves, i.e., those infected with the SARS-COV2 virus. In particular, healthcare treatments are very expensive in some countries, such as the United States, raising concerns about their availability in pandemics and the amount of debt that patients will incur if they are fortunate enough to recover from this virus. Access to health care is not only a problem in countries where treatment is expensive, but mostly it is problematic in under-resourced and poor states globally. If we look at the high-risk rate of low-income citizens, there is, of course, a risk for underdeveloped and developing countries around the world. Also, special attention should be paid to chronic patients whose chronic diseases have affected their immunity or who need to be treated in health care facilities when this is not possible due to COVID-19 and due to the small capacity of the domestic health care system. Patients whose immunity is particularly at risk, such as patients with chronic lung disease, malnutrition or compromised immunity due to HIV, should also be borne in mind.

Therefore, the idea of the TRIPS Agreement is that countries with insufficient funds or, for some other reason, unable to provide therapy to their populations in times of health crisis have the opportunity to activate some of the flexibility offered by this global agreement. In addition to the resources themselves or the inability to come up with innovative solutions within the time needed to resolve the health crisis, the WTO member states can find a solution through the production of generic pharmaceuticals or import options. Compulsory licensing is one of the flexibilities we are most interested in exploring in this chapter. The production of a generic drug through compulsory licensing can be made without the prior approval of the patent holder. Compulsory licensing has been used 108 times in history, according to the available data (Medicines Law & Policy, 2021). Among other things, it was used to help the WTO members find better options for HIV/AIDS infections in times of health crisis (WTO, 2021).

During 2020, the situation was quite unreliable although there was a continuous intervention by the World Health Organization (WHO) in order to coordinate and manage the crisis on a global level. When the scientific discoveries of vaccines came about, the drugs that were studied fell into the background. It was necessary to execute clinical trials, which were made at a speed that was unknown to the industry
until then (Ćuzović et al., 2019, pp 184-187; Jelisavac Trošić et al., 2018, pp 83-85). This is evidenced by the decisions of the President of the US, Donald Trump, who with his team and the Food and Drug Agency worked on the introduction of the so-called *Operation warp speed* into the regulations of clinical studies through a public-private partnership in order to bring clinical studies to an end as soon as possible and the vaccine to be ready for use.

Pfizer-Biontech, Jonson & Johnson, Astra Zeneca, Russian Sputnik V and Chinese Sinopharm started the race. In the later phase of 2020, the COVAX centre was implemented, formed by Gavi, the coalition for Epidemic Preparedness (CEPI) and the World Health Organization to accelerate the development and production of the COVID-19 vaccines and assure global access. In the further course of our work, we will present the status of vaccination in selected countries, but one of the basic questions we ask is related to improving the flexibilities of the World Trade Organization in such a way that it can really provide timely access to medicines during health crises. The Balkan countries, for example, have demonstrated a completely different approach to vaccination, namely their ability to obtain vaccines under new market conditions. The Republic of Croatia, as an EU member, was forced to wait for EU solutions while Bosnia and Herzegovina, which is not an EU member, did not have the opportunity to get vaccines through other channels. The same was true for smaller countries such as Montenegro and North Macedonia. On the other hand, the Republic of Serbia is among the countries in the world that was the first to get a significant number of vaccines, and it has four types of vaccines to offer to its citizens. However, the Republic of Serbia is still in the WTO membership negotiation process (Jelisavac Trosic, 2020); (Rabrenovic et al., 2020). It is well-known that there are many variations of the coronavirus in nature, but only a few have the possibility of transmission to humans. This speaks volumes of the potential danger of viruses in the future, as well as the possible use of viruses in bioterrorism. These are the facts all the great world powers are aware of and which define their security strategies in accordance with the significance of these threats in the future and aimed at better solving health and other crises.

### The TRIPS Agreement and Compulsory Licensing

Compulsory licensing is a part of the TRIPS Agreement (The Agreement on Trade-related Aspects of Intellectual Property Rights), which regulates minimum standards in a legal context for approaching pharmaceutical patents in times of health crisis (WTO, 2021). The TRIPS Agreement became effective on January 1, 1995, and, to date, is the most affordable agreement in the field of intellectual property. This agreement specifically refers to copyright and related rights and
requires signatory countries to always harmonize the latest agreements in the field of patent rights, the Paris Convention for the Protection of Industrial Property and the Berne Convention for the Protection of Literary and Artistic Works. The Doha Declaration held in 2001 introduced Article 31bis, which looks at the possibility of applying flexibilities in crisis situations if the state does not have the capacity to produce a particular drug. Thus, under compulsory licensing, the state has the ability to produce a generic drug but only if it is for domestic use. This possibility is not valid if the state would deal with the export of a certain generic drug. The patent holder is not disenfranchised in that case, but there is a possibility that certain fees will be paid through compulsory licensing in order to compensate for the use of the copy of the patent to the patent holder. Although the TRIPS Agreement does not define the use of generic drugs during crisis situations, the 2001 Doha Declaration introduced that the state is able to determine if a public health crisis is a reason for requesting compulsory licensing.

The TRIPS Agreement allows several different flexibilities, which might be achieved through Article 30, Article 31, Article 31bis, and Part 7. This chapter is mostly interested in the area of Article 31, which represents compulsory licensing. Other articles might be connected with this one, especially Article 31bis when the state refers to the fact that there are not enough production capacities for a certain pharmaceutical in times of health crisis.

In the case of the COVID-19 pandemic, although it was a major public health crisis, only a few states have applied for compulsory licensing for drugs that could help their population. Some countries have drafted national regulations to provide a framework in the event that the situation becomes severe enough to necessitate compulsory licensing. Other countries (i.e., France) have held Senate debates on these topics, with differing views on the likelihood of acquiring an effective medication or vaccine through compulsory licensing, despite the worldwide public health crisis.

Regarding national legislation, it is noted that the WTO members who are entitled to use the TRIPS Agreement flexibilities have more significant and stricter national regulations concerning patents. It is for this reason that states are not defining their national legislation in relation to the TRIPS flexibility for compulsory licensing. As a result, some of the nations discussed in this chapter have only recently begun to fully regulate national legislation in order to prepare for compulsory licensing in the event of a COVID-19 crisis situation.

In addition to the above-mentioned Agreement, it is important to keep in mind the production capacities of countries as well as their ability for timely distribution, which is in accordance with international law. Therefore, special agreements should be considered in order to gain insight into international legal relations that could potentially stimulate or have disincentive impact on the production and export of
vaccine drugs to distant countries (for example, the US-China Economic and Trade Agreement, European Patent Convention and the Patent Cooperation Treaty, Trilateral Cooperation (on patent) and IP5 Cooperation etc.) (USTR.gov, 2020; EPO, 2020).

**METHODOLOGICAL FRAMEWORK**

This chapter uses analysis and synthesis of literature based on previous experiences of selected countries in compulsory licensing application processes. We focused on countries that initiated compulsory licensing during the COVID-19 pandemic, whether they requested compulsory licensing in those countries or worked on National Legislation to meet the administrative and regulatory requirements for compulsory licensing proposals. Therefore, the following countries were selected: Canada, Chile, Ecuador, Hungary, Israel, Russia, and France, which indicated the need and desire to be included in the compulsory license process if circumstances so require, and thus reach COVID-19 pharmaceuticals during the public health crisis. Also, it turned out that the required drugs had, in some cases, similarities with antiretroviral therapy in HIV/AIDS, which is why we have presented in the following segment of the work a historical overview of these countries that have such a requirement through compulsory licensing to show the historical component. We presented the impact of pandemic factors reflected in the number of total patients during 2020, the number of total deaths from COVID-19 during 2020, and the number of vaccinated citizens for each of the countries during 2020 and 2021 (concluding with the 1st of June 2021). With this data, we shed additional light on the impact of the COVID-19 pandemic on the observed countries requesting compulsory licensing and thus determine whether and to what extent the COVID-19 pandemic pressure on population health played a significant role in the decision-making process for compulsory licensing opportunities.

*Graph 1. Theoretical framework of the variables impacting government decision on compulsory licensing (prepared by Author)*
In addition, the economic parameter of the pressure on real GDP is presented, as well as data related to GDP growth during 2019 and 2020 (i.e., a decrease in percentage points as a result of the global public health crisis). These are also parametric that can influence the decision to use compulsory licensing. It is important to note that previous experience in cooperation with the WTO and the use of their flexibility, especially compulsory licensing, is also observed. Of the selected countries, Ecuador, Russia and Chile had previous experience, while France, Hungary and Israel were not in the field of previous compulsory licensing requirements.

RETROSPECTIVE ANALYSES OF COUNTRIES’ EXPERIENCES WITH COMPULSORY LICENSING

According to our analysis, 108 applications have been filed for compulsory licensing (from 2000 until 2021) so far (Medicines Law & Policy, 2021). These requirements have been submitted for different reasons for different types of drugs, as well as for different therapeutic indications. The cases of Thailand and Brazil in compulsory licensing applications are well-known. Namely, in the case of Thailand, the state requested antiretroviral therapy for HIV/AIDS (efavirenz produced by Merck). To understand the importance of compulsory licensing not only in terms of the timely treatment of patients but also in terms of price, we can cite the example in which Merck offered for efavirenz a price per patient per year of therapy of USD 500, but the Thai government refused and requested a compulsory license from India for USD 224 per patient per year of treatment. A similar situation was with lopinavir/ritonavir, for which, through negotiations with Kaletra (Abbvie) as a patent holder, the Thai government received a price of USD 2,200 per patient per year of treatment, while through compulsory licensing in 2007, it received generic drugs at a cost of USD 676 per patient per year of treatment (price per patient year - PPPY) (Wong, 2020). Thus, compulsory licensing, in this case, helped with the drugs to treat a significant HIV/AIDS health crisis in Thailand, and their price is twice as high in the first case, while in the second case it is more than three times cheaper than the market price agreed with patent holders. Nobel laureate Joseph Stiglitz’s comments on this case are well-known when he states that patent protection is like protection of the right to knowledge but also as a death warrant for thousands of people in the poorest countries of the world (Stiglitz, 2007).

If we look at the total number of requests for flexibilities related to pharmaceuticals through the TRIPS Agreement, we can notice that the largest number of requests went through compulsory licensing and Article 31, and we had
a total of 108 requests (until 2021). We then had 47 requests that went through Part 7 of the TRIPS Agreement, while for Article 30 there were 3 and for Article 31bis one.

Graph 2. Number of requests per type of flexibility (data including 2020), prepared by the author based on data available at Medicines Law & Policy, (2021)

To understand the benefits of compulsory licensing, here are examples from the previous practice. As mentioned regarding Article 31, we have identified 108 applications for compulsory licensing. These requests were related to a variety of medical indications, so 72 requests were for HIV/AIDS; 2 for Anthrax; 2 for Avian Flu; 1 for Bacterial infection; 14 for Cancer; 1 for Cardiovascular disease; 1 for Cystic Fibrosis; 1 for H1N1; 5 for HCV; 1 for Kidney transplant; 1 for Leprosy; 1 for Migraine; 1 for Opioid overdose; 2 for Rheumatoid Arthritis; 1 for Spinal muscular atrophy and 1 for Diabetes II.
Graph 3 shows the number of compulsory licensing requirements in relation to the world’s regions. The largest number of requests originates from the region of Africa (73), followed by Latin America (27), the Asia-Pacific region (27), Europe (16), Central Asia (11), while the smallest number of requests came from the region of North America (5). According to this data, it can be concluded to a certain extent that the poorer regions of the world have submitted more requests for compulsory licensing, although the European region also has a considerable number.
Within Graph 4, which is a continuation of the previous Graph 3, we showed the countries most interested in compulsory licensing in the past. The highest-ranked is Ecuador with 11 requests, while Thailand has 8. Countries with 4 requests are Kenya, Zimbabwe, and India, while countries with 3 requests are Brazil, Cuba, Honduras, Ivory Coast, Congo, Gabon, Indonesia, Korea, the United Kingdom, and Italy. China has 2 requests for compulsory licensing.

**COMPULSORY LICENSING AND THE COVID-19 PANDEMIC**

It is evident that the TRIPS Agreement and compulsory licensing might have important benefits in terms of public health, and it would be important to use it as much as possible in the future, especially in cases when public health crisis situations are defined. It is also evident that the COVID-19 pandemic is a public health crisis *par excellence*. However, flexibilities in this situation for drugs/vaccines have been used minimally. Thus, during 2021, compulsory licensing was requested by Hungary, Russia, and Ecuador, and during 2020 it was requested by Israel for the COVID-19 pandemic. Hungary and Russia requested *remdesivir* for treating COVID-19 and Ecuador requested a generic drug as a replacement for *raltegravir* (for HIV/AIDS treatment). Interestingly, although the Hungarian government decided to use compulsory licensing for the drug for COVID-19, the drug was actually supplied by
Richter, where the Hungarian government has 5.25% of shares, and entered into negotiations with the company to produce the required drug on Hungarian soil.

Israel issued a compulsory license on March 24, 2020, to import generic versions of Abbvie’s lopinavir/ritonavir because Israeli authorities have established that an antiretroviral drug could have the potential to treat patients with COVID-19. In this case, the problem was not in the payment but in the insufficient amount that the company that owns the patent rights could deliver to Israel in a timely manner. Other countries, on the other hand, sought medications during the COVID-19 pandemic owing to the lack of funding rather than the patent holder’s incapacity to make and supply the drugs. However, the patent holder, Abbvie, denied such a request by Israel (Kass, 2020).

It is important to note that several other states, such as Canada, Ecuador, and Chile, have prepared legal ground for applying for compulsory licensing. In France, this topic was discussed in the Senate. The French created a kind of dualism in the philosophical approach to this topic and agitated for “Levée des brevets” (“removal of patents”), while the term “global public goods” was considered and criticized in addition to the influence of the United States to reject the EU request for vaccines to be considered a public good. In contrast, they were considered “affordable”, while prevention and immunization itself were considered a “public good”.

Canada has adopted national legislation due to the COVID-19 pandemic connected to compulsory licensing. The legislation, denominated as the COVID-19 Emergency Response Act, is connected to the national law on patents and allows procurement of medicines and equipment due to a public health crisis under COVID-19 (SWLAW, 2020); (Laws-louis, 2020). The Canadian government already had experience in applying for compulsory licensing because in 2001, due to terrorist attacks caused by Antrax, Canada asked the only manufacturer of Ciprofloxacin, the German company Bayer, for a compulsory licence. On that occasion, the Canadian government claimed that German Bayer did not have adequate capacity for the crisis and the production of sufficient quantities of this antibiotic, which elicited a strong response from Bayer, who believed that the Canadian government did not harmonize the Patent Act to apply for generic production (Spurgeon, 2001). However, in 2021, the Canadian pharmaceutical company Biolysse agreed to forward 15 million doses to Bolivia if the Canadian government granted compulsory licensing. However, Johnson & Johnson has denied such a request and disagrees with the generic production of this vaccine even though slightly more than 5% of the population in Bolivia has been vaccinated.

Chile is another country that has adopted national legislation in order to prepare for compliance with the requirements of the TRIPS Agreement regarding compulsory licenses during the Covid-19 pandemic. This decision of the
Government of Chile was made in accordance with the previous request of the WHO in order to collect all the necessary data on the necessary drugs and vaccines, including the costs of research and development, import, production, etc.

Ecuador has followed examples from around the world and has also been involved in the potential for compulsory licensing through the TRIPS Agreement and as a member of the World Trade Organization. The Ecuador National Assembly passed the 20th of March 2020 decision for a resolution by the Ecuador government and the Ministry of Health to seek compulsory licensing during COVID-19. This decision contributed to a declaration in which the President of Ecuador and the Ministry of Health resolved administrative issues related to obtaining compulsory licensing, while the Public Health Sector was responsible for obtaining compulsory licensing for non-commercial use or production and import of necessary drugs and vaccines (Education, Culture, Science and Technology Commission of the National Assembly of Ecuador, 2020).

THE IMPACT OF THE SELECTED PARAMETERS ON THE DECISION TO REQUEST/PREPARE FOR THE COMPULSORY LICENSING DURING THE COVID-19 PANDEMIC

When looking at economic parameters, it is important to note that the basic economic indicator, Gross Domestic Product, is negative globally for 2020 (as a percentage change on an annual basis). The situation is the same with the observed countries when analysing the amount of Gross Domestic Product as well as the percentage change on an annual basis (comparing 2019 with 2020; data for 2021 was not used at a quarterly level). Thus, for selected countries that needed to prepare for or apply for compulsory licensing during the COVID-19 pandemic, Gross Domestic Product change is negative and for Ecuador is -11% (the highest negative change), for France is -9.8% while for Canada and Chile is -7.1%. Russia with -4.1 and Israel with -5.9% are better-ranked when considering GDP percentage change in 2020 (Table 1).
In the following, we observed the impact of the COVID-19 pandemic on the population of the observed countries. As part of that analysis, we observed that Israel had the highest rate of the SARS-COV2 virus infection with approximately 49,000 infected per million inhabitants, while France had about 40,000 patients per million inhabitants (2019-2020). Chile and Hungary had just over 30,000 infected per million inhabitants, while Ecuador had the fewest of the selected countries during 2020, with about 12,000 infected per million inhabitants (Table 2).

Hungary had the highest number of deaths from the SARS-COV2 virus in the period 2019-2020, while France had 958 deaths per million inhabitants (among the highest in the world). From the selected countries, Israel and Russia had the smallest numbers, around 380 deaths per million inhabitants (Table 2).

### Table 1. Real GDP and percentage change for selected countries (Knoema, 2021)

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<tr>
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<tbody>
<tr>
<td>Canada</td>
<td>1,736</td>
<td>1,6</td>
<td>1.7</td>
<td>-7.1</td>
</tr>
<tr>
<td>Chile</td>
<td>282.3</td>
<td>245.4</td>
<td>1.1</td>
<td>-7.1</td>
</tr>
<tr>
<td>Ecuador</td>
<td>107.4</td>
<td>93.1</td>
<td>0.1</td>
<td>-11</td>
</tr>
<tr>
<td>Hungary</td>
<td>161</td>
<td>149</td>
<td>4.9</td>
<td>-6.1</td>
</tr>
<tr>
<td>Israel</td>
<td>394.7</td>
<td>383.4</td>
<td>3.4</td>
<td>-5.9</td>
</tr>
<tr>
<td>Russia</td>
<td>1,702</td>
<td>1,464</td>
<td>1.3</td>
<td>-4.1</td>
</tr>
<tr>
<td>France</td>
<td>2,715</td>
<td>2,551</td>
<td>1.5</td>
<td>-9.8</td>
</tr>
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</table>
Of the observed countries, Russia, Chile and Canada have previous experience with compulsory licensing. Namely, Russia has submitted a request for lenalidomide (medical indication for Leprosy, Tuberculosis, AIDS, and Multiple myeloma) and has only one previous request. Unlike Russia, Ecuador had more experience with compulsory licensing and had a total of 11 such claims (related to HIV/AIDS, Cancer, and Rheumatoid arthritis). Chile had one compulsory licensing request relating to HCV medicines.

From the analysis, it can be concluded that countries like France and Hungary that did not have previous experience with compulsory licensing were actively preparing to use this option precisely because of the severity of the negative impact brought to them by the COVID-19 pandemic in health and economic terms. Israel turned to compulsory licensing in 2020 (the earliest in relation to other countries), which showed a certain awareness and commitment to finding a solution to the problem that arose, and above all, it is reflected in a large number of infected patients during 2020. In addition to this thesis, the fact that Israel achieved the highest rate of vaccinated population in 2020, unlike other observed countries,

<table>
<thead>
<tr>
<th>Country</th>
<th>Covid-19 patients in 2020 (per million of population)</th>
<th>Covid-19 deaths in 2020 (per million of population)</th>
<th>Vaccinated population in 2020 (as % of total population) at least one dose received</th>
<th>Vaccinated population in 2021 until June (as % of total population) at least one dose received</th>
</tr>
</thead>
<tbody>
<tr>
<td>Canada</td>
<td>15,484.25</td>
<td>417.62</td>
<td>0.26%</td>
<td>58.31%</td>
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<tr>
<td>Chile</td>
<td>31,856.37</td>
<td>868.7</td>
<td>0</td>
<td>56.70%</td>
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<tr>
<td>Ecuador</td>
<td>12,045.08</td>
<td>795.44</td>
<td>0</td>
<td>9.20%</td>
</tr>
<tr>
<td>Hungary</td>
<td>33,385.33</td>
<td>987.23</td>
<td>0</td>
<td>53.90%</td>
</tr>
<tr>
<td>Israel</td>
<td>48,900.70</td>
<td>384.15</td>
<td>11.44%</td>
<td>63%</td>
</tr>
<tr>
<td>Russia</td>
<td>21,429.81</td>
<td>385.59</td>
<td>0.55%</td>
<td>11.45%</td>
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<tr>
<td>France</td>
<td>39,631.40</td>
<td>958.48</td>
<td>0</td>
<td>38.98%</td>
</tr>
</tbody>
</table>
speaks of determination to find a solution and agility. It is interesting that Russia, despite good control of the economic and health impact of the COVID-19 pandemic and the fact that it produced the vaccine in 2020, still has a relatively low percentage of the vaccinated population and, in the meantime, has applied for compulsory licensing for the potential treatment of the SARS-COV2 virus.

**CONCLUSION**

This paper has shown the importance and use of the flexibility provided by the TRIPS Agreement (compulsory licensing and Paragraph 6) both in earlier years and during the COVID-19 pandemic. The use of compulsory licensing, as well as other flexibilities during public health crises, is something that would be recommended for wider use and a larger number of requirements. Within the chapter, we also quoted Nobel laureate Joseph Stiglitz and his views on the situation with the HIV/AIDS epidemic in Thailand when they were not approved for generic production of drugs for this deadly disease. We believe that they should be repeated in the concluding remarks as a *vox populi*: “a death warrant for thousands of people in the poorest countries of the world”. In the case of the COVID-19 pandemic, a paradoxical situation has arisen which suggests a vague interpretation in which vaccines are not a public good but prevention and immunization are, while vaccines should be procured at an affordable cost to the United States of America and contrary to the consent of more than 100 member states of the WTO.

In this chapter, we analysed the total number of requests for flexibilities related to pharmaceuticals through the TRIPS Agreement, and we noticed that the largest number of requests was connected to compulsory licensing and Article 31. This could be explained by the type of requests made and by the requirements for obtaining such a request (both legal and operational).

In addition, we showed the number of compulsory licensing requirements in relation to the world’s regions. The largest number of requests originated from the region of Africa (73), followed by Latin America (27), and the smallest number of requests came from Europe (16) and North America (5). This shows the increasing interest of developed countries within the European and North American regions for the flexibilities, but compared to the “traditional high-profile users” (e.g. African countries), there is still a high difference noted. This could be explained by the type of health emergency (crisis) in developed countries and their healthcare system approach contradicting the same in underdeveloped countries.

Countries’ prior experience in flexibilities was shown during the COVID-19 pandemic, and out of selected countries compulsory licensing was requested by Hungary, Russia, and Ecuador, and in 2020 it was requested by Israel for the COVID-
19 pandemic. Of the observed countries, Russia, Chile and Canada have previous experience with compulsory licensing. As mentioned, countries like France and Hungary did not have previous experience with compulsory licensing but were actively preparing to use this option precisely because of the severity of the negative impact brought to them by the COVID-19 pandemic in both health and economic terms (e.g., Canada adopted national legislation due to the COVID-19 pandemic connected to compulsory licensing). The number of infected within the population was high, together with the economic impact (measured as a GDP percentage drop), which was considered to have a significant impact on the decision to request certain flexibilities or prepare for them through national legislation.

In the future, it would be beneficial that transfers of knowledge and patent rights encounter a higher degree of understanding, especially when it comes to global or national health crises. By analysing previous uses of compulsory licensing, as well as those related to the COVID-19 pandemic, we concluded that there was not enough interest by states in using these flexibilities, and various reasons might initiate the state’s desire to apply for compulsory licensing. As we have noticed, countries such as Hungary and France considered such flexibilities of the TRIPS Agreement for the first time during the COVID-19 pandemic, due to the great economic and health pressure that the pandemic brought during 2020. Other observed countries have previous experiences with compulsory licensing that have not always been positive but have found a potential source to address the nation’s health problems in times of this global health crisis.

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PUBLIC PROCUREMENTS DURING THE COVID-19 PANDEMIC TIME – LESSONS FOR THE REPUBLIC OF SERBIA

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Marina Matić Bošković²

Abstract: The COVID-19 pandemic has highlighted variations in the governments’ response to health crises and interventions across states, not only in the prevention of pandemics but also in their economies and public expenditure. As a result of the pandemic, the majority of states declared an emergency in accordance with the provisions of their constitutions to enable the introduction of restrictions needed for the prevention of virus spread. Having in mind the new circumstances that introduced limitations in all areas, the question of the implementation of initiated public procurements and the realization of new ones was raised. Some goods, such as medical materials necessary for the treatment of patients with coronavirus and the prevention of its spread, had to be obtained in an extremely short time. That was aggravated by the shortage of supplies, the impossibility of market research and the lack of planned funds in the budget. EU rules allow deviations from regular procedures in such urgent and unpredicted situations. However, a special challenge for all countries was the prevention of abuses, conflict of interest and other illegalities in public procurement during the emergency.

In the paper, the authors start from the assumption that it is necessary to increase control and transparency of public procurement in the Republic of Serbia, especially in emergency situations, bearing in mind the corruption risks and challenges raised by the European Commission’s progress reports. To prove the assumption and provide guidelines for improving regulations and practices, in the first part of the paper, the authors analysed the relevant European standards on public procurement and the measures taken by the EU member states to implement public procurement procedures quickly and efficiently in times of emergency, with the aim of identifying good practices. In the second part of the paper, the authors

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analyse the legislation of the Republic of Serbia and the approach taken during the pandemic against the EU member states’ comparative examples and practices. In addition, the authors propose recommendations for the improvement of transparency and competitiveness in public procurement in times of emergency. 

**Keywords:** public procurement, pandemic, COVID-19, deviations, transparency

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**INTRODUCTION**

The pandemic caused by the COVID-19 virus was officially declared on March 11, 2020, by the World Health Organisation (Time, 2021).

Given the unpredictability and danger of the disease, a significant number of countries have adopted emergency declarations to enable the adoption of measures for the prevention of virus spread. In the Republic of Serbia, the Decision on declaring the COVID-19 disease caused by the SARS-CoV-2 virus a contagious disease was first made on March 10, 2020 (*The Official Gazette of the Republic of Serbia*, No. 23/2020), followed by the Decision on declaring a state of emergency on March 15, 2020 (*The Official Gazette of the Republic of Serbia*, No. 29/2020). At the beginning of the pandemic, there was a need for the procurement of goods that was not foreseen in the financial plans of the organizations of obligatory social and health insurance, as well as in the budget. To enable urgent public procurement, funds from the current budget reserve were allocated to other appropriations or in the form of grants from the budget transferred to mandatory social and health insurance organizations. The adoption of such decisions enabled the use of funds for the procurement of medical equipment and other goods and services of importance for the protection of human life and health in a short period of time. However, in addition, it was necessary to ensure compliance with the principles of public procurement, which are established by both international standards and national legislation. Emergency public procurement also represents public spending, so it was necessary to respect the principle of transparency and publish reports on the conducted public procurements which show how the decision on the selection of bidders was made. A special problem was the implementation of public procurement that had already been initiated. The implementation of public procurement procedures has been hampered by increased demand for similar

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3 The possibility and manner of redirecting appropriations are prescribed by Article 61 of the Law on Budget System, *The Official Gazette of the Republic of Serbia*, No. 54/2009... 149/2020, the possibility and manner of using current budget reserve funds by Article 69, and the financing of mandatory social insurance organizations can be done through donations and transfers from the budget by Article 29 of the said Law.
products (medical equipment), disruption of production, export restrictions and prohibition, and limited access to relevant information.

Despite the need to conduct urgent public procurement procedures, it is necessary to control their legality and regularity, bearing in mind that public procurements in Serbia were identified prior to the COVID-19 pandemic as an area prone to corruption in the EU annual reports (2020 EU Report on Serbia, p. 28). However, Serbia was faced with allegations by civil society organizations that during the pandemic, there were irregularities in public procurement procedures.4

Integrity violations were intensified across the globe during the COVID-19 pandemic, especially in the form of contracts for protective equipment being awarded to dubious companies and price gouging of key medical and healthcare equipment (Steingrüber et al, 2020). The Supreme Audit Institution of Great Britain also pointed out irregularities in public procurement procedures during the COVID-19 pandemic in its 2020 report.5

The analysis started from the assumption that due to the short time limit and lack of adequate control during the public procurement procedure, there were many challenges, so the first part of the paper relates to the assessment of the European Union standards according to which it is possible to deviate from the regular public procurement procedure in emergency situations and specifically the European Commission’s Guidance on using the public procurement framework in the emergency situation related to the COVID-19 crises (Communication from the Commission, Guidance from the European Commission on using the public procurement framework in the emergency situation related to the COVID-19 crisis, 2020/C 108 I/01, April 1, 2020). In the second part, the measures established at the national level by several countries to enable the implementation of public procurement during emergencies were analysed with the aim of finding out if they were in line with the Guidance and the level of deviation from the public procurement principles. In the end, the measures that have been established in the

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4 The civil society organization Transparency Serbia called on state bodies and health institutions to publish relevant information on procurement during the state of emergency, including those to which the provisions of the Law on Public Procurement have not been applied. https://rs.n1info.com/biznis/a586090-transparentnost-obaviti-podatke-o-na-bavkama-respiratora-tokom-vanrednog-stanja/. See also: https://voice.org.rs/javne-nabavke-u-vanrednom-stanju-neobavezne-obavezne-informacije-sta-je-kupljeno-i-koliko-k osta/. Accessed 6 October 2021.

Republic of Serbia were assessed in comparison with the irregularities in the implementation of public procurement, which were pointed out by the Supreme Audit Institution of Great Britain (Kostić, 2019). In their documents, international organizations emphasize the importance of the role of audit in the prevention of corruption in urgent public procurement procedures (UNODC, 2020). Bearing in mind that the Supreme Audit Institution of Great Britain has already published its report on the audit of urgent public procurement procedures during the COVID-19 pandemic, as well as the fact that auditing in this country has a long tradition, we analysed the key findings of its Supreme Audit Institution in the context of Serbia’s needs. The publication of the UK report is an example of good practice. Based on comparative analysis, the authors proposed recommendations for improving the functioning of public procurement in emergency situations. If the control of public procurement could not be carried out during a state of emergency, it should be performed later. The implementation of control affects the increase in the responsibility of the procuring entity in public procurement procedures as well as the increase in transparency and legality of the procedures.

**EUROPEAN STANDARDS AND THE EUROPEAN COMMISSION GUIDANCE**

During the pandemic, the European Commission issued guidelines for the implementation of the public procurement framework in the emergency situation caused by the COVID-19 outbreak. The purpose of the Guidance was to establish a framework for the application of the more flexible provisions in public procurement procedures during the crisis period and to facilitate and speed up the implementation of the public procurement procedure. To protect lives against the new virus, it was necessary in the short term to procure personal protective equipment, such as face masks, protective gloves, and medical devices. The European Commission’s Guidance points to the possibility of using shorter deadlines to speed up open or restricted public procurement procedures. In addition, the European Commission emphasizes the possibility of using negotiation procedures without publication if the use of shorter deadlines is not sufficient for fast and efficient procurement of goods and services.

The European Commission’s Guidance is based on the provisions of Directive 2014/24/EU on public procurement (The Official Journal of the European Union, No. L 94/65) and refers only to cases of extreme urgency when it is necessary to purchase certain goods within a few days, or possibly hours. According to Article 32 of the Directive, it is possible to negotiate directly with potential contractors without the obligation to publish a tender, time limits, and fulfil other requirements regarding the procedure. These guidelines indicate the possibility of contacting...
potential contractors at all levels inside and outside the European Union by phone, e-mail or similar.

In addition to the above possibilities, according to the provisions of the Directive, it is possible to conduct a negotiated procedure without publishing a call for tenders for the faster award of contracts for the supply of goods necessary to combat the pandemic. In these situations, the deadlines for open and restricted procedures or competitive negotiated procedures cannot be met. The circumstances invoked by the contracting party to justify extreme urgency should be independent of the will of the contracting authority (Article 32 (2) (c) of the Directive).

Each contracting authority is obliged to assess whether the conditions for using such a negotiated procedure are met without prior publication and must explain its choice of procedure in an individual report (Article 84 (1) (f) of Directive 2014/24/EU). The reasoning in the report must confirm that the following criteria are cumulatively met: that the event requiring the application of the procedure was not caused by the will of the contracting parties in the particular case, and that there are special needs for funds necessary for hospitals or other health care institutions. In addition, it must be concluded from the explanation that there was an extreme urgency, which makes it impossible to act within the prescribed deadlines. It is also necessary to explain the existence of a connection between an unforeseen event and extreme urgency. Contracting authorities must also keep in mind that the procedure can be applied only to overcome the problem and find a more acceptable solution. Although the implementation of public procurement in extraordinary circumstances is temporary, in these situations, one should consider not only the transparency of the procedure but also other principles of public procurement.

The European Commission’s Guidance refers to the provisions of the Directive which regulate two situations: extreme urgency and emergency. The extreme urgency procedure requires stricter conditions, while an emergency requires shortening the deadlines that normally apply to the open procedure and the usually restricted procedure. Based on that, the deadlines are quite short. The state of extreme urgency further narrows competition in the market. The negotiated procedure without the publication of a call for applications is applicable in such situations and implies that no tender notice is published (Baratta, 2020, pp. 367 and 368). Procedural steps can be legitimately circumvented if there is an exceptional increase in the need for certain goods or services, a significant disruption in the supply chain and if public procurement procedures cannot be carried out due to technical or physical obstacles (Ibid, p. 373).

The Guidance recognised the emergency and the need to find alternative solutions to respond to the COVID-19 crisis. The European Commission, on the other hand, attempted to reconcile public procurement principles with the need
for rapid acquisition of all the necessary equipment. During an emergency, countries could award contracts without transparency but have an ex-post transparency requirement to publish a contract award notice 30 days after the conclusion of the contract. In addition, the contracting authorities have a duty to keep a detailed record of all decisions, justifications, and actions taken to support transparency and enable ex-post audits.

NATIONAL MEASURES FOR LEGAL AND EFFICIENT PUBLIC PROCUREMENT IN THE TIME OF EMERGENCY

Having in mind the need for public procurement in special circumstances, in this part, the authors analyse the compliance of measures taken by the following EU member states against the European Commission’s Guidance: the Republic of Austria, the Republic of Croatia, the Federal Republic of Germany and the Slovak Republic. Countries were selected based on their size (similar size to Serbia and bigger states), region (neighbouring countries) and EU membership (old and new member states). The comparative assessment will be used as the basis for tailor-made recommendations for Serbia with the aim of ensuring adequate response in possible future unforeseen situations, independent of the will of contracting authorities and bidders, which also need to deviate from regular public procurement procedures.

The Republic of Austria

The Austrian Parliament did not adopt the regulation that automatically suspends deadlines in public procurement procedures during the state of emergency caused by the coronavirus pandemic but left the decision to contracting authorities. Most contracting authorities suspended the deadlines on their own initiative. In addition, if the contracting authorities did not extend the deadlines, the bidders could request an extension of the deadline in the ongoing public procurement procedures (Cms Law-Now, 2020).

The Austrian Federal Public Procurement Act (the Public Procurement Act of the Republic of Austria from 2018, with the latest amendments from September 26, 2021 (Bundesrecht konsolidiert: Gesamte Rechtsvorschrift für Bundesvergabe gesetz 2018, Fassung vom 26.09.2021)) allows the use of the negotiated procedure without prior publication if this becomes necessary due to extreme urgency caused by events beyond the control of the contracting authority, which cannot be attributed to it and when deadlines for open, restricted or negotiated procedures are not met (sections 35-37 of the Federal Procurement act of 2018 (Bundesvergabege 2018)). Such a possibility was justified for use during a pandemic.
caused by the coronavirus and for the procurement of medical devices, protective equipment, and other goods and services necessary to protect the population from a pandemic.

According to the available information, special measures were taken during the implementation of public procurement procedures, and the use of electronic means was expanded. In addition to the direct award of contracts or the selection of a negotiated procedure without prior publication, the contracting authorities in Austria had the right to shorten the minimum time limits for submitting requests to participate or tenders in urgent cases. In the event that no appropriate tender or request to participate was submitted in an open or restricted procedure, the contracting authority could choose the negotiated procedure without prior publication, provided that the initial terms of the contract were not substantially amended (Cms Law-Now, 2020).

The application of such procedures is also indicated by the European Commission’s Guidance in accordance with EU standards. In addition, the Austrian Federal Procurement Act law allows for changes to existing contracts. Therefore, it was possible to apply its provisions if a change due to unforeseen circumstances or replacement of the contractor is needed. Modification of the contract is possible if the need for it arises from circumstances that the client could not foresee, and the change does not modify the nature of the contract. A change of contractor is possible, but only under specific conditions. Such cases are modification of clauses from the concluded contract, or complete or partial replacement of the original contractor after restructuring (e.g. merger, acquisition and insolvency), provided that it does not imply other significant changes to the contract, does not aim to circumvent the law and the contractor meets the criteria for quality selection set by the contracting authority (section 365 of the Public Procurement Act from 2018). According to the Rule of Law Report on Austria, prosecution services highlighted procurement of healthcare equipment and materials as a specific risk area. Stakeholders pointed to large amounts allowed to be spent under emergency procurement procedures, with limited transparency requirements (Rule of Law Report Country Chapter on the rule of law situation in Austria accompanying the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, 2021, Brussels, 20.7.2021 SWD (2021) 701 final, p. 12).

The Republic of Croatia

In Croatia, the Ministry of the Economy and Sustainable Development issued specific recommendations aiming at strengthening the public procurement system
in the context of the pandemic (Recommendation from the Ministry of the Economy, Entrepreneurship and crafts on the issue of prescribing and providing tender guarantees in the new situation caused by the coronavirus outbreak and Recommendation from the Ministry of the Economy, Entrepreneurship and crafts concerning the implementation of a public binding process in the new situation caused by the coronavirus outbreak). During the COVID-19 virus pandemic, a Decision was made to limit the use of funds provided in the state budget of the Republic of Croatia and the financial plans of extra-budgetary users of the state budget for 2020 (Narodne novine, No. 41/2020).

According to the Decision, as of April 3, 2020, budgetary and extra-budgetary users of the state budget were obliged to suspend all public bidding and were not allowed to launch new tenders unless it was necessary to perform their basic tasks and functions (Article 6 Decisions). According to its provisions, the users of public funds could continue the implementation of public procurement procedures and simple procurement procedures if it was necessary for the implementation of measures to help the economy due to the coronavirus epidemic. Also, if it is carried out to repair the damage caused by the earthquake, to obtain equipment needed to fight the coronavirus epidemic, and if there is a justified reason for it.

During the state of emergency, the delivery of guarantees was difficult due to restrictions on movement at the national and international levels. Therefore, it was recommended to the contracting authorities to seek a tender guarantee only if they estimate that the risks for which it is required are likely to be realized, having in mind the value, urgency and importance of the public procurement. It is recommended that if the contracting authority decides to request the delivery of the guarantee, reduce its amount in proportion to the maximum amount allowed by law (which is 3% of the estimated value of the public procurement), and if it would amount to e.g. 1% of the estimated value, the guarantee would not be a great burden for bidders (see Articles 214 and 215 of the Law on Public Procurement of the Republic of Croatia, Narodne novine, no 126/2016). In addition, the possibility prescribed by law could be used to pay a cash deposit as a guarantee instead of a bank guarantee. According to the recommendation, proof of payment could be a confirmation of payment via internet banking. Having in mind the epidemiological measures, the recommendation was that the opening of bids is done without the presence of authorized representatives of the bidders or other interested parties. If the authorized representatives expressed a desire to participate in the opening of the bid, the procuring entity was obliged to ensure their participation in accordance with the Government’s decision on public gatherings (Decision on necessary epidemiological measures restricting gatherings and introducing other necessary epidemiological measures and recommendations to prevent the
transmission of the COVID-19 disease through gatherings, *Narodne novine*, no. 95/2021)\(^6\), and if that was not feasible to allow them to participate via video conference if there was a technical possibility. According to the available data, the complaints were delivered by courier and via an electronic communication system (Cms Law-Now, 2020a). In 2020, 66% of public procurements were under appeal procedure before the State Commission for Supervision of Public Procurement Procedure. According to the Annual Report of the State Commission for the Control of Public Procurement Procedures for 2020, the most common reasons for filing complaints were errors in assessing qualitative criteria for selection of bidders, shortcomings in proving compliance with technical specifications, completion of bids contrary to legal restrictions, unclear and contradictory documentation and approval of certain bidders by prescribing technical specifications (Annual Report of the State Commission for the Control of Public Procurement Procedures for 2020, pp. 45-57). According to the report of the European Commission on the Rule of Law for the Republic of Croatia, and according to the Draft of the Anti-Corruption Strategy for the period 2021-2030, the area of public procurement has been identified as high risk. The draft states that the legislative framework regarding the supervision and transparency of public procurement procedures needs to be improved (The Rule of Law Report, Country Chapter on the rule of law situation in Croatia, accompanying the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee, and the Committee of the Regions, Brussels, 20.7.2021 SWD (2021) 713 final, p. 51).

Considering the reasons for complaints considered by the State Commission for Supervision of Public Procurement in 2020, it can be concluded that public procurement procedures in the Republic of Croatia were not fully compliant with the principles of transparency and equal competition, which are incorporated in the European Commission Guidance and EU public procurement standards and had to be applied even during the pandemic.

**The Federal Republic of Germany**

During the COVID-19 pandemic in Germany, various measures were also adopted in order to combat the pandemic and improve the response of the public administration. Public procurement procedures were not suspended automatically, and the parliament did not pass a law or regulation suspending deadlines in public procurement procedures. If the procuring entity did not extend the deadline, the

\(^6\) The mentioned decision was changed several times after the first publication, in accordance with the epidemiological situation.
bidders could request an extension of the deadline. During the pandemic, the
deadline was allowed due to the current situation because the bidders could not
collect all the necessary documentation due to external reasons or restrictions
imposed by law (Cms Law-Now, 2020b).

During the pandemic, the Federal Ministry of Economy and Energy issued a
Decree on the application of the law in public procurement procedures related to
the procurement of goods and services related to the prevention of the spread of
the SARS-CoV-2 virus corona of March 19, 2020, which entered into force
immediately. The Decree provided guidance for interpreting whether simplified
procedures and expedited procedures were allowed during the pandemic. The
condition for the application of that procedure is an unforeseen event and
extremely urgent and convincing reasons for its application. It was considered that
during the pandemic, conditions were fulfilled when it was necessary to procure
goods or services intended for the suppression and resolution of the COVID-19
pandemic in the short term or for the maintenance and insurance of public
administration. The emergency procurement procedure could be used to procure
medicines, disinfectants, disposable gloves, masks, protective equipment, swabs,
clothes, medical equipment (ventilator), services necessary during the pandemic,
internet technology, video conferencing, etc. (SIGMA, Application of public
procurement rules during the COVID-19 crisis from the perspective of the European
Union’s Procurement Directives and the Government Procurement Agreement,
April 2020, p. 10). Contracting authorities are recommended to document the
fulfilment of the conditions necessary for the application of the simplified public
procurement procedure.

In addition to taking special measures, the use of electronic means during the
procurement procedure has been expanded. In Germany, it was possible for
contracting authorities to extend the deadlines for the submission of tenders to
allow tenderers more time to prepare and submit tender documents or extend or
postpone the deadlines for the performance of the obligation. In addition, only one
company was allowed to submit a bid under the negotiated procedure without a
call for tenders if that company would be able to fulfil the contract according to
technical and time constraints due to the urgency of the procurement. Therefore,
negotiations or digital presentations within the negotiation process had to be held
via video conference. In that way, the realization of the principles of equal treatment,
non-discrimination and transparency was enabled (Cms Law-Now, 2020b).

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According to Article 132 (2) of the Anti-Restriction of Competition Act, amendments to existing contracts are possible in terms of extension or extension of contracts. According to that article, it is possible to extend the existing contracts with the consent of the contracting parties, as well as increase the value without conducting a new contract award procedure during the pandemic, for the delivery of medical aids or other means necessary to combat the COVID-19 virus pandemic. According to the mentioned article, the value of the original contract can be increased by 50% of its value (Anti-competition law (Gesetz gegen Wettbewerbsbeschränkungen)). However, in practice, problems were identified in the application of the principles of public procurement. According to the Rule of Law report on Germany, the Financial Intelligence Unite has received an increased number of reports in the context of COVID-19 support measures offered by the Government, including reports on corruption and mostly on fraud. In addition, the alleged reception of kickbacks for parliamentarians who have brokered face mask deals for the Government has led to public debate and the launch of corruption investigations. To enhance the prevention of corruption, including during and after the COVID-19 pandemic, Germany will launch its electronic competition register in support of public procurement processes in 2021 (The Rule of Law Report, Country Chapter on the rule of law situation in Germany, accompanying the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee, and the Committee of the Regions, Brussels, 20.7.2021 SWD (2021) 706 final, p. 11).

The Slovak Republic

In Slovakia, Law No. 62/2020 on certain emergency measures related to the expansion of COVID-19 was adopted on March 25, 2020. Among other provisions, the law introduced amendments to the Law No. 343/2015 on Public Procurement (The Law on Certain Extraordinary Measures in Relation to the Expansion of COVID-19 (Zákon o niektorých mimoriadnych opatreniach v súvislosti so šírením nebezpečnej nákazlivej ľudskej choroby COVID-19 a v justícii a ktorým sa menia a doplňujú niektoré zákony). These amendments allow contracting authorities to conclude a contract, framework agreement or concession with tenderers who are not registered in the Register of Public Sector Partners or whose subcontractors are not registered in that register, provided that a directly negotiated procedure without notice can be used and that such contracts conclude solely for the protection of life and health during a state of emergency or emergency. Such conditions relating to procedures for direct negotiation without notice may be omitted in the case of small-value contracts. The pandemic was recognized as an emergency situation, so the procedure of direct negotiations could be used. The Slovak Public Procurement
Administration emphasized that even then, public funds must be spent in accordance with the principles of efficiency and transparency. Ongoing procurement procedures were not terminated automatically, and legal deadlines were also not suspended automatically. According to the available data, the contracting parties generally postponed or suspended the deadlines on their own initiative. If the contracting authority did not extend the deadlines, bidders could request an extension of the deadline (especially in situations where it was not possible to collect all documentation for reasons beyond the bidder’s control or due to legal restrictions. Simplified procedures were allowed). Accelerated deadlines were allowed due to the urgency of open, restricted or competitive negotiated procedures, while urgency had to be justified by the competent authorities in accordance with the European Commission Guide and EU Directive 2014/24. To ensure equal treatment, competition, and transparency, it was recommended to open bids through video conferencing. If in the public procurement procedure, no appropriate bids were submitted or no suitable bids were offered, the contracting authority had to cancel it. Due to the pandemic, it was recommended that existing contracts, framework agreements or concessions could be amended without initiating a new tender procedure (Cms Law-Now, 2020c). The condition for amendments was that the necessity to change the contract arose from the circumstances that the contracting authority could not foresee even with due diligence and if that change does not affect the nature of the existing contract, framework contract or concession. Legal restrictions were applied to the modification of existing contracts and during the pandemic and additional value should not exceed 50% of the value of the original contract (section 18. The Slovak Public Procurement Act, no. 343/2015 Coll).

According to the 2021 EU Rule of Law Report, high-risk sectors that were prone to corruption before the pandemic were also prone to it during the pandemic, including the public procurement sector and the health sector. As part of the sectoral anti-corruption program in the Ministry of Health, a special working group has been established to assess the risk of corruption in the context of the COVID-19 virus pandemic. To shorten the time required for the procurement of goods, services, and construction works during the pandemic, the Government has prepared a draft Law on Amendments to the Law on Public Procurement (The Rule of Law Report, Country Chapter on the rule of law situation in Slovakia, accompanying the Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions, Brussels, 20.7.2021 SWD(2021) 727 final, p. 15). All this speaks of the additional need to harmonize public procurement in the Slovak Republic, both in terms of legislation and practice, with the acquis communautaire.
IMPLEMENTATION OF PUBLIC PROCUREMENT PROCEDURES IN THE REPUBLIC OF SERBIA DURING THE STATE OF EMERGENCY

According to Article 36, paragraph 1 of the Law on Public Procurement of the Republic of Serbia, it was possible to deviate from the open public procurement procedure. In accordance with its provisions, the contracting authority could conduct a “negotiation procedure” if due to extreme urgency caused by extraordinary circumstances or unforeseen events whose occurrence did not depend on the will of the contracting authorities, would not be able to conduct the tender. In such situations, it was necessary for the Public Procurement Administration to give its opinion on the justification. The client could initiate the procedure without waiting and had to contact the Administration to obtain such an opinion. During the state of emergency, no deviation from the provisions of the Law on Public Procurement was allowed. According to the provisions of the said Law, in these situations, it is necessary to respect the principle of competition, take care that the agreed price is not higher than the market and check the quality of delivery. There was still an obligation for procurers to publish information on the initiated and final public procurement procedures on the Public Procurement Portal.

In addition, contracting authorities could refer to the provisions of Article 131, in conjunction with Article 7, paragraph 1, item 3) of the Law on Public Procurement. That article prescribed the possibility for contracting authorities to obtain funds without applying the prescribed procedures if the need for such goods or services is conditioned by natural disasters, the consequences of which endanger the life or health of people or the environment. The virus pandemic was such a circumstance. Given that the needs for goods and services could not be foreseen at the time of drafting the budget and financial plans, it was necessary in emergencies to use the option provided by the Law on Budget System, which prescribes the transfer of money from one budget appropriation to another, budget reserve, and then to a certain appropriation for the purpose of conducting public procurement in extraordinary circumstances.

On April 7, 2020, the Public Procurement Administration issued the Instruction for conducting the public procurement procedure during a state of emergency. This

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8 This refers to the Law on Public Procurement, Official Gazette of RS, No. 124/2012, 14/2015 and 68/2015, which was valid until the entry into force of the new Law on Public Procurement, Official Gazette of RS, No. 91/2019.

9 After the entry into force of the new Law on Public Procurement from 2019, the Official Gazette of RS, no. 91/2019, its name was changed. It is now called the Public Procurement Office.
The instruction recommends not initiating public procurement procedures if the conditions for that are not met, and the possibility that the other party will not perform the contract is taken into account. The recommendation of the management was that the contracting authorities continue with the implementation of the initiated public procurement procedures, but that they could use the possibility prescribed by Article 109, paragraph 2 of the Law on Public Procurement and suspend the initiated procedure. It is necessary that there are objective reasons that can be proven, which could not have been foreseen at the time of initiating the procedure, and which make it impossible to complete the initiated proceedings. In the instructions, the management pointed out the possibility of continuing the procedure of public procurement when the conditions for their implementation are met (The instructions of the Public Procurement Administration and the notice of the Public Procurement Administration dated March 24, 2020).

HOW TO ENSURE INTEGRITY OF PUBLIC PROCUREMENT DURING THE STATE OF EMERGENCY

Public procurement is an activity where there is a high risk of corruption. Due to the need for the urgent procurement of medical equipment during the COVID-19 pandemic and the possibility of circumventing regular procedures, it was necessary to pay special attention to reducing corrupt activities in these procedures. Therefore, even in such situations, there was a requirement to respect the principle of transparency in public procurement as well as a requirement for responsible public spending. In many countries, public procurement legislation includes exceptions that allow governments to respond rapidly to emergencies in ways that may be inconsistent with the rules that apply in normal times. This might take the form of direct contracting for supplies from producers without going through the processes that normally would be used (Baxter and Casady, 2020).

The approach of Germany highlighted the relevance of strengthening the e-procurement system as an anti-corruption measure and action to increase transparency. In addition, the World Bank recognized e-procurement as a tool that facilitated the continuation of procurements during the pandemic (World Bank, 2021, “Opportunities and Challenges for Public Procurement in the First Months of the COVID-19 Pandemic: Results from an Experts Survey” EFI Insight-Governance. Washington, DC: World Bank). Countries with an existing e-procurement system were able to adjust their public procurement functions more promptly.

Emergency procurement is often conducted with expedited modalities, such as direct contracting, that have less ex-ante oversight and reduced ex-ante
transparency. This choice is motivated by the necessity of a prompt response to the emergency, but it also implies that ex-post reviews and public scrutiny are imperative. If we take into account the importance of ex-ante control of public procurement, especially when ex-ante transparency is restricted, the role of the Supreme Audit Institutions is crucial and Serbian authorities should consider options for their greater involvement (Matić, 2013). Given the possibility of corruption and irregularities in public procurement procedures conducted during a state of emergency, it is necessary that audit procedures are conducted in a timely and comprehensive manner. A good example is a report prepared by the Supreme Audit Institution of Great Britain on the audit of the public procurement system during the pandemic on July 31, 2020. According to the report, there was no adequate documentation regarding the award of the contract without prior publication of a call in some cases. In the majority of cases, there was a lack of explanation of how a particular supplier was selected and how the risks of corruption due to lack of competition were mitigated, especially the conflict of interest. The awarding of contracts retroactively after the start of certain works was also an issue. In addition to the aforementioned report, during August 2020, the Cabinet of Ministers asked the Government’s Internal Audit Agency to audit six contracts for the procurement of personal protective equipment, which had attracted media attention in the previous period. The audit procedure also revealed irregularities, which are reflected in the fact that public procurement contracts did not exist at the time of their implementation. Some contracts were awarded without prior market analysis to individual suppliers. Although the need to act in accordance with the principle of transparency in public procurement procedures is emphasized, a large number of contracts were not published in a timely manner. Based on the findings, the Supreme Audit Institution of the United Kingdom proposed additional guidelines

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10 As can be seen, internal audit also has a significant role in the process of prevention and detection of irregularities in public procurement procedures. However, in the Republic of Control, the system of internal financial control has not been adequately established. About that in: Šuput, J. (2013). „Internal financial control in the public sector [Interna finansijska kontrola u javnom sektoru], in: Rabrenović, A. and Ćeranić, J. (eds.) Usklađivanje prava Republike Srbije sa pravnim tekovinama Evropske unije: prioriteti, problemi, perspektive, Belgrade, Institute of Comparative Law, p. 260.

11 According to the Instruction of the Crown Commercial Council, it is recommended that contracting authorities publish all information on the award of public procurement contracts within 90 days of award day. However, according to the findings of the Supreme Audit Institution, by the end of July 2020, a total of 55% of contracting authorities did not publish detailed information within the specified deadline, and 25% published such information within the deadline.
on the implementation of urgent public procurement procedures with the aim to improve transparency and reasoning behind decisions. One of the recommendations is that procurements conducted by direct procurement from suppliers be documented with proof of the absence of conflicts of interest and unequal treatment in the public procurement procedure (Investigation into Government procurement during the COVID-19 pandemic, Report by the Comptroller and Auditor General, National Audit Office, 29 November 2020).

Having in mind the available information, it seems that the citizens of the Republic of Serbia have been deprived of information on the procurement of medical equipment and means for the fight against the pandemic caused by the COVID-19 outbreak. This approach violated the principle of transparency (Alarm Report on the Situation in the Field of Public Procurement in Serbia, p. 9). To overcome transparency challenges, civil society addressed the competent institutions to get an answer and inform the public about the public procurement procedure. However, the institutions remained silent.\(^\text{12}\) To increase trust, it is important to subsequently conduct the procedure of auditing public procurement procedures during the state of emergency by the Supreme Audit Institution of the Republic of Serbia. Its role is of special importance for strengthening transparency and accountability in public spending (Kostić & Matić, 2022, p. 57).

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The Slovak Public Procurement Act, no. 343/2015 Coll.


INDIVIDUAL STATES’ RESPONSE TO COVID-19
PROTECTION OF FUNDAMENTAL HUMAN RIGHTS DURING THE COVID-19 PANDEMIC: THE CASE OF LATVIA

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Abstract: The article offers an analysis of the constitutional regulation of the state of emergency, which was declared twice in Latvia in 2020 to limit the spread of COVID-19. Those decisions have influenced all people. The work of all constitutional institutions has also been affected.

To achieve the goal of limiting the spread of COVID-19, as well as ensuring the continuity of important state functions and services, both during and after the emergency, significant restrictions were imposed. The article describes the system of limitations, which is included in several normative acts, as well as in general administrative acts.

Not the entire society in Latvia treated the imposed restrictions unequivocally. To defend violated fundamental rights, people could use legal remedies and turn to administrative courts and the Constitutional Court. The article provides an analysis of case law based on the actual application of the law. In accordance with the competence of each court, administrative courts reviewed the limitations imposed by general administrative acts, whereas the Constitutional Court reviewed the constitutionality of general legal norms.

Keywords: fundamental rights, limitations, protection, Constitutional Court, parliament, general administrative act.

In 2020, the world encountered an unprecedented crisis in this century. The scope of the impact that COVID-19 left upon states, societies, and people is unparalleled. Although Latvian society had experienced various crises (e.g., the banking crisis and the economic crisis), this challenge, which essentially affected all members of society, occurred for the first time in this century.

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To curb the spread of the COVID-19 virus, in the period from March 2020 until mid-2021, a state of emergency was declared twice in Latvia. During this period, society and individuals encountered various limitations which impacted their lives and were included in various regulatory enactments. Although the limits imposed were not well-received, in a state ruled by the rule of law, everyone is required to obey the law, even if they disagree with it. At the same time, persons did not lose their legitimate right to protect their violated fundamental human rights in court. Persons applied to the courts of the Latvian court system (courts of general jurisdiction and administrative courts) and also to the Constitutional Court by submitting constitutional complaints challenging those limitations. It means that remedies have been applied and continue to be applied. Besides, taking into consideration the competence of the Constitutional Court, it had to rule on and evaluate very important constitutional law issues, like, for example, the remote work of the Saeima (the Latvian parliament) during the COVID-19 crisis. It is also important that the Constitutional Court and other constitutional institutions did not stop working during the emergency.

A crisis is a test not only for state institutions but also for each inhabitant of a state. A crisis reveals society’s understanding of what the common good is and of each individual’s role in society. A crisis is also a good “teacher”. Encountering difficulties has allowed testing of the ability of the highest public officials to lead the state in this situation and to adopt well-considered decisions, as well as testing how effectively the constitutional institutions function. Likewise, during the crisis, the understanding of each member of the society of their responsibility for their state and compatriots found the most direct expression.

RESPONSE TO THE COVID-19 PANDEMIC: EMERGENCY AND WORK OF CONSTITUTIONAL INSTITUTIONS IN LATVIA

As noted by sociologist Ulrich Beck, contemporary economic, ecological and other risks create a “global community of threats” (Hanrieder, Kreuder-Sonnen, pp. 335-336). This means that to prevent and limit all those risks, international or even worldwide cooperation is of paramount importance. This COVID-19 crisis also revealed the importance of international cooperation as a dialogue. Nevertheless, the first responsibility rests with the nation-states, which must act to protect the state and society. If necessary, the states can achieve those aims by declaring a state of emergency.

The Constitution of the Republic of Latvia, or the Satversme (The Constitution of the Republic of Latvia of 15 February 1922, hereinafter referred to as the Satversme), includes special legal regulations on proclaiming the state of exception.
The state of exception is a legal regime (Article 62 of the Satversme), which must be proclaimed if the state is threatened by an external enemy, or if an internal insurrection that endangers the existing political system arises or threatens to arise in the state or any part of the state. The Satversme does not regulate another untypical or unusual situation that actually occurred in Latvia and other countries of the world at the beginning of 2020 (Balodis, 2021). Another legal regime – an emergency situation – regulated by the law adopted by the Saeima, “On Emergency Situation and State of Exception”, which (Section 4) explains that an emergency situation (in the entire state, a part of the state or a part of its administrative territory) may be declared in the case of a threat to the state, which is related to a disaster, danger thereof, or threats to the critical infrastructure, if the safety of the state, society, the environment, economic activity, and the health and lives of human beings are significantly endangered. This specific regime must be declared by the Cabinet. It means that in Latvia, the so-called “executive model” of emergency is applied (Dyzenhaus, 2012, p. 442). In accordance with Article 59 of the Satversme, in Latvia, as in a parliamentary republic, the government is accountable to the Saeima (Judgement of the Constitutional Court in case No. 03-05(99)). Therefore, in accordance with Section 10 of the law “On Emergency Situation and State of Exception”, the parliament retains control over the proclamation of an emergency situation. Although the decision on the emergency is adopted by the Cabinet, it must immediately inform the Saeima about it. The Saeima has been granted the right to verify the validity and legality of the adopted decision.

Responding to the Communication by the World Health Organisation of 11 March 2020 that the number of COVID-19 cases had reached the scope of a pandemic, on 12 March 2020, the Cabinet proclaimed an emergency situation in the entire territory of Latvia to establish epidemiological safety and other measures aimed at curbing the spread of COVID-19 (Cabinet Order of 12 March 2020 No. 103). The emergency situation in Latvia in the first round was in force until 9 June 2020 (Cabinet Order of 7 May 2020 No. 254). The second round of the emergency situation was declared from 9 November 2020 until 6 December 2020 (Cabinet Order of 6 November 2020 No. 655). Later, the state of emergency was prolonged until 6 April 2021.

Following the proclamation of the emergency situation, being aware of the current situation, on 23 March 2020, the first joint meeting in Latvia’s history of several constitutional institutions — the President, the Speaker of the Saeima, the Prime Minister, the President of the Constitutional Court and the Chief Justice of the Supreme Court — defined the basic principles of work for the constitutional institutions in an emergency situation (President Notification No. 8). It was recognised that all state constitutional bodies, all state authorities, institutions, and public officials had to implement their competences and perform their duties so as to fulfil their functions.
and tasks as much as possible within the scope of this common purpose of the state (President Notification No. 8, para. 2). All constitutional institutions agreed that, where required, the form of activity of state constitutional bodies, authorities, institutions, and public officials had to be adapted to the circumstances caused by the emergency situation, if necessary, including a remote working regime. This notification served as a signal to the whole society that the national constitutional bodies, all public institutions, and officials coordinated their activities during the emergency, continuing to fulfil their functions and doing so as effectively as possible.

The parliament also had to find a solution for the continuity of the Saeima’s work during the pandemic (Rodiņa, Liņa-Egnere, 2020, p. 7). At the end of May 2020, the newly created e-Saeima platform was launched. The internet platform “e-Saeima” is a technological solution appropriate for the Saeima’s work in the 21st century, providing the possibility to hold totally remote sittings of the Saeima while its members are outside the parliament’s premises (Liņa-Egnere, 2020, pp. 5-6). Taking into account Article 15 of the Satversme, which states: “The Saeima shall hold its sitting in Riga, and only in extraordinary circumstances may it convene elsewhere”, a debate about the constitutionality of the Saeima’s remote work evolved. It is important to understand that when the Satversme was drafted (1920-1922), the words “convene elsewhere” could be understood only as a physical convening of the deputies in another place. This discussion was actually ended by the judgement of the Constitutional Court, which evaluated the compliance of the e-Saeima platform with the Constitution, stating that “[h]olding of a remote Saeima sitting is an extraordinary measure enabling the continued work of the parliament also under circumstances where deputies cannot meet in person due to epidemiological safety and restrictions imposed in this regard. It is crucial to create a mechanism in the state to allow the continuation of the parliament’s activities and decide on important issues by the legitimate constitutional body.” (Judgement of the Constitutional Court in case No. 2020-37-0106, para. 4.2.24).

Thus, notwithstanding the emergency, all constitutional institutions, including the parliament and the courts, continued to work, ensuring the functioning and fulfilment of duties. Clearly, the work of constitutional institutions was impacted. However, the main aim – the functioning of the state – was achieved.

**LIMITATION OF FUNDAMENTAL HUMAN RIGHTS DURING THE CRISES: THE NORMATIVE REGULATION**

To achieve the aim of curbing the spread of COVID-19 and limiting the repeated spread of the COVID-19 infection, as well as to ensure the continuity of important state functions and services, both during the emergency situation and after it,
significant limitations were introduced, which affected all inhabitants and entrepreneurs of Latvia. One can agree that, during an emergency, the state constitutes an exceptional type of government as it is under the pressure of time and urgency (Hanrieder, Kreuder-Sonnen, 2014, pp. 335-336). To limit the spread of the disease, all decisions had to be made quickly. Clearly, the legislative process differs during a state of emergency. During an emergency, all decisions are made utilizing the urgent legislative procedure. However, at the same time, emergency measures should be proportional, fixed-term, and should not be used for purposes other than those for which they were imposed (Cormacain, 2020, p. 251).

In Latvia, in accordance with Section 8 of the law “On Emergency Situation and State of Exception”, during an emergency situation, it is the Cabinet, first and foremost, who has the right to establish various personal limitations. Upon declaring the emergency situation on 12 March 2020 and, later, on 6 November 2020, the orders by which the emergency situation was declared included, for example, restrictions on assembly. Furthermore, freedom of movement and trade were limited for a certain period, studies in schools and higher education institutions were held remotely, and the receiving of services, cultural and sports events were restricted. Thus, similarly to other countries, in Latvia, the executive power had the greatest impact and also the possibility of deciding on measures to contain the pandemic (Griglio, 2020, p. 50). At the same time, the Latvian legislator retained the function of control over the executive power because all orders, including those on extending the emergency situation, were also decided on in the parliament, ensuring that the rule of law and democracy were safeguarded. It is the parliament that is called upon to ensure that the government continues upholding human rights and that emergency measures remain necessary and proportionate to the threat faced (Griglio, 2020, pp. 52-53).

In the spring of 2020 (during the first emergency situation), it was found that the authorisation granted to the Cabinet by the law “On Emergency Situation and State of Exception” and the Epidemiological Safety Law was not sufficient to create normative regulation on the functioning of institutions and persons’ obligations and rights relating to curbing the spread of COVID-19. Hence, the issue had to be resolved on how to authorise the Cabinet to establish other limitations beyond the delegation granted before. The Saeima, in the urgent procedure, adopted the law “On the Operation of State Authorities During the Emergency Situation Related to the Spread of COVID-19” to resolve various issues relating to the functioning of institutions, the judicial system, penal policy, etc. Alongside it, on 22 March 2020, the law “On Measures for the Prevention and Suppression of Threat to the State and Its Consequences Due to the Spread of COVID-19” entered into force, which established not only restrictions but also special support mechanisms directly related to curbing the spread of COVID-19.
It is important to mention that on 15 March 2020, Latvia submitted to the Secretary-General of the Council of Europe a declaration on derogating from ensuring some aspects of some of the rights and freedoms guaranteed in the European Convention for the Protection of Human Rights and Fundamental Freedoms, for instance, inviolability of private life, freedoms of assembly and movement for the period when the emergency situation was proclaimed in Latvia. On 16 March 2020, Latvia also submitted a similar declaration to the Secretary-General of the UN (Līce, Vītola, 2020). The submission of these declarations was not only a mechanism for fostering transparency with respect to restrictions established to protect public health, but also confirmed the extraordinary nature of that situation and proved that Latvia complied with the principles repeatedly emphasised in the case law of the European Court of Human Rights (Līce, Vītola, 2020).

After the first wave of COVID-19 and when the emergency situation ended (on 9 June 2020), the Saeima adopted two special laws: the Law on the Management of the Spread of the COVID-19 Infection and the Law on the Suppression of Consequences of the Spread of the COVID-19 Infection. The Law on the Management of the Spread of the COVID-19 Infection, *inter alia*, defined three substantial principles that had to be complied with in defining and regulating society’s life. Firstly, the principle of minimising restrictions on human rights: the rights of persons are restricted only in cases where there are no other alternative measures that protect public health and safety effectively. Secondly, precautionary measures are determined by evaluating the threat of the COVID-19 infection spreading in Latvia and foreign countries, and are implemented by evaluating all existing risks to minimise the threat of the repeated spread of COVID-19. Thirdly, limiting the accessibility of public services relevant to society is only acceptable to the extent necessary to ensure public health and safety, and also the health and safety of the persons involved in the provision and receipt of services.

In accordance with Article 64 of the Satversme, in Latvia, the right to legislate is vested in two legislators – the Saeima and the people, in the scope defined by the Satversme. However, to ensure the effective exercise of state power, a derogation from the requirement that the legislator should entirely resolve all issues itself is admissible. The Saeima may authorise the Cabinet or another state institution, properly legitimised, to draft the technical norms needed for the implementation of regulations or laws (Judgement of the Constitutional Court in case No. 2019-10-0103, para 25.3.1.; Judgement of the Constitutional Court in case No. 2020-34-03, para. 11). Pursuant to Para 1 of Section 31 (1) of the Cabinet Structure Law, the Cabinet may issue external legal acts – regulations – only if the law has especially authorised the Cabinet for this purpose (Judgement of the Constitutional Court in case No. 2005-03-0306, para 10). Based on the authorisation from the Saeima, several restrictions were
included in the Cabinet Regulation of 9 June 2020 No. 360 “Epidemiological Safety Measures for the Containment of the Spread of the COVOD-19 Infection”, which defined, for example, distancing measures, the obligation to use a face mask, as well as the procedure for receiving services, trade, using public transportation, etc.

Since 6 April 2021, the emergency situation is no longer in force in Latvia. This means that all orders of the Cabinet by which the emergency situation was established and restrictions were introduced are no longer valid. Understanding that the situation relating to curbing the spread of COVID-19 is far from ideal, the Saeima has (Law on the Management of the Spread of the COVID-19 Infection) reinforced the delegation to the Cabinet to set special requirements for trade and other services, restrictions or prohibition of sports events, etc. However, such restrictions may be introduced if the threats to public safety related to the spread of the COVID-19 infection cannot be effectively eliminated by applying the legal measures established in the general legal order. The law also defines the obligation to revoke all restrictions if the objective necessity for maintaining the measures restricting persons has ceased.

Clearly, to protect the common public good, i.e., public health, the state has the right to establish restrictions on fundamental human rights to achieve this purpose. However, even in such conditions, the state must comply with the norms of the Satversme, respecting the rules for limiting human rights and the basic values of a state governed by the rule of law. Such restrictions cannot be set arbitrarily either. Those who adopt such regulations are primarily responsible for respecting human rights and principles, which are characteristics of a state governed by the rule of law.

THE CONSTITUTIONAL COURT AS A LEGAL REMEDY: LESSONS TO BE LEARNED

It is no secret that the COVID-19 infection cannot be contained by repressive methods alone or by establishing various restrictions. Public health and safety have depended and still depend on the attitude taken by each member of society during this period. It is with good reason that the Preamble to the Satversme includes the duty of each individual to take care of “oneself, one’s relatives and the common good of society by acting responsibly toward other people, future generations, […]”, the fulfilment of which was tested during this period (The Constitution of the Republic of Latvia of 15 February 1922).

Similarly to the situation in other countries, not all members of Latvian society treated the established restrictions unambiguously. The mass media and social networks also played a certain role, expressing the opinions of some groups and persons that, for example, the use of face masks was not necessary, etc. Likewise, the opinion that the restrictions were incompatible with the Satversme was expressed.
The polarization of public opinion put on the agenda the issue of whether an individual was obliged to comply with legal norms, even if he or she personally did not uphold them. In accordance with the principle of the rule of law, all persons have the duty to respect legal norms and the law. A person must comply with valid legal acts even if the person “dislikes” these acts. It has been recognised in the Latvian case law that “[f]or the purpose of legal security, a person must also comply with such laws that he or she considers being unjust. While a legal norm is in force, it must be respected or objected against in the procedure established in law” (Judgement of the Supreme Court case No. SKA-5, para. 15). In other words, a person had to follow the legal norms or use legal remedies by contesting the legal norms that he or she held as being incompatible with the Satversme since, in this situation also, all executive action is subject to control (Dyzenhaus, 2011).

Emergency powers always imply limits on individual human rights. An emergency can also cause the risk of undermining the state’s constitutional order, as well as the role of the judiciary in such a situation (Khakée, 2009, p. 5). Therefore, in such conditions, the instruments of legal protection and the use thereof are of special significance.

In Latvia, like in several other countries, the exclusive function – to safeguard the constitution (Judgement of the Constitutional Court in case No. 2009-11-01, para. 5) or to ensure the existence of a legal system that complies with the Satversme, as well as to provide its opinion regarding constitutionally important issues (Judgement of the Constitutional Court in case No. 2008-35-01, para. 11.2) – is in the hands of the Constitutional Court of the Republic of Latvia (hereinafter – the Constitutional Court). If fundamental constitutional rights are violated by the state, then the Constitutional Court can also serve as a legal remedy. An individual in Latvia (a natural and also a legal person of private law) can submit to the Constitutional Court a special petition – a constitutional complaint – in accordance with the Constitutional Court Law (Section 19²). However, by submitting a constitutional complaint, a person can challenge only normative regulation (a norm which is included in a normative act) if the constitutional fundamental rights included in the Satversme are infringed upon by this general legal norm.² In Latvia,

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² The Constitutional Court Law (Article 17, para 1) provides that a person can submit a constitutional complaint to challenge the compliance of laws or international agreements signed or entered into by Latvia with the Constitution (also until the confirmation of the relevant agreement in the Saeima), compliance of other laws and regulations or parts thereof with the norms (acts) of a higher legal force, as well as compliance of Latvian national legal norms with those international agreements entered into by Latvia that do not conflict with the Constitution.
a person cannot challenge to the Constitutional Court an individual act – a court judgement or an administrative act. Besides, persons are bound by the special locus standi rules. First, there should be an infringement on fundamental rights. Secondly, a person may use the Constitutional Court as the last national legal remedy. Thirdly, a constitutional complaint must be submitted within a set term – within 6 months from the infringement or the moment when the decision of the last legal remedy becomes effective.

Also, in Latvia, the Constitutional Court plays a key role in the protection of fundamental human rights (Comella, 2009, p. 29). From the date when the first emergency situation was declared until 5 May 2021, the Constitutional Court received 30 applications (from natural and legal persons) regarding COVID-19-related restrictions. The Constitutional Court has basically refused to initiate legal proceedings based on these constitutional complaints, mainly for two reasons.

As noted above, on the basis of constitutional complaints submitted by persons, the Constitutional Court reviews only the compliance of the restrictions included in normative acts. As explained above, several restrictions on fundamental human rights were defined exactly in the Cabinet’s Orders by which the emergency situation was established in Latvia. Several persons contested the restrictions included in these Orders before the Constitutional Court, advancing a theoretically substantial question, i.e., what kind of legal act an order was – an external regulatory enactment, in the meaning of the Constitutional Court Law or other legal act. The Constitutional Court’s assignment sitting, deciding on the Constitutional Court’s competence regarding an issue of such importance, provided an answer to this question. The explanation was that the Cabinet’s Order was neither an external nor an internal normative act. Considering the content of this Order and its applicability to persons, the Constitutional Court concluded that the Order had to be considered not as an external regulatory enactment but as a general administrative act in the meaning of the second sentence of Section 1 (3) of the Administrative Procedure Law – an act which embodies a normative act or a legal norm in specific circumstances (Judgement of the Constitutional Court in case No. 2018-07-05, para 15.2). A similar conclusion had been made in Latvian legal science previously (Briede, 2021). This finding has also been consolidated in the case law of administrative courts (Decision of the Supreme Court Senate in Case No. SKA-1215/2020). In view of the fact that the legal review of general administrative acts is conducted by administrative courts, it was concluded that these courts, rather than the Constitutional Court, had to conduct the review of the restrictions included in the Cabinet’s Order (Decision of the Assignment Meeting on 9 December 2020). Hence, all constitutional complaints that contested restrictions which had been included in the Cabinet’s Orders (both the first and the second time) on declaring the state of emergency were recognised
as being outside the Constitutional Court’s jurisdiction (Decision of the 1st Panel of the Constitutional Court on 9 December 2020).

In view of this separation between the competence of the Constitutional Court and the courts belonging to the court system, administrative courts have received several applications. However, it should be underscored that a person has the right to contest and appeal against an order at the administrative court only in the part that thereof contains the general administrative act and only if the person belongs to the circle of persons to whom the obligation or the restriction established by the general administrative act applies (Decision of the Supreme Court in case No. SKA-1215/2020). For example, “The Association of Beauticians and Cosmetologists of Latvia” turned to the administrative court with the request to suspend Para 5.2. of the Cabinet’s Order of 6 November 2020 No. 655, by which the provision of beauty treatment services by persons registered in the Register of Medical Practitioners was prohibited. The administrative district court, having examined the legality of this restriction, recognised it as being proportional and, thus, dismissed the claim regarding revoking this restriction (Judgement of the District Administrative Court in case No. A42-01409-21/23). Also, one of the major retailers in Latvia, SIA “DEPO DIY”, submitted an application to a court (at the moment when this article was written, it has not been reviewed yet) regarding the part of the Cabinet’s Order of 6 November 2020 No.655, which prohibited the on-site sale of construction and household goods.

Secondly, as noted above, if a person wants to submit a constitutional complaint to the Constitutional Court, several requirements must be met: the infringement must be proven, subsidiarity and terms must be complied with, and the application must contain legal arguments. In several cases, the persons had not met these requirements in contesting the restrictions established in external regulatory enactments. Therefore, the Constitutional Court’s panels decided to refuse initiation of a case, although the submitted applications pertained to important issues, for example, the right to receive the so-called idle time benefit (Decision of the 1st Panel of the Constitutional Court on 11 May 2020; Decision of the 2nd Panel of the Constitutional Court on 11 June 2020), the prohibition of organising a picket (Decision of the 4th Panel of the Constitutional Court on 1 July 2020), the obligation to use a mouth and nose cover (Decision of the 2nd Panel of the Constitutional Court on 17 November 2020).

At the time this article was completed, the Constitutional Court had reviewed only one case in which the COVID-19-related restrictions were examined. The Court has provided its assessment of the restrictions established in Section 8 and Section 9 of the law “On Measures for the Prevention and Suppression of Threat to the State and its Consequences Due to the Spread of COVID-19” to organise gambling
and lotteries both in physical locations where gambling is organised and in the interactive environment. In practice, after these norms entered into force, in view of the authorisation included in Section 9 of the contested law, the Lotteries and Gambling Supervisory Inspection suspended, for the term of validity of the law, all licences to operate gambling both in physical locations and in the interactive environment. Hence, entrepreneurs, several legal persons, submitted an application to the Constitutional Court contesting the prohibition of organising both on-site and interactive gambling. The legal norms were challenged by four legal persons before the Constitutional Court.

The Constitutional Court, examining the compliance of this restriction with the safeguard for the right to property, which was included in the Satversme (the first, second and third sentences of Article 105 of the Satversme$^3$), concluded that the established restriction – the prohibition of organising on-site gambling – had been necessary for society because such action decreased the risk of persons contracting COVID-19 and subjecting others to this risk. With respect to the prohibition of interactive gambling, it was concluded that the legislator had not assessed whether a more lenient measure (set of measures) existed that would restrict a person’s fundamental rights, included in the Satversme, to a lesser extent, thus achieving the legitimate aims of the same quality. Therefore, the requirement to suspend licences for interactive gambling was recognised as being incompatible with the proportionality principle.

Based on this Constitutional Court’s judgement, one provider of such services, a legal person, turned to the administrative district court to request recognition as being unlawful of the decision by the respective Inspection on suspending the licences for organising gambling in the part regarding interactive gambling. By the judgement of 28 March 2021 in case A420180220, the administrative district court satisfied the request of this legal person, also making considerations regarding the possibility of the applicant to claim compensation in the case (Judgement of the District Administrative Court in case No. A42-00372-21/15).

Another case has been initiated before the Constitutional Court regarding the prohibition of a person from entering Latvia from abroad if a COVID-19 test has not been done abroad (Decision of the 1st Panel of the Constitutional Court on 24 March 2021). The Constitutional Court (in the second half of 2021) will have to review the compliance of this restriction with the second sentence of Article 98 of

$^3$ These norms state: “105. Everyone has the right to own property. Property shall not be used contrary to the interests of the public. Property rights may be restricted only in accordance with the law.”
the *Satversme*, which provides that everyone who has a Latvian passport is protected by the state when abroad and has the right to freely return to Latvia.

Thus, taking into consideration the competence of courts, persons can defend their rights that have been infringed upon by turning either to the Constitutional Court or the administrative court. Given the length of proceedings, there is a risk that the legal proceedings will not be terminated yet, but the restrictions will be lifted. However, the fact that a legal norm is not valid *per se* is not grounds for refusing to initiate a case or terminating the legal proceedings that have been initiated before the Constitutional Court. This means that the Constitutional Court may also provide its assessment in cases where the legal norm is non-existent in the legal space. Such an assessment could be important both for resolving the so-called future disputes and for a person defending their fundamental human rights that have been infringed upon.

**CONCLUSION**

By fulfilling their functions, the constitutional institutions realize public power. The courts of the court system and the Constitutional Court in Latvia are two different constitutional institutions, which realize state power (Judgment of the Constitutional Court in case No. 2006-05-01, para. 10.4). Although each court fulfils its own functions, they all share one aim – to ensure the rule of law. This premise was confirmed by the applications that persons submitted both to the Constitutional Court and to the administrative court to contest, to their mind, disproportionate restrictions established during the period of the so-called COVID crisis.

The courts play an important role during the period of an emergency situation. One can subscribe to the opinion that during an emergency situation, courts fulfil at least three functions: they resolve disputes, control the executive power, and clarify the likely imperfect emergency policies (Petrov, 2020, p. 80). Taking into consideration judgements of the courts in Latvia, emergency normative regulations can be evaluated, and, if necessary, changes should be made.

All restrictions on fundamental human rights established during the COVID crisis have a fixed term and a special purpose – to protect public safety. It is a maxim that public safety is the supreme law itself (Carr, 1940, p. 1309).

Restrictions, which are usually established in haste, cannot be ideal and errorless. The practice shows that errors were made in Latvia as well. Therefore, courts have a significant role in eliminating these deficiencies and, more importantly, in making conclusions regarding the necessary improvements and updates in the regulation of this situation.
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IMPACTS OF COVID-19 MEASURES ON WOMEN’S AND GIRLS’ HUMAN RIGHTS IN TURKEY

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Abstract: The Presidency of Turkey has introduced measures to slow the spread of COVID-19 starting from March 2020. Even though the COVID-19 disease does not make distinctions in terms of whom to infect, surveys in Turkey demonstrate that the personal, social and economic effects of the measures against the pandemic have affected men and women differently, which is contributing to the deepening of pre-existing gender inequalities. The measures to combat the pandemic also affect different groups of women differently.

This study aims to assess the disproportionate adverse impact of COVID-19 measures on women’s and girls’ human rights. Herein, I draw from multiple surveys and reports to show that COVID-19 raised profound challenges with respect to women’s and girls’ human rights such as the right to life, well-being, equality; the right to equal access to education, essential services, justice, health services; freedom and the right to paid work; the right to equal, decent, healthy and safe working conditions; the right to the reconciliation of family and working life; the right to social insurance; and freedom of movement. As a result, it can be concluded that COVID-19 measures have placed progress towards gender equality in jeopardy for years to come.

Keywords: COVID-19, Turkey, women’s human rights, children’s rights, violence, multiple discrimination

INTRODUCTION

International and Turkish human rights law recognise that in the context of serious public health threats and public emergencies which threaten the life of the

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nation, restrictions on some rights can be justified when they have a legal basis, are strictly necessary, based on scientific evidence and are neither arbitrary nor discriminatory in the application, of limited duration, respectful of human dignity, subject to review, and proportionate to achieve the objective (Siracusa Principles on the Limitation and Derogation Provisions in the International Covenant on Civil and Political Rights, 1984). Government strategies should address disproportionate impacts on specific populations or marginalised groups. Otherwise, restrictions can lead to negative outcomes, perpetuate inequity, and result in discrimination against women, children, older people, people with disabilities, minority groups, LGBTI people, migrants, and the poor, among others.

Turkey’s Presidency has introduced measures to slow the spread of COVID-19 starting from March 2020. Even though the COVID-19 disease does not make distinctions in terms of whom to infect, the personal, social and economic effects of the measures against the pandemic do not apply equally to everyone. The surveys in Turkey demonstrate that while both women and men have been significantly negatively impacted by the crisis, they have not been affected in the same way or equally, which is contributing to the deepening of pre-existing gender inequalities. The crises also have adverse consequences for different groups of women, such as girls, younger and older, refugees, migrants, the poor, disabled, minority women, women in detention, women workers who are in the essential sectors, women in the informal sector, and unemployed women. Women were already in a disadvantaged position and faced challenges at home and work prior to COVID-19. COVID-19 has exacerbated these effects. Even some of the well-intended decisions, as a result of the lack of a gender-sensitive perspective, inadvertently have adverse consequences on women’s human rights, which are under the protection of the UN, ILO, COE instruments (Bakirici, 2011, 2019), the Constitution of Turkey and the Turkish laws.

**IMPACT ON THE RIGHT TO EQUAL ACCESS TO EDUCATION**

The Turkish Presidency has temporarily closed nurseries and educational institutions to reduce the spread of COVID-19. Many schools have moved online with distance learning. However, students who have no access to the internet are left behind.

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2 Turkey hosts around 3.6 million Syrians and around 400,000 refugees and asylum-seekers of other nationalities (Akar & Erdogdu, 2019).
Although school closures have affected all learners, a study implemented by
the UN Women Turkey shows the increased engagement of daughters in housework
reported by the majority of women (approximately 72 per cent) and of sons by
about half (among those who answered) (UN Women, 2020). Therefore, girls are
more prone to miss out on even distance learning.

While the fallout from schooling disruption may be limited for most girls, this
may not be true for those in poor households and areas most intensively hit by
COVID-19. Even when classes restart, some parents may no longer be able to afford
to send their children to school3, and some teenage girls who are out of school may
never return.

An analysis released by UNICEF Turkey warns that school closures, economic
stress, service disruptions, pregnancy, and parental deaths due to the pandemic
are putting the most vulnerable girls at increased risk of child marriage. Pandemic-
related travel restrictions and physical distancing make it difficult for girls to access
the health care, social services and community support that protect them from
child marriage, unwanted pregnancy and gender-based violence. Job losses and
increased economic insecurity may force families to marry their daughters to ease
financial burdens (UNICEF, 2021). A report by ECPAT, a network of organisations that
strives to end the sexual exploitation of children, indicates that child marriage might

**IMPACT ON THE RIGHT TO LIFE, WELL-BEING AND GENDER EQUALITY**

The Presidency of Turkey imposed temporary curfews, such as at weekends,
and the public was called on to stay in as much as possible.

Gender-based violence and all forms of violence against children have increased
exponentially during COVID-19.

According to the UN Women Europe and Central Asia study, in Istanbul alone,
violence against women has increased by 38 per cent since the beginning of
pandemic response measures in March 2020 (UN Women Europe and Central Asia,
2020).

A report by an NGO called Socio-Political Field Research Centre shows that when
asked “Have you been subjected to any violence (psychological, economic, digital,
physical, sexual, emotional violence, swearing, intimidation, threats, humiliation,

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3 In Turkey, there are approximately 720 thousand or more working children. The rate of
those who cannot continue their education is 34.3 per cent (TUIK, 2020).
forced seizure of their income) in the household during quarantine?”, 43 per cent of women answered “yes” (SPSM, 2020).

According to a report released by the main opposition party, 246 women were killed by men in the first ten months of 2020, and the deaths of 151 women were found “suspicious” (T24, 2020).

Another report released back in December 2020 by the Interior Ministry indicates that the perpetrators of the violence against women are mostly husbands, and the victims are mostly homemakers (Anilan, 2020).

The situation of persons with disabilities is particularly grave. According to the Report by the Socio-Political Field Research Centre, during the pandemic, violence against women with disabilities increased by 18.7 per cent. 34 per cent of women with disabilities are subjected to violence by their spouses, 16 per cent by their fathers, 13 per cent by their mothers, and 11 per cent by their children (SPSM, 2020).

The COVID-19 crisis has highlighted the precarious situation of legal and undocumented migrants, asylum seekers and refugees. The 3RP report released by the UNHCR Turkey indicates that 38 per cent of the refugee households report an increased level of stress and 13 per cent report an increased level of conflict within the household, which requires immediate protection. There are concerns that most refugee women would avoid reporting such incidents to the police because they fear deportation or increased domestic violence (UNHCR, 2020).

Although states of emergency should not function as a cover for repressive action and should not be used simply to quash human rights, we have seen the withdrawal from the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence (Istanbul Convention)4 on 20 March 2021 by a Presidential Decision (No. 3718) without any parliamentary debate. The withdrawal process was completed on 1 July 2021. According to the Constitution of Turkey, withdrawing from an international treaty is a matter of legislative jurisdiction (Articles 7, 90, 104). Therefore, claims against the lawfulness of the withdrawal decision have been lodged before the Conseil d’Etat by the opposition parties, bar associations and NGOs advocating women’s rights (Yazicioglu, 2021; COE, 2021). A final decision about the annulment of the Presidential Decision has not been made yet, but the Conseil d’Etat rejected to make an interim decision to halt the execution of the Presidential Decision on June 28, 2021.

4 Turkey was the first country to sign (on 11 May 2011) and ratify (on 14 March 2012) the Istanbul Convention.
The withdrawal prompted widespread protests from women’s groups and an uproar on social media criticising that it signals a huge setback for women’s rights in a country with high rates of gender-based violence and femicides (Toksabay & Kucukgoçmen, 2021).

As a result of the increase in reported assaults against women and femicide over the past year, members of the Turkish Parliament approved the establishment of a parliamentary commission to “investigate the reasons behind violence against women and to specify the measures that need to be taken” on 9 May 2021 (TBMM Meclis Haber, 2021). However, three opposition parties pulled out of the Commission in June 2021 to protest against the withdrawal from the Convention (Sozcu, 2021).

 IMPACT ON THE RIGHT TO EQUAL ACCESS TO ESSENTIAL SERVICES AND JUSTICE

Due to the social distancing and confinement measures and their impact on social support and the justice system, women and children not only face a higher risk of violence during home confinement, but also have less access to social support structures such as emergency hotlines, shelters, essential housing, legal aid, police, and justice services.

According to the study implemented by the UN Women Turkey, the majority of women and men know where to seek help and support in the case of domestic violence, but one quarter (24.5 per cent of women and 25.1 per cent of men) is still not aware of how to access help. The results also reveal that region, age, and education level are influential on women’s access to knowledge about support mechanisms. (UN Women, 2020).

On the other hand, women with disabilities are more exposed to multiple discriminations and violations of rights during the COVID-19 pandemic compared to normal periods and other segments of society due to their disability and femininity. According to research carried out by the Turkish Federation of the Blind, 62.7 per cent of women with disabilities could not access the support lines established by public institutions. While 27.3 per cent of women with disabilities think that they have been subjected to violations of rights, 80.8 per cent of them could not use remedial mechanisms. 71.6 per cent of women with disabilities who attempted to use remedial mechanisms stated that these mechanisms are not accessible (TFB, 2020).

 IMPACT ON THE RIGHT TO EQUAL ACCESS TO HEALTH SERVICES

Since the start of the COVID-19 outbreak in Turkey, the Ministry of Health has taken various steps to provide health care for all residents, including refugees and
regular or irregular migrants. However, several challenges arise when providing health care, including language barriers in accessing reliable information and access to health services, the lack of documentation, fear of deportation and stigmatisation, socioeconomic challenges, etc. (Mardin, 2017; Ozvaris et al., 2020).

While it is critical that people have access to health services and accurate information on preventing the pandemic, nearly half of the women with disabilities (45.3 per cent) could not access sufficient information about COVID-19 hospitals and health services. 70.1 per cent of women with disabilities who think that they are infected with a virus could not apply to any healthcare provider. While 43.9 per cent of women with disabilities needed psychological support during the pandemic period, 93 per cent of them could not get psychological support (TFB, 2020).

Although the impact of COVID-19 on sexual and reproductive health and rights is not yet known, according to research conducted by the UNFPA Turkey and Hacettepe University Women’s Studies Centre, 26 per cent of the female health personnel participating in the research stated that sexual and reproductive health services have been interrupted during this process. The most disrupted services are listed as infertility, prenatal and postnatal care and induced abortion (UNFPA & HUKSAM, 2020).

**IMPACT ON FREEDOM AND THE RIGHT TO PAID WORK AND GENDER EQUALITY IN EMPLOYMENT**

The Presidency of Turkey took some measures to protect women and workers in general. For example, paid leave was provided for civil servants aged 60 years and older, pregnant civil servants and civil servants with chronic illnesses. However, no such order exists for the private sector. Public institutions were ordered to provide alternating and flexible schedules and enforce remote working if possible. But the private sector was advised to follow this practice for jobs that did not require employees to be at the workplace (Bakirci, 2019, 2020). Therefore, many workers in the private sector and essential sectors had to continue to travel to work and attend the workplace.

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5 In August 2020, the Directorate General of Migration of Turkey and UNHCR launched an information campaign country-wide available in Arabic, Farsi, Turkish, and English to provide messages regarding prevention and response to sexual and gender-based violence (UNHCR, September 2020). It is particularly important for Syrian women, as only 20 per cent of Syrian women can speak Turkish.
Most women employees in Turkey work in the informal sector where there is no job security and no safety net if a crisis such as COVID-19 destroys their earnings. Informal work includes many occupations most likely to be harmed by a quarantine, social distancing, and economic slowdowns, such as travel, retail, food, accommodation, seasonal agriculture, and domestic work. Women are also over-represented in service industries that have been among the hardest hit by the response to COVID-19. In Turkey, 56 per cent of health personnel are women, meaning women are at the front lines of containing the spread of COVID-19 and may be heavily exposed to the virus through work in the health sector.

Several surveys implemented in Turkey show that women’s participation in the labour market and their share among business owners was lower than men’s before COVID-19. The crisis has exacerbated these inequalities. The surveys reveal considerable negative economic consequences for both women and men, in terms of reduced hours of paid work, loss of jobs, and financial worries. However, while the paid hours reduction affected men more, women lost their jobs to a higher extent (UN Women, 2020; Biamag, 2020; TEPAV, 2020).

According to a survey, conducted by the Confederation of Progressive Trade Unions of Turkey for the April 2020 period, the women’s unemployment rate in Turkey is 16.3 per cent. This rate is 31.6 per cent for women with disabilities (DISK, 2020).

The COVID-19 crisis has further highlighted the precarious situation of domestic employees. A survey implemented by the Domestic Employees Union shows that 56.8 per cent of the participants said that they were laid off during the pandemic. 5.2 per cent of the domestic employees were put on unpaid leave. All in all, 91.6 per cent of the women said that they suffered an income loss in this period. 84.4 per cent said that they could not benefit from any state aid in the coronavirus period, and when they did, it was mostly temporary aid (Evid-Sen, 2020).

In the face of potentially massive lay-offs due to the effects of the pandemic, Turkey decided to implement employment protection measures. Among these measures were a ban on dismissals as well as a facilitated procedure for companies to keep their employees on unpaid leave. A new provisional article 10, which was added to the Employment Act No. 4857, prohibits the termination of employment contracts except for termination for immoral, dishonourable, or malicious conduct or other similar behaviour (Bakirci, 2019) which constitutes dismissal Code 29 in Turkey’s Social Security system. However, this exemption was misused by some employers to dodge the ban on layoffs. More than 200.000 employees were dismissed by April 2021 (Hurriyet Daily News, 2021).

This is a brutal type of dismissal because an employee dismissed based on Code 29 is not entitled to severance pay, notice pay and unemployment benefits.
Moreover, it becomes more difficult for this person to find a new job. For women employees, this cruelty is doubled. Women employees explain that the threat of dismissal has increased in their workplaces during the pandemic with this code, which covers behaviour from unexcused absenteeism to sexual crimes. Women who were fired under Code 29 explain that they were subjected to inquiries by their families about “what they got up to in their workplace”, that this sometimes turns into violence; they experience serious difficulties when they are looking for a job, that they are constantly having to try and prove that they did not commit any immoral or dishonourable acts (Karaca, 2020).

In order to prevent this misuse and to protect employees, Turkey’s Social Security Institution (SSI) made certain changes in relation to termination notifications of employment contracts on April 8, 2021. New codes have been defined by the SSI for immoral, dishonourable or malicious conduct or other similar behaviour in order to prevent confusion and to reveal the exact reason for the termination of the employment contract. In furtherance of the latest update, employers will have to notify SSI on how the employee acted in an immoral, dishonourable or malicious way or other similar behaviour causing the termination of the employment contract by entering the appropriate dismissal code into SSI’s official online system. In this way, different termination reasons such as unexcused absenteeism and theft are made with different notification codes and possible problems are avoided.

**IMPACT ON THE RIGHT TO EQUAL, DECENT, HEALTHY AND SAFE WORKING CONDITIONS**

The crisis has highlighted the worsening working conditions and vulnerabilities of many essential workers. Some of the effects on the working conditions include an increase in health and safety risks, violence, discrimination, long hours of work, and reduced wages.

The research by the UNFPA Turkey and HUKSAM reveals that 48 per cent of the female health personnel participating in the study has been working in COVID-19 units and 28 per cent of them has been diagnosed with COVID-19. While 4 out of every 10 (38 per cent) stated that they work for an average of 41 hours or more

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per week, it has been found that most of those who work with such an intense schedule work in COVID-19 units (UNFPA & HUKSAM, 2020).

While 18 per cent of women with disabilities stated that they had to work on weekends and evenings as a result of the remote working practice, 15 per cent stated that their workload increased, and 15 per cent stated that the time they allocated to themselves decreased. Those who state that their salary is deducted is 10 per cent, and those who have extended their working time are 9 per cent. 44 per cent of the women with disabilities stated that the practice of working remotely causes them to have problems in socialising (TFB, 2020).

According to a report by the ILO Turkey Office and the Turkish Statistical Institute, the gender wage gap in Turkey is 15.6 per cent. The COVID-19 pandemic will increase the wage gap because sectors, such as services, retail sales and tourism, where women are predominantly employed, are the hardest hit (ILO & TSI, 2019).

Although there are not enough surveys on the working conditions of seasonal agricultural employees, a Turkey-based NGO that works with seasonal farmers criticised the lack of precautionary measures. Employees have reportedly complained about the lack of personal protective equipment, as well as crowded transportation to the fields despite the risk of spreading COVID-19 to others (Duvar English, 2020).

An increase in mobbing, harassment and discrimination has been reported amid the ongoing pandemic by the women employees who attended the workplace. Employees in a Turkish food packager were locked into dormitories due to COVID-19. In another factory, the factory management removed the bus service to force employees to work 12 hours a day, locked the gates of the factory so that employees would not leave early, and forced employees to work on Sundays and public holidays. The employees were not paid for overtime. Even women employees who had just given birth and were still breastfeeding were forced to work (Karaca, 2020).

The survey implemented by the Domestic Employees Union shows that 77 per cent of domestic employees was subjected to all forms of violence (namely, physical, psychological, economic and sexual) at home and work (Evid-Sen, 2020).

The problem of violence against health personnel in Turkey has remained persistent, with personnel frequently being exposed to violence and workplace assault amid the ongoing pandemic, a new report by the Union of Healthcare and Social Service Workers has revealed (Saglik-Sen, 2021).

Given the vital role that work plays in our lives, it is crucial to understand how rising levels of unemployment and inactivity have impacted mental well-being.
The research by the UNFPA Turkey and HUKSAM shows that almost all female health professionals (94 per cent) feel anxious about the COVID-19 pandemic (UNFPA & HUKSAM, 2020).

According to the study implemented by the UN Women Turkey, more women have experienced negative effects of COVID-19 on their mental/emotional health. 54 per cent of women and 49 per cent of men stated that they experienced problems such as stress and anxiety as a result of the outbreak (UN Women, 2020).

**IMPACT ON THE RIGHT TO SUBSTANTIVE EQUALITY AND RECONCILIATION OF FAMILY AND WORKING LIFE**

Day care centres and all other educational facilities were closed on March 16, 2020, in Turkey, and online education started in March 23. At the same time, the two most common non-parental arrangements for childcare – home care provided by grandparents and by paid caregivers – have become undesirable or impossible due to health concerns and curfews for individuals over 65 years of age. Women caring for one or several persons with disabilities were particularly affected by the COVID-19 crisis.

Surveys show that self-isolation measures overburden women with unpaid housework and care work as more family members spend time at home. While men also had to step in, data shows that housework and caring responsibilities more often fall on women and gendered division of household labour continues. (KESK, 2021; Ilkkaracan & Memis, 2021; Bakirci, 2020; UN Women, 2020).

According to the study implemented by the UN Women Turkey, the ratio of the increased workload of women is the highest in the categories of “cleaning and maintaining own dwelling and surroundings” and “cooking and serving meals”, where 77.6 per cent and 59.9 per cent of the surveyed women stated an increase, respectively, in these household chores, compared to 47 per cent and 23.9 per cent of the surveyed men (UN Women, 2020).

39.1 per cent of the disabled women stated that their domestic workload increased during the pandemic period (TFB, 2020).

Therefore, women are caught between a domestic burden/private life and working life. Working women either reduced their hours of work or left the labour force entirely as a result of the increased housework and care responsibilities.

The study by the UN Women Turkey indicates that more women have started to work from home (UN Women, 2020).

Women took more leave of absence from work compared to men. Since the start of COVID-19, one-third of women and one-quarter of men took leave from work.
their work (paid, partially paid or unpaid). Importantly, for half of the women who went on leave, the leave was unpaid (15.7 per cent), exceeding the share of men (11.2 per cent). This has implications on women’s earnings and economic status within the family. Even though participants were not asked about the reasons for going on leave, it can be assumed that women’s status as “secondary” earners and being expected to perform the majority of unpaid domestic and care work might be strongly influential in this regard. It is also possible that the higher share of women taking up unpaid leave is due to occupational segregation and employers’ imposing unpaid leave (UN Women, 2020).

However, there are some positive signs of increased engagement of men in the household. Increased engagement of sons in housework was reported by about half of women, and other family members by two-thirds (among those who answered) (UN Women, 2020). A nationwide survey conducted in Turkey in May 2020 shows that, in a couple of households, men’s unpaid work time went up nearly five-fold during the pandemic. The increase was highest for men who switched to working from home during a lockdown: they spent 50 per cent more time on domestic chores and care work than men who continued working at the workplace (UNDP, 2020).

**IMPACT ON THE RIGHT TO SOCIAL INSURANCE**

The rapid spread of the coronavirus raised the urgent demand to recognise COVID-19 as a work accident or occupational disease in order to ensure easier and faster access to associated benefits under the work accident or occupational disease insurance system (Social Security and General Health Insurance Act (SSGHIA) No.5510, Articles 13, 14), in particular for workers in the most exposed sectors such as health workers, police, food store employees, delivery workers, and others who come into regular close contact with the public. Furthermore, COVID-19 is contracted while commuting to work or back home, and it should also be covered by work accident or occupational disease insurance.

However, the Social Security Institution of Turkey published a Circular classifying COVID-19 as an illness (SSGHIA, Article 15) on 7 May 2020 rather than a work accident or occupational disease.

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7 In its report on the application of the European Code of Social Security, the ILO Committee of Experts on the Application of Conventions and Recommendations (CEACR) considers that infection by COVID-19, if contracted as a result of work, must be considered an employment injury (ILO CEACR, 2020).

accident or occupational disease. This declaration opened up debates on cases related to previous contagious diseases such as H1N1. There is one particular case where a truck driver lost his life due to H1N1 during a work trip from Turkey to Ukraine. It was concluded as a work accident by the Supreme Court (Court of Cassation, 21st Division, 2018/5018, 2019/2931, 15 April 2019).

After a long struggle and demand by health workers, the Ministry of Health issued a new Circular on 19 December 2020, recognising COVID-19 as an occupational disease for health workers (Ozgenc, 2020). The Circular provides occupational disease benefits for those who have suffered from the disease and for the next of kin of the staff who have died while working at hospitals.

However, the police, food store employees, delivery workers and others who are unable to telework or respect the social distance of 1.5 meters due to the nature of their job are not covered. For these workers, infection by COVID-19 could be classified as a work accident or an occupational disease depending on the circumstances, i.e., if the general conditions laid down in the SSGHIA are met. However, the request to prove the causal link between the work and the infection in order to be recognised as a work accident or occupational disease is problematic. To be considered an occupational disease, a clear connection between the disease and workplace exposure must be established. Therefore, the causal link between the work and the infection should be automatically assumed for this group of workers in order to also provide coverage for cases in which the identification of the specific causes and working methods of the infection is problematic. The proof of risk of infection should be based simply on a description of work and the extent of contact with the public.

This decision of the Social Security Institution will have legal consequences in the future and will be the subject of many lawsuits filed by the workers against the Institution, seeking a verdict in the Supreme Court.

IMPACT ON FREEDOM OF MOVEMENT OF OLDER PEOPLE

Older persons have faced higher infection and mortality rates, while at the same time being subjected to ageism/age discrimination in public discourse and isolation without access to essential services.

Emergency measures that have been put in place in Turkey have dramatically increased limitations on the freedom of movement of people over 65 because Turkey banned residents 65 years of age and older who were not employed to leave their homes with no exceptions for grocery shopping, pharmacy visits, or even taking out the garbage. On June 6th, the Presidency revised the rule to allow older people to go out between 10 am and 2 pm, Monday through Saturday.
Although the effect of this ban on older women has not been known yet, according to a study by the UN Women Turkey, women articulated higher difficulty in accessing basic supplies and services (UN Women, 2020).

During the pandemic, 27.5 per cent of women with disabilities could not meet their self-care needs such as hair, nail, foot, mouth, partial and whole-body care and bath (TFB, 2020).

**IMPACT ON POSITIVE DISCRIMINATION PRINCIPLE**

COVID-19, like other infectious diseases, poses a higher risk in places of detention, such as prisons, jails, and immigration detention centres. Therefore, Turkey made amendments to the Act on the Execution of Sentences and Security Measures in April 2020 (Ceza ve Guvenlik Tedbirlerinin Infazi Hakkinda Kanun ile Bazi Kanunlarda Degisiklik Yapilmasina Dair Kanun, No. 7242, Official Journal No.31100, 15 April 2020) and released around 90,000 prisoners to ease overcrowding in jails and protect detainees. Besides women prisoners who had children aged six and younger, prisoners who required special care or were over 65 were also released. They were provided for confinement in their accommodation as a virus containment measure.

**COMMENT**

The scale and severity of the COVID-19 pandemic clearly rose to the level of a public health threat that could justify restrictions on certain rights. However, existing limitations on the involvement of women and their representative organisations in decision-making have resulted in a disproportionate adverse impact on women. The Turkish Presidency’s response to the COVID-19 crisis is characterised by limited attention to gender issues.

The COVID-19 pandemic has deepened pre-existing inequalities in Turkey. Even the modest gains made in gender equality and women’s rights over the previous decades were at risk of being reversed. Progress lost takes years to regain. Therefore, putting women’s leadership and contributions at the heart of resilience and recovery is essential.

However, there is also evidence to suggest that the gender gap may be getting smaller. Surveys show that men have increased time spent on childcare and housework since the beginning of the pandemic, leading to slight shifts towards more egalitarian distributions of labour. This could lead to unpaid work being recognized and rewarded as a valuable contribution to the economy.
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COVID-19 – AN EXCUSE TO AVOID THE RULE OF LAW?
THE CASE OF SLOVAKIA

Hana Kováčiková

Abstract: The loss of transparency. This appears to be the first and most immediate consequence brought by COVID-19 to Slovakia from the legal point of view. At the very same time, the loss of transparency causes the loss of proportionality and leads to the breach of the principles of the rule of law and the excessive limitation of the human rights of the population. Slovakia might be the proof of this opinion. During this pandemic, the Slovak authorities have often used the “COVID cover” for a variety of extraordinary measures. For example, legislators adopted or tried to adopt a lot of acts not related to the crisis without usual public discussion and through shortened legislative procedures; public procurers purchased goods and services without competitive tendering and proper justification for the use of direct awarding; measures restricting fundamental rights were adopted by the Public Health Office without legal authorization, etc. The research in this chapter is focused mainly on (not) respecting the principle of proportionality by the Slovak authorities while adopting anti-pandemic measures.

During the research, methods such as doctrinal analysis, deduction, comparison, and synthesis will be applied with the aim of assessing the legal challenges brought by COVID-19 to the Slovak Republic. In this regard, the compliance of adopted measures with the Slovak Constitution and the European Convention on Human Rights will be tested to find out answers to the following research question: Have the measures adopted by the Slovak authorities complied with the principles of the rule of law?

Keywords: COVID-19, rule of law, proportionality, human rights, state measures
THE STATE OF EMERGENCY – GENERAL LEGAL ISSUES

“Even in an emergency situation, the rule of law must prevail” (Council of Europe, 2020a, p. 3). Generally, under the rule of law, the public administration shall “always act within the constraints set by law, in accordance with the values of democracy and fundamental rights, and under the control of independent and impartial courts” (Mokrá, Juchniewicz, Modrzejewksy, 2019, p. 185). The imperative of compliance of any measure adopted by the state with the rule of law increases its importance since an unexpected emergency situation sometimes requires unprescribed but quick solutions. The COVID-19 pandemic hit our world in an unprecedented way³, and states have chosen various solutions in their attempts to protect the lives and health of their populations.

As the European Court of Human Rights (ECtHR) stated a long time ago in Ireland v. the UK (para. 207), “it is the responsibility of the state to determine whether the life of its nation is threatened by a public emergency and, if so, how far it is necessary to go in attempting to overcome the emergency”. States have at their disposal a wide margin of appreciation in this regard. Measures taken to protect the life or health of the population can even redistribute the powers between the state authorities as well as restrict some of the population’s non-absolute human rights.⁴ However, the ECtHR also clearly stated that “states do not enjoy unlimited power in this respect”. The essential character of the rule of law should be, therefore, its ubiquity.

A state of emergency usually impacts two main areas: human rights and the exercise of state powers (European Parliamentary Research Service, 2020 p. 5).

The Venice Commission reminds in this regard (Interim Report, 2020, para. 23-25) that only such shifts in powers comply with the rule of law, which are necessary to help overcome an exceptional situation, lead to a return to normalcy and are limited in time to the period of an emergency situation.

Measures restricting human rights “are strictly limited to what is required by the exigencies of the situation” (Lawless v. Ireland No. 3, para. 22). The judicial

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³ To the date of 31 July 2021, WHO confirmed 196 553 009 COVID positive cases and 4,200,412 deaths (Source: https://covid19.who.int/)

⁴ As stated by the Council of Europe (2020a, p. 2), “the right to life, the prohibition of torture and inhuman or degrading treatment or punishment, the prohibition of slavery and servitude, and the rules of nulla poena sine lege and ne bis in idem, as well as the abolishment of the death penalty, shall never be derogated”.

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power is then responsible for assessing\(^5\) whether the state is within the limits or has gone beyond the conditions for exceptional derogation of human rights.

Therefore, the requirements of the rule of law are met only when both/any of these measures are established by the law (test of legality), pursue a legitimate aim (test of legitimacy) and are adequate for the crisis with regard to necessity, adequacy, and temporariness (test of proportionality).

The most current help on this matter came from the Council of Europe (CoE), which provided a *Toolkit* (CoE, 2020a) to help states to handle the COVID-19 pandemic within the framework of the rule of law. It accepts that states adopt various types of extraordinary emergency law but requires constitutional authorisation or at least constitutional compliance. The condition of the temporariness of the measures shall contain not only a requirement for a return to normalcy “as quickly as possible”, but when the state of emergency needs to be prolonged, such a necessity for prolongation should be tested and also approved by the parliament. Furthermore, the CoE warns states to give their governments a “*carte blanche*” when issuing an emergency law and reminds them that emergency measures must be “capable of achieving their purpose with minimal alteration of the normal rules and procedures of democratic decision-making” (p. 4). Finally, it points out the importance of checks and balances even in situations where those are eased due to the necessity to act quickly and efficiently: “Parliaments, however, must keep the power to control executive action, in particular by verifying, at reasonable intervals, whether the emergency powers of the executive are still justified, or by intervening on an ad hoc basis to modify or annul the decisions of the executive.” (p. 4).

In this document, the CoE also paid attention to the *relevant human rights standards* by requiring states to ensure an adequate level of medical care for people deprived of their liberty, and raising attention to severely ill patients, people with disabilities or elderly persons as their “exposure to diseases and the extreme level of suffering may be found incompatible with the state’s positive obligation to protect life and prevent ill-treatment” (p. 5).

When talking about *privacy and data protection*, the CoE warns that “the intrusive potential of modern technologies must not be left unchecked and unbalanced against the need for respect of private life” (p. 7).

\(^{5}\) As pointed out by Mokrá and Kováčiková (2020, p. 89), “the very existence of effective judicial protection by independent courts is the essence of the rule of law”.
Finally, it requires the states to thoroughly consider whether derogating anti-pandemic measures “discriminate unjustifiably between different categories of persons” (p. 7).

The principles and tests described in this part serve as benchmarks when considering the steps taken by the Slovak authorities during the fight against COVID-19 in 2020-2021.

**THE SLOVAK PANDEMIC LEGAL FRAMEWORK**

**Generally binding emergency law**

Slovakia is a state which had already had the relevant emergency law adopted before the pandemic started. Slovakia has two emergency regimes – an extraordinary situation under the [ordinary] *Population Protection Act No. 42/1994* and a [constitutional] state of emergency under the *Constitutional Act on the protection of the State No. 227/2002 (CAPS)*. Both of these regimes are issued by the government through its resolutions. This dual regime provides a mixture of measures introduced both under ordinary legislation and constitutional provisions. However, if those two regimes are applied at the same time, the latter prevails.

Introducing the *extraordinary situation* enables the adoption of measures such as rescue work by forces and resources from the entire territory where the extraordinary situation was declared, evacuation, emergency supplies and accommodation, or the use of parts of the integrated rescue system (Article 3b:2 of the Population Protection Act). The subsidiarity of extraordinary situations to the state of emergency is expressed by the ban on declaring an extraordinary situation after a state of emergency has been declared. On the other hand, if it was declared earlier than the state of emergency, it would be suspended and a special law would apply (Article 3b:4).

Such a special law grounding the *state of emergency* (SoE) is represented by the *CAPS*. However, COVID-19 proved that the legislation was not sufficient and needed to be amended. This was realised at the end of December 2020. Therefore,

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6 The amendment to the CAPS was realised by the Constitutional Act No. 414/2020 Col. of 28 December 2020, which from 29 December 2020 enables prolonging the state of emergency for the next 40 days with the approbation of the parliament. Before this act (during the first wave), the Slovak parliament did not have the power to approve or disapprove the SoE, which contravened the principles described in the above-mentioned Toolkit (2020).
international organizations and states’ response to Covid-19

the later, second-wave legislation differs from the first-wave legislation, bringing more transparency and even legality.

The current legislation defines the material conditions (Article 5:1: “if there is or exists an imminent threat to human life and health in a causal link to a pandemic” and “only for the territory affected or immediately endangered”), time scope (Article 5:2: “for the necessary time, for a maximum of 90 days” and may be “prolonged for a further 40 days, even repeatedly” if it is approved by the Parliament), rights, which may be (regarding the necessary extent, the necessary time and gravity of the threat) restricted, and obligations, which shall be imposed by declaring the SoE due to a pandemic (Article 5:4). These include, for example, the right to restrict the inviolability of the person and his privacy by a forced stay at home or by evacuation to a designated place, to impose a labour duty to ensure essential supplies, health care and provision of social services, to restrict the inviolability of the home for the purpose of accommodation of evacuees, to restrict freedom of movement and stay, to restrict or prohibit the right to assembly or association, or to make it conditional on the authorisation.

The government decides on the SoE declaration in the form of a resolution, and such a resolution must be published officially in the Collection of Laws.

Government’s COVID-19 reaction

The first-wave Government’s resolution No. 114/2020 on declaring the SoE was not doubted.7 Then, the Slovak government used the full range of this regime and declared a state of emergency for 90 days (from 16 March to 13 June 2020). However, the second-wave Government’s resolution No. 587/2020 of 30 September 2020 on declaring the SoE (from 1 October 2020) raised questions about whether material conditions for its declaration were fulfilled (it did not contain any justification for its adoption) and whether it complies with the Constitution and its principles (of legality and the rule of law). Therefore, a group of Members of Parliament (MPs) and even the General Prosecutor (GP) filed an application to the Constitutional Court of the Slovak Republic (CCSR) requesting judicial control of this resolution.8

7 On the other hand, measures adopted by state authorities (discussed in the following part) on the basis of this resolution and during the first wave, raised a lot of questions relating to the respect of human rights and their conformity with the Slovak Constitution.

8 Pursuant to Article 129:6 of the Constitution, the CCSR decides whether the decision on the declaration of a state emergency and subsequent decisions comply with the constitution and constitutional law. Such a judgement of the CCSR must be adopted within 10 days of the filing of the application. (Article 196:1 of the Constitutional Court Act).
The CCSR, in its judgement *PL ÚS 22/2020* (para. 43), held in this regard that the “assessment of whether the material conditions prescribed by the law are met, and whether the declaration of the SoE is necessary, requests, besides other things expert, conceptual and also political considerations. The government (as the highest executive authority with wide and relevant powers) is therefore in a better position than the CCSR to assess such circumstances, and it is democratically responsible for the consequences of its (positive or negative) decision.” As further explained by the CCSR, its task is not to consider the optimality of the SoE, but strictly only the proportionality of the government’s activities which restrict human rights and impose obligations.

However, although the CCSR considered that this resolution met formal and procedural aspects of the principle of legality, at the same time, it pointed out the lowered level of transparency connected with the missing justification of the resolution (para. 52: “The constitutional act does not explicitly require the justification of the SoE to be included in the resolution.”). On the other hand, when adopting the resolution on declaring the SoE, it is appropriate, regarding the principle of legal certainty, that the resolution should contain (at least) a brief justification, so the reason and object of the SoE shall be naturally ascertainable from the factual, social, and legal context, and arbitrariness will be excluded”, and para 56: “the government’s resolution on the SoE should contain a justification for the purpose of its documentary reviewability and trackability of a clear link to subsequent acts relating to the SoE under the Constitutional Act on Protection of the State.”).

This second-wave SoE was four times prolonged (by the Government’s resolutions No. 807/2020 of 29 December 2020, No. 77/2021 of 5 February 2021, No. 160/2021 of 17 March 2021 and No. 215/2020 of 26 April 2021) to a total length of 226 days.

The third prolongation resolution (No. 160/2021) also faced the constitutional control of the CCSR, as both the group of MPs and the GP considered it unjustified and contravening the principles of legality and the rule of law.

During the review, the CCSR, in its decision *PL. ÚS 2/2021* (para. 76) stressed that “its suspicion in the assessment of (repeatedly) prolonged SoE is higher due to the objective fact of the passage of time and requires a stricter consideration than in the case of a [newly] declared SoE. However, the strictness is substantially determined by the severity and nature of the continuing threat”.

Considering the missing justification of prolongation, the CCSR confirmed (para. 85) its earlier opinion in *PL. ÚS 22/2020* by saying that it did not affect the compliance of the contested resolution with the Constitution or constitutional law as the “recapitulation of the pandemic situation, which served as the information
basis for the decision of the government on repeated prolongation of the SoE [provided during the process also to the CCSR] sufficiently constitutionally justifies this resolution” (para. 84).

Considering the length of the 40-day prolongation, the CCSR reasoned (para. 88) that the necessity of prolongation cannot depend only on the state of affairs at the time of the decision but also on the reality of the threat of a possible deterioration of this state.

Finally, the CCSR held that it would be possible to consider the non-compliance of the prolongation of the SoE with the constitutional law only if it is undoubted that we are not confronted with an unfortunate fact – the factual circumstance of a pandemic endangering the lives and health of persons. (“This is not the case now, and we can only hope that it will happen soon.”). As a result, it confirmed the compliance of this resolution with the Constitution.

Upon the basis of the declaration of the SoEs, ministries and other state authorities were empowered to adopt relevant anti-COVID measures. The establishment of this regime enabled the Slovak government to use predetermined exceptional and/or extraordinary measures (including the restriction of some fundamental rights).

**Shifting of power to other state players**

The specific role in the COVID-19 battle plays the Public Health Authority of the Slovak Republic (PHA), which has become the key authority to adopt the most relevant measures dealing with COVID-19.

The legal grounds for its action can be found in the Public Health Protection Act No. 355/2007. The PHA is led by the Main Hygienist and among its main tasks are planning, coordination, and setting the scope of the control of infectious diseases (Article 5:4:c) and ordering measures for the prevention of diseases or threats to public health beyond the regional scope (Article 5:4:k). Such measures may also include isolation at home or in a medical or other designated facility, increased medical surveillance or quarantine (Article 12:2:f).

If there is a threat to public health, the PHA and regional PHA shall identify and react to new and endangering infectious diseases and other threats (Article 48:3).

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9 The PHA is not listed in the official list of central administration authorities contained in Act No. 575/2001 Col. on the organization of central administration. By its character, it is a state budgetary organization connected to the Ministry of Health and is competent to act on the whole territory of the Slovak republic.
The PHA orders measures by which it may (among others) prohibit or restrict the contact of a part of the population with the rest of the population (Article 48:4:c), mass events (Article 48:4:d), or impose forced isolation of a person suffering from an infectious disease or suspected of having a disease or quarantine of a person suspected of having a disease who refuses ordered home isolation or isolation in a medical or another facility (Article 48:4:n).

It seems that PHA’s measures are the most problematic in terms of the proportionality of the state’s intervention in human rights, especially during the first wave.

In September 2020, the GP issued the Prosecutor’s alert by which he declared that all COVID-19 measures adopted by the PHA’s public orders from the time of the declaration of the SoE (16 March 2020) relating, for example, to the state border regime, forced isolation, the duration of the laboratory diagnostics of COVID-19, hygienic requirements inside and outside of facilities, and the organisation of mass events, were illegal (but not void). The GP reasoned that the PHA was not a part of the crisis board of the state, it was not even a central administration body, and was not entitled to adopt such measures as during the SoE, since (according to the CAPS) relevant anti-COVID measures should only be ordered directly by the Ministry of Health. Furthermore, the PHA’s public orders had a legally unclear character, as the PHA neither recognised whether they were individual acts nor generally binding law. Moreover, as they did not need to be published in the Collection of Laws, they were not transparent and accessible to all addressees. Finally, the CAPS created a special constitutional legal regime different from the activities of the PHA covered by the [ordinary] Public Health Protection Act.

The findings of the General Prosecutor were reflected in Act No. 286/2020 of 14 October 2020, which amended the Public Health Protection Act and empowered the PHA to act even in times of the SoE.

FUNDAMENTAL RIGHTS V. ANTI-PANDEMIC MEASURES

As accurately pointed out by the European Parliamentary Research Service (EPRS) in its study (2020, p. 7), the rights that are likely to be affected during a pandemic are those connected to freedom of movement,11 rights to education,11 and public health protection.
rights to property, and freedom to conduct business, as well as the rights of assembly, expression, protection of personal data, or political rights.

Since the extent of this chapter is limited, only the most discussed measures of the Slovak authorities will be analysed. They are related to forced state isolation, electronic monitoring through mobile phones, and mandatory nationwide testing of the population.12

**Forced state isolation (the right to liberty)**

Pursuant to Article 5:1:e of the ECHR, everyone has the right to liberty13 and security of person, except in the case of lawful detention for the prevention of the spread of infectious diseases. By its public orders No. OLP/3012/2020, No. 3172/2020, No. OLP/3353/2020 and No. OLP/3992/2020, the PHA ordered every person who entered Slovakia from 6 April 2020 onwards to undergo forced isolation in the facilities designated by the state for the period of time necessary to exercise the COVID-19 laboratory diagnostics. After a negative result, such a person was ordered to undergo home isolation for the length of 14 days, together with the other members of such person’s household.14

The aspect of legality was briefly analysed in the previous part – the General Prosecutor considered the mentioned public orders of the PHA illegal, and the author agrees with this opinion. However, other questions relating to the protection of human rights are relevant too.

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12 However, constitutional and human rights doubts are raised even in relation to the right to education (children from the marginalised groups of the population did not have sufficient access to education during lockdowns), the right to liberty and privacy (social care homes and hospitals were closed and people stayed there for many months and even died without the possibility to see their families for the last time), the right to have proper health care (seriously ill people were denied surgeries or sufficient health treatment, as serious numbers of operations were postponed for an unspecified time), and others.

13 The CCSR defined personal liberty as the unrestricted movement of a person who, at his/her own discretion, may reside in a certain place or leave that place freely (*III. ÚS 204/02-47*, p. 13).

14 This measure also has exceptions (e.g., for pregnant women, people older than 75 years, and others), but this fact is not relevant for the purpose of this chapter. This regime was eased by the last order with the option to alter forced state isolation by the activation of a mobile application able to track and monitor the home isolation and definitely cancelled by the public order No. OLP/4739/2020 of 9 June 2020 when the SoE ended.
When assessing the proportionality of the restriction of the right to liberty through forced state isolation, it is necessary to bear in mind the criteria established by the ECtHR in *Witold Litwa v. Poland* (para. 78): “The necessary element of the “lawfulness” of the detention within the meaning of Article 5 § 1 (e) is the absence of arbitrariness. The detention of an individual is such a serious measure that it is only justified where other, less severe measures have been considered and found to be insufficient to safeguard the individual or public interest which might require that the person concerned be detained. That means that it does not suffice that the deprivation of liberty is executed in conformity with national law, but it must also be necessary in the circumstances”. *Enhorn v. Sweden* (para. 44) states: “the lawfulness of the detention of a person for the “prevention of the spread of infectious diseases” is whether the spread of the infectious disease is dangerous to public health or safety, and whether the detention of the person infected is the last resort in order to prevent the spread of the disease because less severe measures have been considered and found to be insufficient to safeguard the public interest.”

In light of those principles, it is necessary to start by distinguishing between the terms of *isolation* and *quarantine*. Pursuant to the *Public Health Protection Act*, the term “isolation” means the separation of *persons suffering from infectious disease* during their infectivity from other persons in order to prevent the spread of an infectious disease. The term “*quarantine*” relates only to the *person suspected* (not suffering) of *infectious disease*, to whom are dedicated lighter measures (e.g., increased medical surveillance, but not isolation). The PHA, by its *blanket* order to isolate all (both infectious and not-infectious) persons in forced state isolation in designated facilities, which were often hundreds of kilometres from the homes of affected persons, did not fulfil the requirements of proportional measures and breached the rule of law.

It is worth mentioning (according to the author’s opinion) the rather alibi approach of the CCSR to this question. Despite the tens of applications in this regard, it denied all of them with the reasoning that such public orders represent “*hybrid acts*” with elements of an individual administration act as well as elements of a generally binding act, which requires the review of administrative courts. Moreover, except for the fact that the Slovak legal order officially did not recognise “*hybrid acts*”, at the time of the decisions of the CCSR on these applications, all deadlines for administration actions were missed.

**Geo-tracking and excessive procession of personal data (the right to privacy)**

The CCSR in case *PL. ÚS 13/2020* subjected to constitutional control those articles of the *Telecommunication Act* No. 351/2001 which impose obligations on
telecommunication operators to process the data of their users and provide these data to the PHA upon its request, even without the consent of the users. The CCSR, by its decision of 13 May 2020, preliminary suspended the legal force of the contested act. Firstly, it reminded (para. 69) that the purpose of the right to privacy is to “prevent the public authorities from interfering in the conduct of the individual beyond what is necessary and managing his/her private life too disproportionally.” During the assessment, the CCSR prioritized the certainty of the legal framework and the guarantees against abuse of using the data. The CCSR pointed out (para. 81) that the widespread preventive collection of personal data presents a “particularly serious interference” or “serious interference” with the right to privacy and the right to protection of personal data. The CCSR considered contested data collection and its subsequent use to be set up so widely that (para. 85) it could be used almost freely for any purpose in the context of a pandemic, as it was formulated as a kind of a general clause for various uses. The CCSR stressed that given the severity of the interference with the right to privacy and the protection of personal data, this type of personal wording cannot be allowed in a democratic society.

However, before the CCSR could adopt its final matter-in-fact judgement, in this case, the Telecommunication Act was changed (to reflect the findings of the CCSR), and the CCSR stopped the proceedings.

Mandatory nationwide screening with tests for COVID-19

The government, besides other measures, by its already mentioned Resolution No. 160/2021, ordered a curfew from 20 March 2021 to the end of the SoE. The exemptions from the curfew were defined. However, they were conditioned on the necessity of endurance of antigen testing for COVID-19. The GP filed an application to the CCSR to consider the compliance of this measure with the Constitution and disproportionate interference with the person’s integrity (it is questionable whether the subjecting of testing, which is forced under the threat of job loss, a ban on accompanying children to kindergarten or primary school, or a ban on going to nature, can be considered as consent). As the CCSR held in Pl. ÚS. 13/2020, “especially in vertical relations, if the consent was obtained under the threat of a negative consequence, it is not possible to consider it voluntary”. However, in PL. ÚS 2/2021, it specified that “examination of the testing obligation requires that in the practice of the SoE it cannot be ruled out that the government’s effort to strictly respect the necessity of an approved restriction of one human right will secondarily invade another fundamental right (restriction of freedom of movement and, in this line, the integrity of person), which is or is not included in the exhaustive enumeration pursuant to Article 5:3-4 CAPS. There could be a large number of
prescribed situations, and if the government was always limited by the requirement that it could use the restriction only if it did not (albeit indirectly) interfere with another fundamental right or freedom, the flexibility and effectiveness of its decision-making in crisis situations would be so limited that it is debatable whether the meaning of restricting fundamental rights and freedoms in crisis situations would not be substantially denied.” The CCSR, therefore, perceived the conditionality of exemption on the negative result of the test as an attempt by the government to find a solution that respects the necessity of restricting freedom of movement at the level of the constitutional legal requirement.

Therefore, mandatory testing in this context was not considered a breach of human rights.

CONCLUSION

The above-mentioned analysis is not exhaustive nor comprehensive as the extent of this chapter is limited. However, even from this brief insight, we can conclude that the Slovak response to the COVID-19 pandemic surely challenged the principle of the rule of law and, in some cases, raised doubts about its conformity with the Constitution and human rights guaranteed by the ECHR. Existing legislation proved to be insufficient and needed to be improved. In its attempt to fight the pandemic, Slovakia managed to go even beyond the edge of legality – not only with the mentioned measures, but also with others, not discussed in this chapter (connected with the widespread forced isolation of Romas, denying the right to education or denying adequate health care).

However, such an assessment can be deducted only from the academic analysis of adopted measures, as the CCSR did not issue any final decision on this matter. In this regard, the author found 252 decisions of the CCSR filtered with the “COVID” term. Even in cases where the CCSR preliminary found an inconsistency with the Constitution due to the amendment or withdrawal of such a measure, the CCSR could not decide on the merits of such an amended or no longer valid act. On the other hand, the flexibility with which the legislator reflected on the findings of the CCSR means that it wanted to comply with democratic principles.

The answer to the question of whether the measures adopted by the Slovak authorities have complied with the principles of the rule of law is therefore not monochromatic. Even from the brief insight contained in this chapter, one can deduce that some of them have not. On the other hand, those of the most importance (e.g., declaring the SoE and its prolongation) passed the test of compliance. The good sign is that the Slovak Republic, even after declaring the SoE, has reflected the soft law provided by the Council of Europe and the Venice Commission.
For the third wave of COVID-19, which is coming (as the experts say), it is crucial to learn lessons from previous waves and avoid mistakes and misconduct that appeared during this time.

The final recommendation is similar to that of the Slovak National Centre of Human Rights (2020, p. 144): implement all basic democratic principles and guarantees for all COVID-19-related measures, strictly distinguish between already infectious and just suspected individuals, and set restrictions on one human right with the greatest regard for the other.

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FROM A NATIONAL CRISIS TO STRATEGIC OPPORTUNITIES?
CHINA’S STATE RESPONSE TO COVID-19
AND MAJOR-POWER DIPLOMACY

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Abstract: The early stages of COVID-19 put the Chinese Communist Party (CCP) on the defensive as its response appeared to undermine public trust and confidence at home, later spurring criticism around the world. Since then, the CCP leadership has been quite concerned about three scenarios the state might possibly confront: economic recession, social panic, and diplomatic isolation. These mattered for the CCP’s legitimacy as well as the survival of the state.

In fact, the CCP contained the spread of the virus, recovered the economy successfully compared to most of the Western governments, including the United States, using every measure they could.

As the coronavirus began spreading to other countries, and China’s draconian lockdown strategy yielded positive results, the CCP turned its attention to international diplomacy, showing how the CCP enhanced its international influence, converting the national crisis into strategic opportunities by supplying medical devices and protective equipment, sharing know-how and cooperating with international agencies.

Major-power diplomacy under Xi Jinping’s leadership will see China taking advantage of the pandemic to engage in standard setting and rulemaking for global governance. Mask and vaccine diplomacy have been part of the CCP’s strategic effort to ensure its legitimacy internationally. Beijing understands that if it is seen as a world leader, and Washington is seen as unable or unwilling to do so, this could fundamentally alter the US’s position in global politics and the contest for leadership in the twenty-first century.

Keywords: Chinese Communist Party (CCP), COVID-19, Xi Jinping, major-power diplomacy

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CHINA’S EARLY-STAGE RESPONSE TO COVID-19 AND ITS CONCERNS

The CCP’s initial response to and management of COVID-19 sparked widespread debate both domestically and internationally. The reasons which triggered widespread scepticism and criticism, this paper argues, have been deeply rooted in the General-Secretary of the CCP, Xi Jinping’s policies under his absolute leadership, and the consolidated power foundation.

While the first case occurred on December 8, 2019, and possibly even earlier, in Wuhan city, the capital of Hubei province, the municipal government did not tackle the potential crisis nor begin to address the problem until January 20, 2020, when Xi ordered that action be taken to control the coronavirus (Buckley, Myers, 2020). On that day, the central and local governments, for the first time, officially recognized the existence and danger of the coronavirus. The lockdown was instituted in Wuhan only on January 23 — seven weeks after the coronavirus first appeared. By then, Mayor Zhou Xianwang admitted that more than five million people had fled from Wuhan.

Politics, as always, did matter in tackling COVID-19 within the party. Since the outbreak and spread of the coronavirus, the localities have been blamed for delays in reporting new cases. The leadership in Wuhan and Hubei was forced to take responsibility for the incident. As a result, the central government sacked Jiang Chaoliang, the party secretary of Hubei province, and Ma Guoqiang, the party secretary of Wuhan city. Their dismissals may not have been fair — we cannot judge because there has been no open accounting of the crucial early period in Wuhan and how local officials interacted with Beijing. But it is evident from a dispassionate assessment of the way the crisis unfolded that the local officials do not bear the sole responsibility (Mcgregor, 2020).

The most structural and fundamental reason for the delayed responses by the local leadership to the spread of the coronavirus in Wuhan, this paper argues, originated in Xi’s over-consolidated power in the central government rather than transferring certain extents of powers and rights to the local governments. The outcome of this structural complex has been the spread of “fear politics”. Everybody, including very senior officials, such as the party secretary of Wuhan and Hubei, is scared in front of Xi, eager to avoid making mistakes, being forced to just report the goodness and success of the CCP’s governance across the nation.

Under this political reality, the localities did not have enough incentives to report negative information about the unusual virus to the central government in the early stages. It is still unclear what kind of communication was implemented between Wuhan and Beijing from December 2020 to January 2021. But it was undeniable that Xi’s politics with over-consolidated power has structurally affected the delayed
response by the localities in the early stage. The tension between Xi’s concentration of individual powers and China’s past practice of collective leadership has become especially significant at a time when the country is confronting many daunting challenges (Li, 2016, p. 24). COVID-19, in this sense, is undoubtedly unexceptional.

Once Xi made a decision and announced to “go ahead”, the CCP tried to contain the spread of the coronavirus by using every measure they could. China’s battle against COVID-19 was essentially a state-mobilized movement. From state-run organizations to online groups to big businesses, nearly all elements of civil society have moved swiftly into action. They donated money, organized food delivery, built health apps, and distributed masks and other equipment. Working in concert with government agencies, these various groups mobilized like various crew teams on a gigantic ship in peril (Fu, 2021).

In terms of the CCP’s concerns about its legitimacy crisis, particularly a potential risk of losing the public trust domestically, one seminal incident was the death of Dr Li Wenliang, a Chinese ophthalmologist at the Wuhan Central Hospital. Li warned his colleagues on December 30, 2019, about the possible outbreak of an illness that resembled severe acute respiratory syndrome (SARS) on a WeChat group.

Then Li was summoned and admonished by the local Wuhan police. Finally, he was infected with the coronavirus in the hospital and died on February 7, 2020. Just after his death, much dissatisfaction and complaint about the government appeared on the Chinese version of Twitter, and some users even demanded freedom of expression. But eventually, the CCP leadership successfully contained these turbulent opinions, and people stopped challenging the authority of the CCP.²

There had been obvious evidence to prove why the authorities were surely upset. After Li’s death, the government launched an investigation into Li’s case immediately. This was quite unusual in the history of Chinese politics. The motivations of the authorities to do this vividly reflected Xi’s political anxieties, which might possibly trigger citizens’ resentments against the authorities. China Daily, the mouthpiece of the CCP, acknowledged that Li’s death had triggered great sorrow

² According to the BBC’s investigative report, while the authorities have since officially recognized Dr Li Wenliang as a “martyr”, several notable activists may be written out of the country’s COVID-19 history. During the Wuhan outbreak, a number of citizen journalists made a notable impact internationally, by circumventing the “great firewall of China” to get word out of the city. These include Chen Qiushi, Fang Bin and Zhang Zhan. They racked up hundreds of thousands of views on YouTube for videos that they said gave the true picture of what was happening in Wuhan. However, this came at a cost. The Committee to Protect Journalists notes that in Wuhan, the authorities “arrested several journalists for coverage that threatened the official narrative of Beijing’s response”. (BBC, December 29, 2020).
among the public, and many people believed he was wrongfully accused of “spreading rumours”. On the same day, the National Supervisory Commission decided to send a team to Wuhan to investigate issues regarding his death. About a month later, a report of the investigation released on March 19 stated that Li made a positive contribution to epidemic control work, and the local public security authorities should revoke the letter of reprimand issued to Li and apologize to his family (China Daily, 2020).

Beyond that, Li and 13 other people who died on the front line fighting the novel coronavirus in Hubei were identified as the first batch of martyrs on April 2. Martyrs are the highest honorary title which the party and state award to citizens who bravely sacrifice their lives for the nation, society and the people (CGTN, 2020).

After overcoming Li’s case at the peak of the potential crisis of the nation and party’s legitimacy, the CCP’s next targets were simultaneously realizing virus containment and economic restoration. Since then, in fact, Xi has contained the spread of the coronavirus and recovered the economy successfully compared to Western governments, including the United States.

According to the statics calculated by the National Health Commission of the PRC, 87,071 people were infected by the novel coronavirus and 4,634 people died because of the virus. Given the statistics, the peak of the number was in February, 68,033 and 2,611. After that, the numbers decreased from June to December, and even stayed at zero (National Health Commission, 2020).

Economically, according to the National Bureau of Statistics, China expanded by 2.3% in 2020. Roaring back from a historic contraction of 6.8% in the 1st quarter of the year (then grew 3.2%, 4.9%, and 6.5%), it became the only major world economy to grow in what was a pandemic-ravaged year (Cheng, 2021). As the International Monetary Fund (IMF) pointed out in the annual report published in December 2020 regarding the economic recovery under the pandemic, “growth is still unbalanced as the recovery has relied heavily on public support while private consumption is lagging. Rising financial vulnerabilities and the increasingly challenging external environment pose risks to the outlook. Important reforms have progressed despite the crisis, but unevenly across key areas. The Chinese economy continues its fast recovery from the health and economic crisis as a strong containment effort and macroeconomic and financial policy support have mitigated the crisis impact and helped the economy rebound” (IMF, 2020).

As key policies to secure the recovery and return to balanced growth in China, the IMF report raised the below suggestions: adjusting policy support to the recovery; making policy support more effective to maximize policy space; containing rising financial risks proactively; structural reforms to enhance the role of the private sector; leading global solutions.
FROM A NATIONAL CRISIS TO STRATEGIC OPPORTUNITIES

At the early stage, Xi Jinping was surely concerned that the outbreak and spread of COVID-19 could bring about a national crisis and undermine the legitimacy of the CCP. By March, Xi was not holding back on the superlatives in describing the coronavirus epidemic and how serious a challenge it was.

As the most typical case, at a meeting to advance the work on coordinating the prevention and control of COVID-19 and economic and social development on February 23, 2020, Xi explicitly affirmed that “the COVID-19 outbreak is a major public health emergency that has spread at the fastest speed, caused the most extensive infection, and is the most difficult to contain in the country since the founding of the People’s Republic of China”. He also added that “this is both a crisis and a big test for us” (Xinhua, 2020).

This paper argues that, during that period, the CCP leadership was most concerned about three scenarios that the state might possibly confront: economic recession, social panic, and diplomatic isolation. If these three incidents happened simultaneously, legitimacy would not be possible in a crisis. This is the reason why the CCP tried to contain the spread of the coronavirus, and then to restore the economy as soon and as much as possible.

At that time, the authorities were still wondering what uncertainties remained to tackle the potential crisis. This mentality was reflected by the fact that the annual National People’s Congress was unusually postponed for two months, and Premier Li Keqiang did not announce a goal of economic growth in 2020. Li noted, “We have not set a specific target for economic growth this year. This is because our country will face some factors in its development that are difficult to predict due to the great uncertainty regarding the COVID-19 pandemic and the world economic and trade environment” (Li, 2020).

By the second quarter of 2020, the CCP has gradually but dynamically overcome the first two potential crises, economic recession and social panic, due to substantial achievements in containing the coronavirus (basically zero cases around June) and recovering the economy (3.2% growth in the second quarter).

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4 According to Li, in 2020, China must give priority to stabilizing employment and ensuring living standards, win the battle against poverty, and specifically, set the following targets: over 9 million new urban jobs; a surveyed urban unemployment rate of around 6 percent; a registered urban unemployment rate of around 5.5 percent; CPI increase of around 3.5 percent; growth in personal income that is basically in step with economic growth; effective prevention and control of major financial risks etc.
In comparison to these two, the CCP leadership is still concerned about diplomatic isolation, which might lead to China being condemned, if not isolated, by the international community, particularly democratic countries in the West.

Many political leaders around the world, particularly in the US, Australia, and Europe, have been critical of the CCP’s lack of transparency in the early stages of the epidemic. This had implications for both China’s neighbours and countries with which China has commercial and transport links. The complaints added to the fundamental mistrust that some Western countries already had of Xi’s domestic and external policies, due in large measure to China’s more forthright foreign policy of recent years. So-called “wolf-warrior” Chinese diplomats, who have riled host countries with their plainspoken talk, have become emblematic of that robust approach.

For its part, the CCP is insisting that its response to COVID-19 was fast and effective from the beginning, highlighting its willingness to share information, including the coronavirus genome, with the World Health Organization (WHO) as well as other national health authorities. Despite these claims, some countries, mainly in the West, have maintained their concerns about China’s reliability, focusing on its relationship with the WHO as well as on the CCP’s low level of transparency, slow response and evidence of attempts to suppress the spread of information about the coronavirus.

In the US, Republican Party lawmakers have introduced bills such as the Li Wenliang Global Public Health Accountability Act that would impose sanctions against China because of COVID-19. Along with the US, the Australian government and the European Union have raised questions about the origin of the coronavirus, proposing an independent scientific investigation into the matter. Beijing has rejected the idea, even warning that if Canberra pushed for an inquiry, Chinese consumers might have launched a boycott of Australian products. China later announced anti-dumping tariffs on Australian barley and suspended imports of beef from four abattoirs in the country.

As the coronavirus began spreading to other countries and China’s draconian lockdown strategy yielded positive results, the CCP turned its attention to international diplomacy, became more confident and started behaving actively outside the border. Beijing’s actions have showcased, as the paper discusses in the below part, China’s major-power diplomacy which has been conducted in the Xi administration and the implications of this strategy (Kato, 2020).

In his speech on May 18, 2020, to the World Health Assembly, the governing forum of the World Health Organization (WHO), Xi Jinping gave robust defence of the Chinese handling of the coronavirus outbreak, insisting that they had acted with “openness, transparency and responsibility”, added that “we have provided information to the WHO and relevant countries in a most timely fashion. We have
released the genome sequence at the earliest possible time. We have shared control and treatment experience with the world without reservation. We have done everything in our power to support and assist countries in need” (Xi, 2020). He also pledged US$2 billion toward the pandemic fight over the next two years, an offer in sharp contrast to US President Donald Trump’s decision to withhold American funding from the WHO and his threat to leave the organization altogether.

There has been a precondition, or potential uncertainty, for the CCP to convert the national crisis into strategic opportunities. That is the coronavirus origin issue. China did not truly want to see and face a situation in which the international community collectively concluded that “the coronavirus has originated from China; that is Wuhan virus”, and then forced China to take full responsibilities for the outbreak and spread of the coronavirus inside and outside China. If this scenario becomes a reality, China may even possibly have to pay huge amounts of compensation (something like war reparations) for lost growth and lives around the world under the pandemic. In this case, the legitimacy of the CCP would be in trouble both domestically and internationally.

In order to avoid this worst scenario, the CCP has conducted propaganda campaigns and united-front strategies, provided any data, information, and evidence to prove that China has not owed the world anything, but, on the contrary, made great contributions to save the health and lives on the planet. After almost a year since the outbreak of the coronavirus, Wang Wenbin, a spokesman for the Chinese Ministry of Foreign Affairs, commented on what China did at the regular press conference on December 29, 2020. He noted:

“There’s a clear timeline of China’s effort to fight COVID-19, which is open and transparent. At the earliest time possible, we reported the epidemic to the WHO, identified the pathogen and shared its genome sequence with the world, and we shared our information and containment experience with other countries and regions in a timely manner. These are facts that can stand the test of time. Accusations of “China covering up the epidemic” are simply groundless. I’d like to stress that China was among the first to have put the virus under control, to have resumed work and production, and to have realized economic stability and recovery. China enjoys stable and orderly socio-economic development, and our people enjoy safety, health and freedom. Faced with the once-in-a-century pandemic, can such achievements ever be made by covering up the truth? The answer is simple enough. China’s achievements in fighting the pandemic are the best response to the fallacy of “China concealing the virus” (Wang, 2020).

For the CCP’s struggle with the coronavirus origin issue, the unavoidable threat was coming from some Western countries, particularly the United States. This
situation has never stopped, succeeded from the Trump administration to the Biden administration.

In May 2020, the Chinese government disclosed “Reality Check of US Allegations Against China on COVID-19”, examined 24 cases over China’s response and tackling the coronavirus, tried to verify that what the US alleged was completely wrong, concluded that “recently, some US politicians and media outlets have been fabricating preposterous allegations and lies of one kind or another in order to shift the blame to China for their inadequate response to COVID-19. However, as Abraham Lincoln said, “You can fool all the people some of the time, and some of the people all the time, but you cannot fool all the people all the time”. Lies evaporate in the light of truth. It is time to let the facts speak for themselves. In the future, we will continue to reveal the truth to the world whenever new lies appear” (Ministry of Foreign Affairs of China, 2020).

The CCP’s diplomatic efforts to justify their fight against COVID-19 have persistently continued in 2021. From January 15 to February 10, the authorities strategically accepted the WHO team’s visit to China and on-the-ground investigations into the origins of the coronavirus in Wuhan. After that, on March 31, the WHO released the “Report of Joint WHO-China Study of the Origins of SARS-CoV-2” (WHO, 2021). Regarding the results of the investigation, the Chinese government commented that “The Chinese side offered necessary facilitation for the team’s work, fully demonstrating its openness, transparency and responsible attitude” and “to politicize this issue will only severely hinder global cooperation in the study of origins, jeopardize anti-pandemic cooperation, and cost more lives. It would run counter to the international community’s aspiration for solidarity against the virus” (Ministry of Foreign Affairs of China, 2021).

Obviously, China has intentionally relied on and taken advantage of the authority of the WHO’s platform in order to accomplish its strategic objectives.

As examples of China’s counterarguments to the US allegations, pick up three cases below:

1. Allegation: Wuhan is the origin of the virus.-Reality Check: Being the first to report the virus does not mean that Wuhan is its origin. In fact, the origin is still not identified. Source tracing is a serious scientific matter, which should be based on science and should be studied by scientists and medical experts. 3. Allegation: The virus was constructed by the Wuhan Institute of Virology.-Reality Check: All available evidence shows that SARS-CoV-2 is natural in origin, not man-made. 16. Allegation: China controls the WHO.-Reality Check: China firmly supports multilateralism. We have always maintained good communication and cooperation with the WHO. But we have never attempted to manipulate the organization. The suspension of funding by the US, the largest contributor to the WHO, has been widely opposed by the international community.
This is a continuation of China’s traditional UN diplomacy. The CCP leadership considers the accountabilities of China’s policies could have been maximized if they were well-performed within the UN platform where China is a member of its Security Council, and defined as mostly reflecting a real multilateralism and fairness in international relations.

Given this consideration, the authorities eventually insisted that “the WHO joint mission report has already reached a scientific and authoritative conclusion for the first phase of study” (Wang, 2021), rejecting any suspicions and criticisms of China’s so-called delayed response and mismanagement with lack of transparency regarding the COVID-19 issues, including in the early stages. Since the outbreak and spread of the coronavirus, the CCP has periodically concluded that China has avoided the national crisis and should move on to increase the CCP’s legitimacy and international influence by dynamically conducting major-power diplomacy in Xi’s new era.

IMPLEMENTATIONS OF MAJOR-POWER DIPLOMACY

Chinese scholars have long defined major-power diplomacy as “diplomacy with major powers”, referring to the US, Russia, and, in some cases, Japan. Under the Hu Jintao administration (2003-2012), China continued Deng Xiaoping’s grand tactic of keeping a low profile and biding your time while also accomplishing things. Now, in Xi’s new era, China has reoriented its course, practising diplomacy as a major power. (Kato, 2019).6

This paper argues that major-power diplomacy in Xi’s new era consists of four aspects: economic expansion, political penetration, “friendship” creation, and core interest protection.

Since Xi took office, China has broadened its economic reach, leading to the establishment of institutions such as the Asian Infrastructure Investment Bank and increasing financial clout. Using its economic capabilities as a basis, China seeks to establish itself as a global political leader by enacting a multitude of international schemes. Through cultivating stronger economic and political ties with a large number of countries, China has assembled a formidable “friendship circle”. These “friends” are strategic assets to protect China’s core interests, which are constituted

6 Yang Jiechi, director of the Central Foreign Affairs Commission and the 19th Politburo, insisted “China is ready to shoulder its responsibility as a major country” at Study and Implement General Secretary Xi Jinping’s Thought on Diplomacy in a Deep-going Way and Keep Writing New Chapters of Major-Country Diplomacy with Distinctive Chinese Features, July 17, 2017.
by what China considers to be its inalienable positions; for example, its claims on Taiwan, Hong Kong, Xinjiang, and the South China Sea. The CCP leadership has increasingly believed that it could not ensure the party’s legitimacy without protecting the core interests. In this sense, COVID-19 provides a significant context for the CCP to test major-power diplomacy and increase its accountability eventually.

After focusing on national cohesion and shoring up government support at home, the CCP officials viewed COVID-19 as a strategic opportunity to influence other countries by supplying medical devices and protective equipment, sharing know-how, and cooperating with international agencies to increase the CCP’s global legitimacy.

The CCP embarked on a campaign to counter criticism of its shortcomings in dealing with the virus and instead highlighted its contributions to the global pandemic fight and its role as a responsible major power on the international stage. “We would like to share China’s best practices with other countries, but we will not turn them into any kind of geopolitical weapon or tool,” Hua Chunying, a Foreign Ministry spokesperson, noted. “China would like to contribute our experience and ideas to global public health security and governance, which is something we should do as a responsible major country” (Hua, 2020).

Clearly, the CCP intends to use the context of COVID-19 to implement further major-power diplomacy. China is harnessing its economic capabilities by producing medical equipment such as protective gear and virus tests and supplying them to both developed and developing countries facing shortages. These efforts initially backfired when many items in initial shipments proved faulty or of low quality. Although so-called “mask diplomacy” in the relatively early stages was not so popular and even raised scepticism and hostility toward China’s intentions and behaviour, China’s efforts in vaccine development and diplomacy have accomplished certain outcomes and accountabilities.

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7 China has conducted aggressive policies towards Taiwan on the COVID-19 issues. On the call for Taiwan’s willingness to participate in the 74th World Health Assembly, China, through diplomatic pressures on other countries, has successfully realized Taiwan’s appearance to be rejected in the WHO-related platform, which the CCP has made a strategic point. According to Chinese Foreign Ministry Spokesperson’s Remarks released on May 24, 2021, “we urge the DPP authorities to drop its attempt of seeking Taiwan independence by taking advantage of the epidemic, which will end up nowhere. We also urge certain countries to stop politicizing the health issue and stop interfering in China’s internal affairs by playing up the Taiwan issue. Otherwise, they are doomed to fail just like a man who lifts a rock only to drop it on his own feet”. Obviously, the CCP has tried to take advantage of the pandemic to impose pressure on Taiwan and eventually isolate it politically.
As a strategic part of vaccine diplomacy, China joined a global scheme for the distribution of the COVID-19 vaccine – COVAX, backed by the WHO in October 2020. The COVID-19 vaccine, developed by Sinovac Biotech Ltd. and Sinopharm Group, was then approved by the WHO for emergency use listing, marking a significant advancement in vaccine diplomacy. In July 2021, the two Chinese developers agreed to sell their shots to the COVAX program, pledging millions of doses that would give the global distribution effort a much-needed boost. (Bloomberg, 2021). By July 12, 2021, China had provided 500 million vaccine doses and concentrates to over 100 countries and international organizations, one-sixth of the total global output (Zhao, 2021).

China is also seeking to expand its political influence by propagating the narrative that China is contributing to global public health. At the Global Health Summit held on May 21, 2021, Xi announced that China would continue to support global solidarity against COVID-19. He also promised that China would provide an additional 3 billion U.S. dollars in international aid over the next three years to support COVID-19 response and economic and social recovery in other developing countries (Xi, 2021).

At the same time, the CCP is stepping up its sharp criticism of the US – its response to the pandemic and its attempts to blame China for its predicament. Washington officials, including former president Donald Trump and his Secretary of State Mike Pompeo, pushed the narrative that the “Chinese virus” originated in a Wuhan laboratory. This stance has to some extent been adopted by the Biden administration. For instance, Biden has ordered intelligence officials to “redouble” efforts to investigate the origins of COVID-19, including the theory that it came from a laboratory in China (BBC, 2021).

Beijing has endlessly blamed the US for using that rhetoric. Hua Chunying said on May 7, 2020, “We urge the US to stop spreading disinformation and misleading the international community. It should reflect on its own problems and work hard to bring its own epidemic situation under control. It is high time that it gave up the blame-dumping trick.” (Hua, 2020). Regarding the statement that “some in the US are prompting the WHO to conduct a phase two investigation of COVID-19 origins targeting China” at the press conference on July 9, 2021, Wang Wenbin responded that “the overall situation of COVID-19 epidemics is increasingly pointing to multiple origins in multiple places. The mayor of Belleville, New Jersey, who has tested positive for coronavirus antibodies, said he was sick with the virus in November 2019, over two months earlier than the first confirmed case in the US and also earlier than the first case reported in China...The international community should reject all acts of political manipulation on origin-tracing, follow the WHO joint team’s suggestion and
conduct origin-tracing in multiple countries and regions to ensure effective prevention and preparedness in the face of future pandemics” (Wang, 2021).

Back in early 2020, while Trump continued to confound Americans and the world with his erratic handling of the pandemic, Xi was engaged in “friendship expansion” through “telephone diplomacy”. According to the Chinese Ministry of Foreign Affairs, under the most critical circumstances in China, Xi held telephone meetings with other heads of state or government and UN officials 12 times in February, 11 times in March, 16 times in April in order to ensure the nation’s reputation and credibility.

Major-power diplomacy will see China increasingly taking advantage of the pandemic to try to engage in standard-setting and rulemaking for global governance. “China’s signature strength, efficiency, and speed in this fight has been widely acclaimed”, Foreign Ministry spokesman Zhao Lijian declared at a press conference on March 5, 2020. “China set a new standard for the global efforts against the epidemic” (Zhao, 2020). In Xi’s words, it was now time for China to embrace “big country diplomacy”. And in remarks before the Politburo, Xi argued that he planned to “make China’s voice heard, and inject more Chinese elements into international rules”. Xi, more than any other post-revolutionary leader, staked the Communist Party’s legitimacy on its ability to reclaim a leadership role on the global stage (Economy, 2018, p. 190).

**INSTEAD OF CONCLUSION: PROSPECTS ON COVID POLITICS**

Since Biden took office in January 2021, the United States, as well as other Western countries, have increasingly and collectively conducted stronger and tougher policies toward China in arenas such as human rights issues in Hong Kong and Xinjiang.

For example, at the G7 summit held in the UK in June 2021, the communiqué released by the leaders criticized China’s assertive and repressive policies over Hong Kong and Xinjiang and reaffirmed their opposition to trade-distorting market abuses by the Chinese. The statement mentioned Taiwan for the first time. The statement mentioned Taiwan for the first time. However, under the current circumstances, the
CCP leadership has been most concerned about whether the G7 leaders were pursuing responsibilities originating from the origins of COVID-19 toward China.\(^9\) The communique noted: “we also call for a timely, transparent, expert-led, and science-based WHO-convened Phase 2 COVID-19 origins study including, as recommended by the experts’ report, in China”. (Carbis Bay G7 Summit Communique, 2021). The CCP was closely watching how the leaders linked China with COVID-19.

The CCP under Xi’s leadership and consolidated power foundation will continue to be highly cautious on the COVID-19 origin issue, oppose and reject any suspicion and criticisms of its responses and management. The issue will continue to be one of the most politically sensitive issues in the relationship between China and the West, particularly in the era of the US-China strategic rivalry. The Sino-American comprehensive competition will probably be the most significant geopolitical factor in international affairs for the next decade and beyond (Shambaugh, 2016, p.155).

Besides, the CCP will be extraordinarily concerned if the West unitedly boycotts attending the Beijing Winter Olympic Games, which will be held in February 2022, partly due to their complaints about China’s state responses to the outbreak and spread of COVID-19. If this scenario becomes a reality, the CCP’s legitimacy both in domestic and international society might be in trouble. At the same time, this might even undermine the processes and consequences of the 20\(^{th}\) Party Congress, scheduled for fall 2022 as one of the most important political events in recent years, and beyond.

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\(^9\) Several government officials who are in charge of external relations, public security, trade, and commerce revealed that in the interview with the author in June 2021.


INTERNATIONAL STUDENT MOBILITY 
AND COVID-19 STUDENTS’ EXPERIENCES: 
THE RESPONSES OF HOST INSTITUTIONS AND COUNTRIES 

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Gábor Dobos² 
Kitti Köves³ 
Zsuzsa M. Császár⁴

Abstract: The COVID-19 epidemic has brought unprecedented challenges for international students and their host institutions and countries as well. This study focuses on two main areas: the international students’ experiences during the pandemic and the measures that host universities and national governments and scholarship agencies have taken. Firstly, the study provides an overview of international student mobility and its current tendencies, including Hungarian trends. Afterwards, we analyse the available reports and statistics related to the pandemic’s impact on international student mobility in the major host countries and examine the policies introduced on national and institutional levels. By comparing the main host countries’ measures and their impacts on international student mobility, we could identify good practices regarding handling the pandemic situation in relation to student mobility. The empirical part of the research was conducted in Hungary among degree-seeking international students. Following March 2020, the transition to distance education and further health safety rules significantly influenced international students’ studies and experiences. The
The main aim of the research was to explore the opinions and experiences of international students studying with scholarships in Hungary in connection with being an international student during the epidemic. The research results provide insight into students’ digital and IT preparedness; student experiences during a pandemic; participation in distance education, learning experiences; and student services provided by universities. The importance of this study lies in the fact that international students’ experiences serve as feedback for host universities and countries; it evaluates the executed measures and provides recommendations for further adjustments.

Keywords: COVID-19, international students, experiences, response, impacts

INTRODUCTION

The pandemic suddenly affected all aspects of life in our globalized world. From one way to the next, the long supply chains were disrupted, air traffic was shut down, cross-border travel restrictions and curfew were introduced in many countries, and the educational institutions were closed, teaching and learning moved to the virtual space. Naturally, these caused an immediate effect on the internationalization of higher education, breaking the long-lasting trends and facing challenges all stakeholders, including universities, students, academics, staff, policymakers and supporting agencies. COVID-19 has impacted not just the physical mobility of international students and the universities’ sudden switch to distance education but also the higher education institutions’ research activities (HEIs). It caused restrictions on international researchers’ mobility, the closures of labs, the postponement or cancellation of scientific conferences, slowed down international collaborations and endangered the completion of scientific projects. However, we can consider as a positive aspect the involvement of HEIs in the research of COVID-19 and its impacts. Many universities played and still play an important role in finding solutions in various affected areas. Accordingly, this study focuses on a specific aspect, namely the international students’ situation in Hungary during the pandemic.

In Hungary, universities suddenly moved to distance education in the middle of March 2020. The switch to online learning significantly influenced higher education institutions. The transition was unprecedented and unexpected; the digital preparedness of higher education institutions, teachers, and students was not adequate. However, the various online platforms were well-known in Hungarian universities; their use was not commonly used and instead connected to each teacher’s work or study program. It is also important to highlight that most international students had not participated in distance or online learning before the transition.
TRENDS IN INTERNATIONAL STUDENT MOBILITY
IN THE LAST TWO DECADES

Recent data of UNESCO shows the number of international students doubled between 2001 and 2018, increasing from 2.1 billion to 5.5 billion (UIS, 2021). The trend is obvious although there have already been some predictions that the annual average increase of 5.5 per cent of the last decade will not be sustainable. The British Council warned the increase would decrease to a 1.7 per cent growth due to the enormous capacity-building efforts in the field of education of India and China. The OECD analysis also showed a common misunderstanding about the stable increase in international students’ mobility. The growth rate is actually quite hectic, and in 2004 and 2012 it did not even reach 2 per cent (1.6 and 1.7), while it exceeded 12 per cent (12.8) in 2002.

Figure 1. Number and annual growth rate of international students

Source: UNESCO, data downloaded 20.05.2021

Although data also show that the main engines of growth are still China and India, there have been changes in the top ten sending and hosting countries. While the US, the UK and Australia remained the first three hosting countries, their market share decreased by 7 per cent. Germany, France, Canada, Japan, and China kept their positions, and only one new country joined. Turkey rose into the top ten, replacing Malaysia. However, the positions remained largely intact despite a 5% decrease in market share between 2014 and 2018.
### Table 1. Top ten hosting countries and their share of international students

<table>
<thead>
<tr>
<th>Host countries 2014</th>
<th>Number</th>
<th>Share</th>
<th>Host countries 2018</th>
<th>Number</th>
<th>Share</th>
</tr>
</thead>
<tbody>
<tr>
<td>USA</td>
<td>842,384</td>
<td>22.3%</td>
<td>USA</td>
<td>987,313</td>
<td>26.1%</td>
</tr>
<tr>
<td>UK</td>
<td>428,724</td>
<td>11.4%</td>
<td>UK</td>
<td>452,079</td>
<td>12.0%</td>
</tr>
<tr>
<td>Australia</td>
<td>266,048</td>
<td>7.0%</td>
<td>Australia</td>
<td>444,514</td>
<td>11.8%</td>
</tr>
<tr>
<td>France</td>
<td>235,123</td>
<td>6.2%</td>
<td>Germany</td>
<td>311,738</td>
<td>8.3%</td>
</tr>
<tr>
<td>Russia</td>
<td>213,347</td>
<td>5.6%</td>
<td>Russia</td>
<td>262,416</td>
<td>6.9%</td>
</tr>
<tr>
<td>Germany</td>
<td>210,542</td>
<td>5.6%</td>
<td>France</td>
<td>229,623</td>
<td>6.1%</td>
</tr>
<tr>
<td>Canada</td>
<td>164,274</td>
<td>4.3%</td>
<td>Canada</td>
<td>224,548</td>
<td>5.9%</td>
</tr>
<tr>
<td>Japan</td>
<td>132,685</td>
<td>3.5%</td>
<td>Japan</td>
<td>182,748</td>
<td>4.8%</td>
</tr>
<tr>
<td>China</td>
<td>108,217</td>
<td>2.9%</td>
<td>China</td>
<td>178,271</td>
<td>4.7%</td>
</tr>
<tr>
<td>Malaysia</td>
<td>99,648</td>
<td>2.6%</td>
<td>Turkey</td>
<td>125,138</td>
<td>3.3%</td>
</tr>
<tr>
<td>TOP10 sum 2014</td>
<td>2,700,992</td>
<td>71.5%</td>
<td>TOP10 sum 2018</td>
<td>3,398,388</td>
<td>90.0%</td>
</tr>
<tr>
<td>All international</td>
<td>3,776,751</td>
<td></td>
<td>All international</td>
<td>5,571,402</td>
<td></td>
</tr>
</tbody>
</table>

*Source: UNESCO*
Compared to the hosting countries, there were significant changes among the sending ones. Again, the top two countries (India, China) remained unchanged. Nigeria and Malaysia lost their positions against Vietnam and Nepal. Also, there is an interesting trend that all the bigger hosting countries have managed to increase the number of international students. There are two sending states (Saudi Arabia and Korea) where a substantial decrease or only a slight increase (Germany) can be seen.

These findings show that international students have become increasingly diverse, and they study in more and more countries. On a regional level, the same data also indicate that the two winners of this diversification are Australia and Central and Eastern Europe. The share of international students increased by 2.6%.
per cent in the first region and by 0.94 in the second, while Western Europe and North America experienced a major loss (-2.38), and the Arab and Sub-Saharan states experienced a slight decrease (-0.6) in their market share.

Similarly to global trends, there has been a stable and continuous increase in the number of international students in Hungarian higher education since the millennium (Figure 2.). In 2001, the number of international students was 11,783, and it has increased by 326 per cent in almost two decades. The current population (38,422) is almost as large as the whole student population of two bigger Hungarian universities. The increase in the annual progress rate itself is also considerable. The 3.4 per cent of growth in 2000 increased to 13.4 per cent by 2019. The expansion has been continuous since 2005 thanks to, among other factors, European integration, the Bologna Process, national policies and initiatives (Stipendium Hungaricum program, “Eastern and Southern Opening” policy towards Asian and African countries), and the active engagement of the Hungarian higher education institutions in promoting the country in the global market.

Besides the dynamic growth of the international student population, the number of sending countries is increasing as well. As a combined effect of these developments, Hungary has become an increasingly significant study destination in Europe among international students. (Figure 2.)

Regarding the potential 200 sending countries (193 independent, 4 associated, 8 ‘de facto’, and 3 states with disputed sovereignty), Hungary had students from 152 countries in 2013/14, from 160 countries in 2016/17, and from 164 countries in 2017/18. The distribution of international students by country follows the population of the sending state. Countries with a large population (app. 100+ billion) evidently have greater international student numbers globally and in Hungary as well. Some of them are developed countries like Germany, the US, Japan, and the Republic of Korea. The share of international students from less developed or developing states like Nigeria, Turkey, China, and Iran is influenced by other driving forces: development policies and the lack of or insufficient capacities. In Hungary, there is a special group of foreign students. They are from neighbouring countries and the Hungarian ethnic minorities. They study in Hungarian and are financed by the Hungarian government. Therefore, this analysis does not include them.
International Organizations and States’ Response to Covid-19

RESEARCH BACKGROUND AND INTERNATIONAL EXPERIENCES

In 2020, the outbreak of the COVID-19 pandemic brought unprecedented challenges in all areas of life, which had a major impact on higher education institutions and international mobility. Universities have been forced to introduce distance learning and other innovative, hybrid methods to provide education. Based on a survey of the International Association of Universities (IAU) conducted in 109 countries among 424 HEIs, 59% of them stopped all campus activities in person in March-April 2020. In the developed regions (America, Europe, Asia & Pacific), it meant a switch to distance teaching and learning, while in Africa, it led to the suspension (43%) or cancellation (24%) of teaching for the spring academic period (Marinoni et al., 2020). The sudden shift from face-to-face to distance education raised issues such as the preparedness of the teaching staff (IT competence and different pedagogical methods for online teaching), the matter of access for students (available steady internet connection and hardware), and also their coping ability with the new circumstances (isolation, online learning).

When discussing the pandemic-related measures influencing international student mobility, we need to distinguish measures introduced by the governments and by HEIs. Generally speaking, government measures are universal, and they affect
the lives of all people in the country. In the case of this pandemic situation, these meant border control, national or local lockdown, curfew, non-essential shop closing, shift to online education and home office, and various health safety rules such as quarantine, social distancing, mask-wearing, etc. Border control and quarantine measures primarily influence the arrival of incoming, future international students, while the listed further measures affect the study and living abroad experiences of those who have already started their mobility program. Governmental support concerning higher education and student mobility varies by country. The most common one is related to the completion of the academic year by prolonging the study period, extending the validity of resident permits, and students’ cards; direct financial assistance for HEIs or students was a less typical form of support (Marinoni et al., 2020). Six EU member states reported they were able to provide financial help to disadvantaged international students, and there are examples from Japan, New Zealand, and some regions in Australia (European Migration Network, 2020).

Student mobility became significantly affected by health protection measures related to country closures and entry restrictions. Currently available data show different situations in the larger host countries regarding the change in international students’ numbers due to the COVID-19 epidemic as the 2020 fall academic year has begun. The British were able to increase the number of their international students despite the pandemic; the number of students admitted from outside the EU increased by 9 per cent. However, EU students’ numbers mainly declined because of another factor, namely Brexit (UCAS, 2020). The German Academic Exchange Service (DAAD) reports that the overall number of international students increased last year in Germany, although there was a 20 per cent drop in first-year students from abroad last summer semester. International students who wished to study in Germany had to deal with a strict visa policy, which caused many of them not to be able to enter the country despite having been admitted (DAAD, 2021). Other host countries were less fortunate. A significant decrease in the number of international students was reported in the United States, a 43 per cent decline among first-year international students and a 16 per cent decrease in international students’ total number (Baer & Martel, 2020). In Australia, the number of enrolled international students fell by 12 per cent between March and October 2020 (Hurley, 2020), and Canada experienced a year-on-year drop of 17 per cent in international student enrolment based on the data of the Canadian Bureau for International Education.

As a service provider, HEIs were and continuously are the main respondents for taking care of those international students, who were already on-site when the health risks arose by giving them up-to-date information on the local development of the pandemic and the introduced health safety measures, also by delivering technical (IT devices and software), financial, mental, and health care support and
helping them return home. HEIs play a central role in communication and sharing information with international students. By collaborating with other universities and national authorities (education, immigration, health), they are able to gather all the information students need and also to represent their interests and report major issues which require actions from the higher level of administration.

Studies are emphasizing the vulnerability of international students during COVID-19. These young adults are living far away from home and facing unseen challenges caused by the pandemic: limited access to information in English, the lack of proper health insurance, the lack of financial and mental support, issues with housing and returning home, and even racial discrimination in the case of Asian and Italian students (Bilecen, 2020; Firang, 2020; Morris et al., 2020). An early report from Erasmus Student Network (ESN) examined the health effects and hardships international students suffered from and found that 41.2% of the respondents experienced anxiety and stress to a great or very great extent. Similarly, 20.8% experienced feelings of isolation and social exclusion (Gabriels & Benke-Aberg, 2020).

At the same time, universities had to face various challenges regarding the recruitment of future students. Traditional education fairs were cancelled, and prospective students became uncertain regarding their mobility. In spring 2020, reports were carried out on the attitude changes of students who originally intended to study abroad, but the COVID-19 outbreak significantly influenced their study plans. For example, Studyportal found that the majority of their questionnaire respondents think that the virus outbreak is likely (31%) and very likely (33%) to affect their studies. Students’ major concerns were the possible travel restrictions, changes in their families’ financial situation, and the inability to take part in exams required for university application (Studyportal, 2020). The Quacquarelli Symonds (QS) did a similar thing among prospective international students. They reported that nearly half of the respondents decided to postpone their enrollment, 6-9% intended to study in a different country, 4-9% gave up on studying abroad, and 32-44% indicated other options without further explanations. However, these could include enrollment in an online course or the choice of a domestic university instead (QS, 2020).

RESEARCH GOALS, METHOD AND LIMITATIONS

The research aims to explore the experiences and opinions of international students on distance education and student life during the first wave of the pandemic. Besides, the survey aims to analyse what difficulties international students faced, how the pandemic affected teaching and learning, and what kind of support services universities provided. Following the pandemic outbreak, a multitude of studies have been published on the immediate and short-term impact of the pandemic on higher education.
of the COVID-19 pandemic on higher education institutions and students (Farnell et al., 2021). In addition, several surveys have examined the effect on teaching and learning, the social dimension of higher education, international student mobility, as well as system- and institutional-level changes, and more studies have focused on the transition, switch to distance learning at universities (Erasmus Student Network, 2020; Hargitai, Sasné Grósz, & Veres, 2020; Marinoni, van’t Land, & Jensen, 2020; Farnell et al., 2021).

The research applied a quantitative method using an online questionnaire sent to international students studying in Hungary. Drawing upon more studies carried out in 2020 by university networks, student organizations and researchers (HÖOK, 2020; ESN, 2020; QS, 2020), the online questionnaire consists of the following main parts:

- the social and educational background of international students,
- satisfaction with higher education institutions and various services provided by universities and other organizations,
- students’ opinions about the various systematic and institutional factors related to the pandemic and distance education.

The data collection was achieved during the first wave of the pandemic. The international students could respond in June and July 2020. By this date, international students had experienced several months of distance education and a quarantine period. As data analysis tools, descriptive and explanatory methods were applied.

Regarding the population, the target group was the group of international students studying in Hungary in the framework of the Stipendium Hungaricum (SH) program. In the academic year of 2020/2021, the total number of 9,046 degree-seeking SH students studied in Hungary: nearly 40 per cent in undergraduate programs, 43 per cent at master level, and 17 per cent at the doctoral level; the rate of Stipendium Hungaricum students compared to the overall number of international students is 28 per cent. The online questionnaire was sent to all SH students. Due to the high response rate, 7,994 respondents were included in the sample after data cleansing.

| Table 3. The main indicators related to the educational and social background of the target group |
|--------------------------------------------------|--------------------------------------------------|
| Sample   | Population (2019/2020) |
| Female   | 3,501 | 44% | 3,828 | 42% |
| Male     | 4,493 | 56% | 5,207 | 58% |
| Total    | 7,994 | 100%| 9,035 | 100% |
Regarding the regional composition of the total sample, the majority of responding students, nearly 30 per cent came from West Asian countries, and the proportions of East Asian and South Asian students were significant. Table 3 shows the connection between the population and sample; a balanced sample allows for a reliable exploration of different perspectives and questions, and general conclusions can be drawn based on the results.

**Table 4. International students by sending regions (N=7,994)**

<table>
<thead>
<tr>
<th>Sending regions</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Asia</td>
<td>29%</td>
</tr>
<tr>
<td>Eastern Asia</td>
<td>12%</td>
</tr>
<tr>
<td>Southern Asia</td>
<td>11%</td>
</tr>
<tr>
<td>Northern Africa</td>
<td>10%</td>
</tr>
<tr>
<td>South-eastern Asia</td>
<td>8%</td>
</tr>
<tr>
<td>Central Asia</td>
<td>6%</td>
</tr>
<tr>
<td>South America</td>
<td>5%</td>
</tr>
<tr>
<td>Eastern Europe</td>
<td>4%</td>
</tr>
<tr>
<td>Eastern Africa</td>
<td>4%</td>
</tr>
<tr>
<td>Southern Europe</td>
<td>4%</td>
</tr>
</tbody>
</table>
Some limitations of this study should be mentioned as well. The survey analysed the immediate impact of the pandemic and did not assess the short- and medium-term impact. Therefore, the changes of the next academic years have to be continuously examined. Furthermore, since the sample selected for the survey was specifically degree-seeking students who were studying in Hungary with the support of SH scholarship, the results may not be applicable to short-term mobility and self-financed international students. The study examined the impact from the student perspective only. Therefore, the experiences of teaching staff should also be involved to get a more accurate picture.

**RESEARCH RESULTS**

*International students’ digital background for online learning*

During the first wave of the pandemic, students’ digital competency was an actual and critical issue, and the main topic of more international and Hungarian studies (Hargitai, Sasné Grósz, & Veres, 2020; ESN, 2020). The studies focusing on the Hungarian context examined the workload of teachers and students during the pandemic, students’ learning experiences, and changes in students’ lives (Hargitai, Sasné Grósz, & Veres, 2020). The related studies also proved that the workload of teachers and students had increased, and they spent more time learning and teaching than before the pandemic outbreak. The reports have drawn attention to the importance of self-regulated learning and the development of teachers and students’ digital competencies.

Regarding the digital background, the following dimensions were analysed:

- the quality of IT tools, internet access;
- the use of learning management and video-communication platforms;
- creating a dedicated learning and workspace.

<table>
<thead>
<tr>
<th>Sending regions</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Africa</td>
<td>3%</td>
</tr>
<tr>
<td>Southern Africa</td>
<td>2%</td>
</tr>
<tr>
<td>Central America</td>
<td>1%</td>
</tr>
<tr>
<td>Middle Africa</td>
<td>1%</td>
</tr>
</tbody>
</table>
Quality IT gadgets and adequate internet access were the most critical conditions for learning during the pandemic. As regards IT tools, the laptop and smartphones were the most commonly used learning tools. Nearly 95% of international students said they had a laptop. However, 41% said they used it for distance learning. Regarding smartphones, 92 per cent owned the tool, and 36 per cent of international students used their smartphones for distance education. These results indicate that access to online learning tools was not a challenge. However, it is critical to examine the quality of the various tools. The results show that though many international students had their own IT tools, only a small percentage of them used these gadgets for online learning. The survey also examined the question of internet access. Thirty-three percent of students reported slow and limited internet access; however, only a small percentage of students were unable to access the internet, and sixty percent had good quality internet.

In most Hungarian higher education institutions, online platforms had been widely known before the switch to distance education, but they had not been integrated into everyday teaching practice. Higher education institutions could recommend what learning management and video communication platforms were used for distance education during the first wave. The most commonly applied platforms were Microsoft Teams (56%), Zoom (47%), Skype (36%), Neptun E-learning (35%), and Moodle (31%). International students can quickly learn to use these platforms; nearly 8 per cent considered that they had difficulties using them.

The pandemic has negatively affected students’ access and study progress and strengthened the various forms of inequality. Specifically, the switch to distance learning is likely to make digital inequalities more visible. Therefore, it is crucial to analyse the students’ digital competencies and skills and create a designated learning space at their residence. Nearly 21 per cent of international students evaluated that they had had difficulties creating the learning and workspace, so they had not had quiet, adequate learning space for distance education. Another dimension of this question is that due to the closing of dormitories, hostels and problems with paying for rented flats or rooms, 10 per cent of respondents had difficulties with their accommodation or had to find alternative accommodation arrangements.

The impact of the pandemic on teaching and learning

The pandemic has also greatly affected the learning environment, teaching methods, and learning content. The research examined these changes in learning and teaching, which can be well assessed from international students’ perspectives.
The pandemic had a significant impact on international students’ studies. On average, 63 per cent of international students considered that the pandemic significantly influenced their studies, 18 per cent said that their studies were not affected or affected to a lesser extent, and only 19 per cent evaluated this change as moderate.

Regarding fields of education, there is a significant correlation between the study field and the evaluation. Perhaps unsurprisingly, international students studying Computer Science evaluated that the pandemic had not affected their studies at all or even not moderately. In contrast, only a small proportion of international students in the Medical and Health Sciences and Teacher Training programs felt that the pandemic had not affected their studies. Besides the specificities of fields of education, the structure of study programs can be identified as a cause. In practice-oriented courses, the change was more noticeable due to the closure of campuses and places of internships. Thus, the switch to online learning was more difficult in the field of education with practical elements.

*Figure 3. In your view, how has the pandemic been affecting your studies this semester? (N=6,570, p<0.05)*

Several studies have also confirmed that students reported an increased workload during distance education (Farnell et al., 2021). According to the survey, nearly 41 per cent of international students have spent more time, and 34 per cent spend the same amount of time on learning as before the switch to distance learning. Conversely, a smaller proportion of international students, nearly 26 per cent, responded that they spent less time on learning than before the pandemic outbreak.
Several causes and factors can lead to a change in workload. One of the contributing causes, for example, is the study level at which students were studying. Most master students reported having a larger workload since the transition to distance education. The undergraduate students show a similar picture to master students; the rate of respondents with the increased workload is high, nearly 42 per cent.

In contrast, the change in workload shows a different picture in the case of doctoral students. Most of them assessed that their workload had not changed, and they spent as much time as before the period of distance education. The structure of research-focused doctoral programs can explain this tendency. The data reflect well the two phases (doctoral course and degree award procedure) of the PhD programs (Eurydice, 2021). The doctoral students who started their studies between 2017 and 2018 and might not start the degree award procedure responded that their workload had increased during the pandemic.

**Table 5.** Has your time spent on learning changed during the period of distance education? (N=7,994)

<table>
<thead>
<tr>
<th>Has your time spent on learning changed during the period of distance education?</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>It has not changed, I spent as much time as before the period of distance education</td>
<td>2,701</td>
<td>34%</td>
</tr>
<tr>
<td>Yes, I spent less time on learning.</td>
<td>2,045</td>
<td>26%</td>
</tr>
<tr>
<td>Yes, I spent more time on learning</td>
<td>3,248</td>
<td>41%</td>
</tr>
</tbody>
</table>

**Table 6.** Changes in workload by study levels (N=7,568, p<0.05)

<table>
<thead>
<tr>
<th>Has your time spent on learning changed during the period of distance education?</th>
<th>Less time</th>
<th>As much time as before</th>
<th>More time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undergraduate students</td>
<td>26%</td>
<td>32%</td>
<td>42%</td>
</tr>
<tr>
<td>Master students</td>
<td>24%</td>
<td>34%</td>
<td>43%</td>
</tr>
<tr>
<td>PhD/DLA students</td>
<td>28%</td>
<td>39%</td>
<td>34%</td>
</tr>
</tbody>
</table>
As regards the reasons for the change, international students elaborated in an open question why their workload had changed. The students with a larger workload reported that the new learning expectations and adapting to a new learning environment required them to invest more energy and time into learning. Overall, international students stressed the importance of adaptation skills. It is also an essential factor that the students with increased workload evaluated their learning achievement higher (based on self-evaluation) than their fellow students—so, presumably, the driver for higher academic achievement is also a significant motivational factor for online learning.

Comparatively, the international students who spent less time on learning highlighted the obstacles of adaptation in their responses. These students were more likely to have difficulty creating the designated workspace and time management in the first wave of the pandemic. It is also important to mention that self-directed learning was also a challenge for these students; therefore, learning skills need to be improved. Students who struggled to stay motivated and focused spent less time learning.

**The immediate impact on student life**

Students’ extracurricular activities, such as attending professional and sports clubs, are essential parts of student life at universities. A university is a place for building a social network, which is decisive not only during university life but also in the later stages of graduates’ career, for instance, in the labour market. These activities and related student services are also important for international students’ integration into the university and academic life. Student experiences are also significant in study progress. Recognizing the importance of these factors and student satisfaction with various university services due to quality management, universities have invested a lot in organizing multiple forms of extracurricular activities and student services (Scott, 2020).

The research explores what unprecedented and serious risks international students encountered during the pandemic and what kind of support services universities and other organizations have provided. Regarding the mental and psychological well-being of international students, sixty-five per cent of international students experienced stress and anxiety, but almost half of all students reported feeling alone throughout the quarantine. During the first wave, a high percentage of international students (nearly 60%) had difficulty travelling home, and more students reported losing their jobs or having difficulty finding alternate accommodation due to the closure of dormitories.
Access to basic needs
Universities supported international students in several areas but focused their resources mainly on services for online teaching. Eighty-eight per cent of international students received academic support (e.g., sharing online learning materials). In contrast, the proportion of those who received mental and psychological counselling (23%) or even language (e.g., translation of information) support (17%) was much lower. Consistently, this may also mean less demand for these services from students. Still, it may indicate that higher education institutions were not ready to implement these services in an online environment. Recently, however, it can be seen that the institutions, recognizing the importance of these services during the period of distance education, have tried to improve this service.

**CONCLUSIONS**

The tendencies of international student mobility are under continuous slow changes, which have accelerated with the global health crisis. Following the pandemic outbreak, health safety became a crucial issue. Moreover, COVID-19 had significant economic and geopolitical impacts. Although health-related measures were introduced relatively quickly, the effects of fast digitalization and the switch to distant education on students and their mobility are still hard to see; the research on the topic has just started.

**Table 7. Challenges and risks during the pandemic (N=7,994)**

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anxiety, stress</td>
<td>65%</td>
</tr>
<tr>
<td>Cancelling travel plans to the home country (flight, train, etc.)</td>
<td>61%</td>
</tr>
<tr>
<td>Isolation, loneliness</td>
<td>51%</td>
</tr>
<tr>
<td>Discrimination</td>
<td>21%</td>
</tr>
<tr>
<td>Losing the job</td>
<td>16%</td>
</tr>
<tr>
<td>Lack of health care</td>
<td>13%</td>
</tr>
<tr>
<td>Housing/Accommodation was cancelled</td>
<td>10%</td>
</tr>
</tbody>
</table>
The impact of the epidemic on higher education has been the subject of several recent studies. This research has sought to take a snapshot and capture the short-term effects, but some of the results will hopefully go beyond this and provide conclusions that can be used in the medium to longer term. In accordance with other studies (ESN, 2020), this research confirmed that COVID-19 and the shift to distance education had a decisive impact on the studies of international students. However, experiences of distance education are varied, for which a number of reasons can be identified. Some of the reasons are institutional, such as the institutional management of the transition to distance education or the attitude of teachers during the first wave of the pandemic.

In addition to these, there are also structural reasons stemming from the students’ social and educational backgrounds. The individual’s self-evaluation and drive to learn, for example, were decisive. Likewise, the individual’s ability to manage time was also a determining factor in the transition to distance learning. It can also be seen that the ability to learn independently is of paramount importance in online learning, which was not at an adequate level for many international students; this required and expected the use of new learning support-tools from the instructors.

Being a student abroad also brought some uncertainties and difficulties: most students faced stress, isolation, and loneliness. Moreover, with the move to online education, the student experience became more limited, impacting their learning and progress. At the same time, some essential services such as psychological support were insufficiently provided by a few institutions in the first wave of the epidemic.

These issues should be addressed primarily by the host institutions. Unquestionably, most universities’ human and financial resources are limited. However, some actions do not require much effort or investment, but they mean great help or comfort for international students. Each HEIs situation is unique and somewhat different. Hence, based on some common good practices and their capacities, they need to formulate their specific answers for these challenges. This study aimed to detect the most common, major impacts of COVID-19 experienced by international students. By identifying these main issues, host universities and countries have a better understanding of how to take action.

REFERENCES


THE MANAGEMENT OF THE COVID-19 CRISIS
BY THE FRENCH AUTHORITIES

Alexis Troude1

Abstract: The health crisis is indicative of France’s delays in the health field. The
government has not been able to buy enough masks, nor has it been able to
stimulate a national mask industry as in Serbia. Then, the decontamination in the
summer of 2020 was done without any medical measures, and the testing policy
was conducted without rules or isolation of the patients. Finally, even the battle of
vaccines was lost by France because the Institut Pasteur failed to create a vaccine,
although the laboratories AstraZeneca and Pfizer are led by the French! But this
health crisis has also revealed the French administrative burden. Based on a Jacobin
model, the French administration was very slow to grant the necessary permits:
masks, tests, vaccines. In addition, the measures were badly experienced because
they still concerned the entire national territory and made no distinction between
contaminated zone and green zone, fraudsters and the majority of French who
applied the measures. But all this has given rise to coercive measures that are
beginning to weigh on the psyche of the population but also on the fundamental
laws. In two weeks, the authorities distributed 177,000 fines, sometimes at 6:03
pm when leaving grocery stores. No public place (cafes, restaurants, theatres,
museums) has been open since September 2020, which has led to numerous
complaints from private actors before various courts. The health crisis has finally
revealed social and economic inequalities in France. Taking up a Marxist analysis,
the richest linked to globalization continued to travel, do business and take refuge
in telework in their secondary residence in the provinces, and the popular classes
continued to be supported by a state which suddenly became protective thanks
to a massive and unique system of partial unemployment in the world. Between
the two, the middle classes have been sacrificed, continue to go to work, use public
transport and undergo traffic restriction measures.

Keywords: health crisis, human rights, public freedoms, social inequalities, France.

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As a leading British periodical rightly wrote in March 2021, a year after the crisis began, “France is the only country that combines British-style curfews, German-style travel restrictions and Italian-style screening. He had forgotten that the French authorities had imposed a measure that was unique in the world: self-authorisation to travel, like an “ausweis” that everyone had to sign before leaving their homes for any reason whatsoever. However, after a year and a half of health crisis, the figures are overwhelming for the French health authorities: 111,000 deaths, 250 days of curfew, nearly 130 billion paid by the State for the partial unemployment scheme, 360,000 jobs lost, not to mention the staggering increase in suicides and depressions.

Even the usually mainstream intellectual Bernard Henry Lévy used the term “coronafolie” at the beginning of the crisis to describe both the fear propagated by the dominant media and the manipulation of this fear by the health authorities. But the world’s largest welfare state, which provides 15% of the world’s welfare for 1% of the world’s population, has been overtaken by events. In the first phase, the 6th industrial power no longer produced masks. Then, a policy of free tests, all over the place but in a haphazard way, did not reduce the contamination. Finally, Pasteur’s country was unable to produce a vaccine and had to rely on private Anglo-Saxon firms, which slowed down vaccination.

The French have fallen in the face of the repeated errors and failures of their state. They, who have had complete faith in the regal authorities since Louis XIV and Napoleon Bonaparte, will give much less credence to government measures that contribute to the authorities’ legitimacy crisis. The battles between experts and pseudo-scientists, relayed by a media system in search of sensationalism, have severely undermined confidence in medicine and, more broadly, in science. These cracks have serious medium- and long-term consequences for liberal democracies, which are based on a certain degree of public support for thinking heads and experts.

Can we fear a new economic and social crisis?

Has France ever experienced such a restriction of public freedoms in peacetime?

Will democracy remain the same after this health, political and social disaster?

**WHAT MISTAKES WERE MADE IN MANAGING THE HEALTH CRISIS THAT THEY DID NOT MAKE?**

From the very beginning of the health crisis, the negligence of the State and the administrative mille-feuille prevented any orderly and planned management of COVID-19.

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In the spring of 2020, France ran out of masks. Indeed, the stock of masks that, according to the Orsec mechanism, is required in the event of a pandemic or chemical attack no longer exists. President François Hollande ordered the destruction of the existing stock for cost reasons, arguing that since the H1N1 crisis, the management of this exorbitant stock has been too expensive. Now, we know that in January 2020, at the first signs of the pandemic by epidemiologists, Agnès Buzyn, Minister of Health, refuses to reconstitute one, even in a minor way. Is it because her husband, Yves Lévy, was President of Inserm (National Institute of Health and Medical Research)? Appointed State Councillor in November 2019, he had to study the texts proposed by his wife as Minister, which leaves doubt about a conflict of interest at the highest level of the State.

The government then tried to buy masks to replenish the stock, but with the reflexes of an omnipotent state. As a result, on the airport tarmac, it is Donald Trump’s emissary in person who snatches the deal by paying full price for a shipment! While the population is forced to endure the absence of masks, with the formal prohibition on doctors and pharmacists supplying or even selling them, the shortage is organized by the state. In order to hide these first serious errors in the management of the health crisis, experts explain, with pictures to support it, that for lack of sufficient knowledge, it is, in any case, recommended to people not to wear masks (Dutroux, 2020). Sibeth N’Diaye, Secretary of State, laughs in front of the camera when a journalist asks her if it is necessary to wear a mask, claiming: “it’s not necessary, it’s useless”. Entire sections of what the government has described as “frontline jobs” are unprotected against the virus: bus and metro drivers, maintenance workers, and caregivers (Deweter, 2020). Doctors and hospital staff have very few masks, leading to the unacceptable deaths of dozens of them during the first containment (March-April 2020).

The second negligence is displayed and proclaimed loudly and clearly by the governing bodies to refuse to treat the population. Medicines such as Plaquenil, Ivermectin and even Hydroxychloroquine were banned from use in France for the duration of the crisis. The official line, relayed by the Ordre des Médecins, was that these drugs could cause lesions worse than COVID-19. However, Hydroxychloroquine, a drug used for a long time in Africa against malaria and other types of viruses, taken in time at the first symptoms, can cure COVID-19. The best example of this is the institute run in Marseille by epidemiologist Didier Raoult (IHU Méditerranée) which, thanks to Hydroxychloroquine, treated 13,437 patients between February and September 2020. We also know that the wife of the French President, and even Donald Trump, were lucky enough to be treated with this drug to cure COVID-19. This brings us to the heart of the matter: in 2020, did a well-known, efficient and inexpensive treatment bother certain leaders who preferred to develop tests that
were much more costly for the community, or even by not using this treatment, would it not be an open door to the world’s major pharmaceutical laboratories, which could then find a vaccine that was much more profitable?

Finally, the third major failure of the French policy against COVID-19 lies in the tests. It was chosen, according to the sacrosanct idea of the French Welfare State, to carry out massive tests on the population in a random and non-coercive way, relying on the Social Security system to cover the costs. So, from September 2020, millions of free tests were offered, both to the French population and foreigners passing through. But as this testing campaign was carried out without constraint and without any regulatory framework, individuals were tested almost daily, without any symptoms of COVID-19, while patients were not required to undergo any tests. Worse still, with borders remaining open, according to the liberal credo assumed by President Macron, businessmen returning from Brazil, India, or the United States (countries with a high rate of contamination), as well as migrants from the four corners of the world, continued to enter the French territory without any testing or quarantine constraints until Christmas 2020. This haphazard and unrestricted testing policy did not affect the spread of the virus because, instead of forcing carriers into quarantine, they remained free to move around, even when they were declared infected with COVID-19.

The government decided on All Saints’ Day 2020 to carry out a large-scale screening campaign for people considered at risk: carers and teachers. Again, the lack of a clear objective and the administrations’ amateurism resulted in an impressive waste. Buses with self-tests, based on volunteers, were placed in front of some high schools and not others; in each high school, everyone was free to test or not (Savina, 2021).

As this campaign, which was intended to be national in scope, did not succeed, in the spring of 2021, the health authorities changed their focus and targeted a population hitherto little affected by the pandemic: young people. While time was running out and repeated failures were piling up, the ARS (Regional Health Agencies) thought that targeting the youngest would have a better chance of reducing the rate of contamination. It was a waste of time because the authorities were insufficient, but above all, between the time of the decision and the beginning of its application, the Easter and summer school holidays intervened, putting an end to the government’s desire to treat the population. Fortunately, these tests posed a problem of deontology: children were asked to test themselves, which posed a risk of injury (sinuses, brain) but also for teachers to improvise themselves as healers, decidedly without any training! (Murville, 2021).
While the French suffered three periods of hard confinement and were obliged either to remain locked up at home (March-April 2020) or prevented from moving more than one kilometre from their homes for a long time (October-November 2020), the external borders remained constantly open. Obeying the Europeanist ideology of borderlessness, the French territory was completely open to the rest of the world for one and a half years, favouring the circulation of the virus. Even when Indian undocumented migrants were quarantined in an annexe of Roissy airport, they were released after a week without being tested or treated, walking into Paris, at a time when the Indian variant was taking its toll in India.

The choice of freedom of movement for individuals, a purely ideological position and not a sanitary one, was a position of principle of the government based on the idea that the virus has no borders. This resulted in neither isolation of the sick nor quarantine; it was not until May 2021 that the first quarantines of travellers from India were issued, thirteen months after the start of the pandemic. At the same time, the French were subjected to a number of restrictive measures, in terms of human rights, unequalled in the world. First of all, an exit permit sheet that every citizen, whoever he or she may be, had to sign to leave their home. Since the beginning of the first confinement in March 2020 and until the end of April 2021, each exit, for professional, leisure, shopping, or family reasons, had to be justified by this self-authorization. Just like the “propiska”, the document required to travel from one region to another in the defunct USSR, the French found themselves in a situation where their freedom of movement was strongly controlled and limited, on pain of a 135 euros fine. As during the German occupation, the French had to have an “ausweis” and show a white coat to the police, who took great pleasure in carrying out these controls. This allowed the government to put a stop to all political and social protests. This measure put an end to the opposition movement to the pension reform of the winter of 2020-2021 (Bodin, 2021). More profoundly, the systemic crisis of the yellow waistcoats, a nationwide popular movement that had been going on since October 2018, ran out of steam in the face of these restrictions on freedom of movement never before experienced in France. This was all the more inefficient and unfair as businessmen continued to fly. As in the heyday of French cinema during the Second World War, the film industry was in full swing for a year and a half and media intellectuals continued to travel the world filming. Thus, in an interview given in June 2021, the charismatic Bernard Henry Lévy boasted that he had never been confined, having spent more than a year travelling to the main conflict zones to make his latest film “Another Idea of the World”: Afghanistan, Nigeria, and Ukraine.
As this did not seem to be enough, the government decided to impose a curfew for all citizens for 250 days, which was unique in the world during this entire crisis. Between 17 October 2020 and 20 June 2021, the French government imposed a curfew at 6 pm, then at 7 pm, then at 9 pm and finally at 11 pm (Sanchez). The medical effects have not been proven, but the political effects have. This maintained very strong social control, which is demonstrated by the fact that the curfew was completely lifted two weeks before the regional elections! Furthermore, these constant changes in rules and schedules have destabilized a population that is already deeply depressed as a result of the confinements: once again, the infringement of public liberties is combined with a grip on the minds that benefits the power in place. The icing on the cake: successive confinements, with draconian rules forbidding movement beyond a certain perimeter, completed the task of marking the population and definitively eliminating any rule of public freedom.

The first lockdown in March-April 2020 prevented the French from moving more than one kilometre from their homes. This was justified by the authorities by the lack of hospital beds and the pressure on the emergency services. But a year and a half later and three confinements, the government has maintained a very low level of beds (5000) and has not created any intensive care beds; Olivier Véran, Minister of Health, has even suppressed 1863 intensive care beds over the same period (Dupont, 2021). So, the goal was elsewhere. From the second containment in October-November 2020, then in February-March-April 2021, one could not move more than 10 km, then more than 100 km. These purely bureaucratic measures were supposed to restrict the circulation of the virus. Above all, they created a divide between citizens, as city dwellers were confined to areas where the virus was circulating strongly, with several people in a two-room apartment without a balcony, whereas a large part of the population could take refuge in their second home a few hours before the announced confinement (as Parisians did in Brittany).

A DEEP LONG-TERM ECONOMIC, SOCIAL AND HEALTH CRISIS

The “whatever it takes” policy introduced by President Macron in autumn 2020 is an economic and social fiasco. After a year and a half of the health crisis and more than 8 months of massive support to the economy, the balance sheet is as follows: 118% of debts, 454 billion spilt, 130 billion of direct aid to partial unemployment and supported sectors (restaurants, museums, conferences, and the congress sector). As a well-known politician put it, for a year and a half we have had the impression of witnessing an “organized strike” by the government (Wapler, 2021). Both to extinguish the fire of social discontent (yellow waistcoats and pension reform) and as a purely electoral measure (regional elections in June 2021,
presidential and legislative elections in April 2022), the government has decided to put a large part of the economic fabric on monitored rest. Teleworking, which was supposed to reduce the spread of the virus, has led millions of employees to stay at home for many months. In the civil service, the prefectures, which are supposed to welcome citizens as a public service, closed their offices. Ironically, while the French people found the doors to their administrative offices closed (gates closed with padlocks), the migrants waiting for their papers to be regularized were received in due form! Some post offices, due to a lack of staff, opened in the morning or in the afternoon, with opening hours changing almost daily. But more generally, the advent of telework, in addition to the changes within the company that it has brought about (social distancing, closed offices, direction of traffic in the corridors), has profoundly changed production methods. The Gafa giants have seen their profits explode and their production units in France grow as the crisis has developed. The giant Amazon has hired 100,000 people and opened new units over the period from October 2020 to January 2021 to meet the end-of-year holiday purchases.

In fact, only the first- and second-line workers really ensured their services during the three periods of containment. True heroes because of their constant work and daily contact with the pandemic, bus and metro drivers, cleaners, and hospital staff were the spearhead of the economy. With no real protection at the beginning and always in a fragile position, they kept the services afloat. In the second line, teachers maintained the continuity of public services and ensured the sustainability of national education, allowing parents to do their work.

The health crisis thus profoundly transformed work habits and made society as a whole evolve. The habits formed as a result of the three confinements have had an impact on leisure activities. After a period of euphoria and relaxation, the French, who used to cook at home and fed on Netflix series, have deserted the terraces of cafés and restaurants and have not rushed to the theatre or cinema. Paris, the city of lights and the world capital of cinema and theatre, will never be Paris again: just look at the famous waiters desperately waiting for customers! It has already been decided that 30% of small cafés and restaurants will close. The aim is to maintain the chains and the big structures and to let the small establishments disappear. In the provinces, entire streets are already deserted with shops with closed curtains. In Paris, the Rue de Rivoli is a desert in the city centre (just a stone’s throw from the Elysée and the Louvre!).

We are witnessing a profound change in society in France. Following the second and third confinements, we have seen significant migratory movements from large metropolises to small and medium-sized towns. In the outskirts of these cities, the sale of houses with gardens has already jumped by 20% in one year.
The aim is to create a two-tier society. On the one hand, a majority of “workaholics” who work several jobs in order to pay taxes, charges, and multiple credits (residence, car, children’s education), at an increased risk of “burning out”; on the other hand, a growing mass of people who are helped, thanks to the largest social aid system in the world (1% of the population receives 15% of the social aid) and who receive (what is going to be applied very quickly) the universal income.

The social and health consequences of this crisis and the containment measures are very serious in the long term. France has already lost more than 111,000 of its citizens due to the lack of treatment/testing/vaccination. And while the fourth wave has not yet arrived, the Delta variant is already on its way. But more broadly, the systematic wearing of masks outside as well as in all public buildings from September 2020 to June 2021, as well as the self-authorisation and the three confinements with restrictions on movement, have created very strong and lasting psychic breaks in the population. Psychiatric services were overwhelmed during the whole period. A generalized depression took hold of the population as a whole and suicide attempts increased sharply among adolescents.

According to a British study, 34% of patients who contracted COVID-19 developed a neurological or psychiatric disorder within 6 months of infection (Campon, 2021).

CONCLUSION

The authorities have been consistently outmanoeuvred. Fabrice Di Vizio, a lawyer and leader of an association dedicated to the defence of bereaved families, has already called for the prosecution of various Ministers of Health. More broadly, the entire decision-making structure centred around the Regional Health Agencies and the Committees of Epidemiological Experts is being questioned and will be altered. Worse, while the health measures were justified by the need to avoid overcrowding the 5000 intensive care beds, we learnt at the end of June 2021 that Olivier Véran had withdrawn 1863 of these beds in the midst of the COVID-19 crisis, rather than expanding hospital capacity. Trust in epidemiological doctors or media experts who constantly change their minds (Martin Blachier) has been severely shaken.

But even more seriously, the liberticidal measures taken in the name of managing the health crisis deprived 67 million French people of their most basic freedoms for many months (freedom of movement and assembly). From January to June 2021, the government was able to rule the country by decree, with the parliament stripped of its legislative rights.
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BELARUS RESPONSE TO COVID-19:
POLITICAL AND ECONOMIC ISSUES

Asja Pentegova¹

Abstract: The coronavirus pandemic has clearly demonstrated the importance of regional cooperation and good neighbourliness. The initial politicization of the coronavirus topic is traced both in geopolitical and regional contexts. The “unique path” taken by Belarus faced severe criticism in spring 2020, while later non-lockdown strategies were adopted by many countries. In the wake of the global economic downturn, countries benefit from interregional economic cooperation and coordination in the framework of transnational logistics corridors. Austerity mode mobilizes the maximum possible efforts in the fight against the global pandemic and makes it rational to promote and share best practices. Strengthening humanitarian ties contributes to long-term cooperation and fuller implementation of the regional relations’ potential. The proportionate involvement of Belarus in such mechanisms seems to be no-alternative and inevitable.

Keywords: Belarus, coronavirus pandemic, Europe, foreign policy, economic contacts, national interests, health system.

INTRODUCTION

The coronavirus pandemic has clearly demonstrated to the world community the importance of regional cooperation, good neighbourliness and mutual assistance in elaborating coordinated mechanisms to contain the spread of infection.

The pandemic and the systemic response to it have intensified the ongoing shifts in the global distribution of power. The international response to the pandemic has shown the lack of multinational cooperation, the relative ineffectiveness of multilateral organizations, and the tendency of states tackling the pandemic to pursue their own interests (Hrabina, 2021, 174).

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The coronavirus factor has catalyzed and improved international and domestic political processes. An important effect of this dynamic is a leadership vacuum to overcome global challenges, as well as increased competition and conflict between major players. As a result of the global force majeure, a significant portion of them became disoriented and unable to provide immediate and coordinated action.

One of the main lessons of the coronavirus era was the understanding that the survival of the most powerful European Union economies (Germany, Italy, France, etc.) could suddenly become directly dependent on health care systems. As a result of impulsive and radical severe measures (total lockdowns, emergency and quarantine regimes), a drop in GDP and a decrease in the number of employees in the second quarter of 2020 was the largest ever since the monitoring of the European statistical service Eurostat.

The COVID-19 pandemic marks a new geostrategic era in which biosafety and health security will take centre stage in national and international goals, policies, and actions.

The World Bank Group’s COVID-19 reports and forecasts indicate a clear predominance of the risk of negative and poorly predictable development of the situation. In case of the vaccine and applied treatment inefficiency, further spread of infection across countries and the resumption of restrictive measures will place an even greater burden on consumption and investment (COVID-19 to Plunge Global Economy into Worst Recession since World War II, 2020). Such measures have already led to a massive impact on the economy, plunging it into a recession.

Pandemic fatigue can lead to underestimation of the growing threats by elites and experts and, consequently, to a decrease in control over the behaviour of the population. The first signs of this trend are already evident: the autumn aggravation in 2020 was characterized by a decrease in the barrier of fear of the population and protest activity against the introduction of severe restrictive measures in a number of European countries (the Czech Republic, Serbia, Germany, etc.).

THE BELARUSIAN “UNIQUE PATH”

Belarus had its first official case of COVID-19 registered on 27 February 2020 and its first death on 31 March 2020. At first, the increase in newly registered cases was slower than in most other countries, but at the beginning of April, the virus started to catch up.

We can trace the initial politicization of the coronavirus topic both in the geopolitical and regional context. The “unique path” taken by Belarus that was criticized in spring 2020 was subsequently adopted by the majority of countries,
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and the World Health Organization recommendations, which had thundered so much during the first wave about the need to tighten quarantine measures, are now safely forgotten. Among just a few countries in the world, Belarus did not introduce any kind of lockdown because of COVID-19. People went to their jobs, while schools, kindergartens and shops operated as usual.

Belarus has been under “media pressure” for almost the entire period of the pandemic. There were no medical reasons for criticism in the published articles. Belarusian doctors did not have to make a tough choice— who should live and who should die. It is due to the high level of the Belarusian healthcare system: senior medical students were mobilized to help, a number of institutions, along with medical staff and doctors, were re-purposed to treat COVID-19 patients, and routine medical treatment was partly suspended. Today, the approach Belarus has tested has become the norm: despite the new waves of coronavirus, a vast majority of countries reject new lockdowns.

The activities of the Ministry of Health of the Republic of Belarus can be considered in two special dimensions: 1) horizontal, which concerns the coordination of activities with the competent republic institutions; 2) vertical, which refers to professional and material assistance to healthcare institutions (Terzić, 2021, 263-276).

Several interrelated factors were of crucial importance in the prevention and reduction of the possibility of contracting the COVID-19 virus in the territory of the Republic of Belarus:

1. the document Guidelines for the prevention of coronavirus infection (COVID-19);
2. the work method of the Ministry, which directed the activities of all entities involved in the prevention of the spread of the virus;
3. coordination of activities with the republic’s institutions and harmonization of actions with measures of the Government of the Republic of Belarus;
4. consistent and continuous work on the maximum engagement of the capacities of all services and republic bodies.

At the regional level, Belarus, while advocating for multilateralism and foreign policy diversification, played an important role in coordinating joint efforts with Russia and the Eurasian Economic Union to contain the pandemic. At the same time, the development of regional cooperation is cycling when active contacts at the intergovernmental and interdepartmental levels and rather high indicators of cooperation are followed by periods of a decreased intensity of interaction. Constructive changes in interstate cooperation are not possible without maintaining and developing good-neighbourly relations between the countries.
The Belarusian, Russian and Serbian military have been organising the Slavic Brotherhood Military Exercises since 2016. Despite the coronavirus pandemic, the Slavic Brotherhood Military Exercises were held in Belarus in September 2020. Probably due to the pressure of Western structures regarding the political crisis in Belarus, Serbia was cancelled on the eve of the already scheduled holding of the joint military exercise Slavic Brotherhood in Belarus in September, with the explanation that participation in all international military exercises is frozen for six months (Petrović, 2021, 13-14). For Belarus, Serbia’s participation in regional integration projects in the Eurasian space is important. The long-standing partnership between the Eurasian Economic Union member states and Serbia has not been overshadowed by any serious political or economic differences. Over the years of the development of interstate relations, countries have reached a high level of cooperation based on the principle of mutual support and respect. They have many points of contact, including on international platforms.

The COVID-19 pandemic affects not only health but also the economy. The International Monetary Fund estimates World GDP growth in 2020 at as much as -3.3% (April 2021), but the Belarusian Statistics Committee says the GDP of Belarus in 2020 was down by 0.9% (January 2021). Many Belarusian industrial companies continued to produce products that were not sold and went to warehouses. The social effects of the pandemic and political crisis in Belarus seem to be rather controversial, which are not yet too significant but may manifest in 2021-2023 (COVID-19 and the Belarusian Economy: 4 issues, 2021). Belarusian businesses were forced to develop new forms of employment and ramp up digitalization, both of which will contribute to sustainability in the long run. But competition between players is intensifying everywhere.

After the arrival of the second and third waves of coronavirus, the recovery of the world economy is slowing down, and unemployment and regional trade and economic relations continue to stagnate.

The uncertain international situation related to the issue of the pandemic and the accompanying economic crisis are putting pressure on national resources as never before. Consequently, if the effectiveness of vaccines under development is proven and the rate of infection decreases, we can expect an unprecedented strengthening and development of regional supply chains.

In the wake of the global economic downturn, countries benefit from interregional economic cooperation and coordination in the framework of transnational logistics corridors. Belarus, as a country with a favourable geopolitical position, located between the West and the East, definitely should take the chance and use the available resources to become a full-fledged logistics corridor between the European Union and the Eurasian Economic Union. Potential areas of mutually
beneficial cooperation include transport and logistics, mechanical engineering, construction, woodworking, pharmaceuticals, agricultural products, geology and mineral exploration, and the IT sector. It is important to attract investors to border-free zones (for example, “Grodnoinvest”) and create joint ventures there, and implement projects in the field of logistics. Despite the remaining challenges, including territorial debates, the Eurasian region clearly recreates the multi-polar regional architecture typical of today’s world.

Based on the classification developed by Mark Khrustalev, a prominent Russian professor (MGIMO University of the Ministry for Foreign Affairs of the Russian Federation), three key vectors shaping the political and psychological aspects of relations between countries can be distinguished in the most general terms: “Friend-Enemy” Vector, “Dependence-Independence” Vector and “Trust-Distrust” Vector (Khrustalev, 2008).

After the elections in Belarus in August 2020, the relations between Belarus and the European Union can be attributed to the “Friend-Enemy” Vector: characterised by the highest degree of tension in the relationship as opposed to “fraternal relations”, considered as the ultimate degree of friendliness. Nevertheless, the history and dynamics of our relationship have significant potential for growth. On the other hand, the relations between Belarus and Russia and the Eurasian Economic Union member states can be attributed to the “Dependence-Independence” Vector: based on the “balance of forces” between countries, or rather, on the obvious superiority of one international actor over another, where the second actor is explicitly dependent, both politically and economically, on the leading state. But in the last year, the Belarusian economic system has shown stability and has a high potential for self-sufficiency. The significant level of human development and education of the population should also be noted.

THE MULTI-VECTOR PRINCIPLE IN BELARUS FOREIGN POLICY

The Belarus foreign policy is based on preserving the sovereignty of the Belarusian state, equality of the participants of the integration projects and real benefits for the Belarusian state and the Belarusian people. The situation in Eastern Europe creates uncertainty in the regional security system. For Belarus, located between the geopolitical centres of power, it presents a serious challenge (Шадурский, 2016, 18).

Belarus implements the multi-vector principle in its foreign policy. The concept of multi-directionality as the foreign policy platform of the Republic of Belarus was developed in the second half of the 1990s and became a logical result of the strengthening of national sovereignty, although at this time active development of
relations with Russia was more characteristic of the foreign policy of Belarus. At present, the significant partners for Belarus are primarily the neighbouring countries and the countries of Asia, Africa, and Latin America, constituting the so-called “far arc” of Belarusian foreign policy (Шадурский, 2010, 47-51). It is underlined that the main prerequisite for Belarus playing a more proactive role in the far arc regions was of political nature, and has to do with Minsk’s chances of securing international support from the leaders of countries who share similar positions with regard to the existing world order. Simultaneously, one key priority for Belarus in the “far arc” countries is elated to the expansion of the markets for its products and attracting investments (Шадурский, 2019, 58-67).

For small and medium-sized ex-USSR countries, the choice of such a foreign policy model was almost the only means and option for development. Due to objective factors, the key players after the collapse of the USSR could not offer an adequate program of true partnership relations in the fields of economics, politics and security. In political science, a multi-vector foreign policy, as a rule, implies an independent foreign policy, the distinctive feature of which is to maintain balanced relations with key centres of power and the main regional players. Although science has not yet provided a clear and unambiguous definition of the multi-vector focus, discussions are continuing. Small and medium-sized countries are characterized by the principle of combining economic proximity with defence balancing in an effort to protect their sovereignty through reliance on other centres of power located beyond the integration core. The reason and logic behind such a policy is a civilizational factor that determines the need to develop mutually beneficial ties along the main vectors of the global geopolitical process — East and West, North and South (Стаховский & Ярмолинский, 2021, 43-48). Moreover, the principle of “pragmatism” and the strategy of balance are the basis of the foreign policy of Hungary, Slovakia, and Serbia. Belarus’s cultural and humanitarian cooperation with the East and the West is an integral priority, and the country’s need for the development of trust and good-neighbourly relations is a qualitative basis for constructive changes in interstate interaction.

And the political crisis that will erupt after August 2020 has only increased the demand for a multi-vector foreign policy, which is the only doctrinal approach that will allow Belarus to maintain its subjectivity in the face of the tumultuous regional and global agenda. Belarus has witnessed even more tragic periods in its history. The ability of the Belarusian people to adopt and use the achievements of others while preserving their own national identity, even under the most unfavourable conditions, is a valuable asset at the current stage (Шадурский, 2000, 52-60).

This principle in Belarus’s foreign policy is supported by sociological data. Based on a survey conducted in November–December 2020 by the Social and
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Humanitarian Research Centre of the Belarus State Economic University, half of the country’s residents (52%) believe the development of relations between Belarus and Europe can bring people together. On the other hand, polls conducted by the Institute of Sociology of the National Academy of Sciences of Belarus in October–November 2020 show that the majority (61%) are positive about the creation of a Union State of Belarus and Russia (Стаковский & Ярмолинский, 2021, 43-48).

The opportunity to establish the production of the Russian Sputnik V vaccine has been a weighty and substantial aspect of Belarus’s economy and politics. This allows for activating domestic capacities, saving jobs, and avoiding dependence on foreign supplies. In Belarus, you can get vaccinated with a Russian or a Chinese vaccine (Ministry of health of the Republic of Belarus, 2021).

In addition, it should be noted that the ranking of values in Belarusian society changed in 2020-2021. A sociological survey conducted by the Center for Social and Humanitarian Studies of the Belarus State Economic University in November-December 2020 has shown that three values have remained unchanged over the past years: health, family, peace of mind, and comfort. (Table 1). However, for the first time, a major emphasis is placed on “health”. Society is now such a powerful force in the world that governments will have to continue exploring new mechanisms and formats for engaging with it.

Table 1. Survey. “What is the most important thing in life?”

<table>
<thead>
<tr>
<th>No.</th>
<th>Values:</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Health</td>
<td>4.7</td>
</tr>
<tr>
<td>2</td>
<td>Family</td>
<td>4.6</td>
</tr>
<tr>
<td>3</td>
<td>Peace of mind and comfort</td>
<td>4.5</td>
</tr>
<tr>
<td>4</td>
<td>Children</td>
<td>4.4</td>
</tr>
<tr>
<td>5</td>
<td>Spouse, romantic partner</td>
<td>4.4</td>
</tr>
<tr>
<td>6</td>
<td>Financially secure life</td>
<td>4.3</td>
</tr>
<tr>
<td>7</td>
<td>Professionalism</td>
<td>4.1</td>
</tr>
<tr>
<td>8</td>
<td>Exciting career</td>
<td>4</td>
</tr>
<tr>
<td>9</td>
<td>Friends</td>
<td>3.9</td>
</tr>
<tr>
<td>10</td>
<td>High position in society</td>
<td>3.9</td>
</tr>
</tbody>
</table>
For many years, the countries of Eastern and Southeastern Europe have been at the centre of the interests of the leading powers of the world. After the dissolution of the Socialist bloc, it was regional security and economic matters that made the centres of power keep their eyes on this area (Shishkina, 2020, 232).

Henry Kissinger, former US Secretary of State and National Security Advisor to Presidents Nixon and Ford, advises in The Wall Street Journal “to manage the crisis while building the future”.

The periods of severe crises that we have all experienced and are going through today have always opened up new possibilities. Amid geopolitical and pandemic turbulence, there is a clear rising trend of regionalization, which can be regarded as a form of a new multi-vector approach. Belarus implements regional economic policies based on developing trade relations as well as on the support of emerging joint ventures and investment cooperation. Moreover, the growing self-sufficiency and complementarity of the economies spurs the process of regional integration and establishing powerful trade, economic and logistics networks. Creating the new logistics networks in the acute corona crisis period demonstrates the crucial role of regionalism as opposed to protectionism and economic downturn. The tendency to form regional trade platforms, which will exert considerable influence on the alignment of forces in world trade, is traced. The forming of integration blocks gives their participants the opportunity to solve arising problems on regional platforms. Moreover, regional engagement has provided a focus on themes of common interest in the regions, such as regional security, illegal immigration and other threats.

The pandemic and the accompanying economic crisis are putting pressure on national resources as never before. Since the austerity mode mobilizes the maximum possible efforts in the fight against the global pandemic, the most influential countries, world economic institutions, and aid funds should consider the possibility of directing funding to provide assistance to the health systems of small and medium-sized countries. The Belarusian flight crew transported humanitarian aid from China to the Serbian population. Subsequently, the Serbian Government sent two planes with medical supplies as humanitarian aid to Belarus (Pentegová, 2020, 65).

**CONCLUSION**

Vaccine protectionism endangers the global fight against COVID-19. Small and medium-sized countries are forced to manoeuvre between the centres of power to maximize the protection of their national interests. Subsidies aimed at reversing the economic downturn are clearly not going to produce the desired results.
overnight. At the same time, a decrease in the degree of passion, primarily at the regional level and in the vicinity, as well as a coordinated and well-considered public health policy, would give the economies a chance for a speedy recovery with minimal consequences.

According to the spring estimates of experts from the Leibniz Institute of Agrarian Development in Countries with Economies in Transition (Leibniz-Institut für Agrarentwicklung in Transformationsökonomien), we should not expect a complete and irrevocable victory over the coronavirus in the short run, especially if there are no natural changes in the nature of the virus. (It seems to be a realistic scenario in which up to 70% of the population could be infected.)

Humanitarian games in times of crisis and the fight for vaccines can have serious implications for regional cooperation. In the “political game” for the provision of humanitarian aid, there is a gradation depending on the foreign policy interests of specific countries, as a result of which there is lack of vaccination in a number of regions (for example, Africa). It should be noted that the selective provision of assistance in such a situation can heat unresolved conflicts and become a catalyst for the division of regions.

A fashion for mutual aid can offer a way out. Countries need to share best practices, overcome contradictions and mental shortcuts used for mutual evaluation. It is more rational to apply energy and resources to promote and share best treatment practices. Moreover, strengthening humanitarian ties will contribute to long-term interstate cooperation, as well as to the fuller implementation of the regional relations’ potential. Thus, all countries need a common long-term strategy since neither the economy, nor the health care system, nor the population of each country can individually withstand the consequences of the crisis.

The proportionate involvement of Belarus in such mechanisms for sound participation in constructing a common post-crisis future seems to be no-alternative and inevitable. With the Russian Federation, the European Union, China, and the United States being the main players, the alignment and balance of power are largely determined by the strategies of regional middle-size states, which makes it important to have an appropriate national action plan aimed at domestic development insurance through new opportunities.

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THE EGYPTIAN BATTLE AGAINST THE CORONAVIRUS: POLICIES AND TOOLS

Raghda Elbahy

Abstract: The Egyptian government applied different policies in its fight against the coronavirus. These policies included social distancing, screening, reducing the attendance of public sector employees, etc. These policies gain importance by taking into account the social dimension by protecting individuals’ income, ensuring the provision of strategic goods to the market, and maintaining price stability. These policies conducted community outreach and helped prevent the spread of the coronavirus on the local level on the one hand. And on the other hand, the Egyptian government felt it was important to provide special targeted support to regional countries to fight the pandemic. Hence, it provided medical aid to different countries. The study analyses the Egyptian policies against the coronavirus internally and externally by tracing down the official statements provided by the Ministry of Health, analyzing the main press conferences held by the Egyptian government, and tracing the role played by civil society along with the governmental efforts. The study argues that Egypt has applied integrative tools to combat the coronavirus, whether institutional (crisis management committee) or technological (medical applications, robots, thermographic cameras, etc.) or social (awareness campaigns, poverty protection, etc.). Yet, Egypt faces huge health challenges such as health care reform and vaccine reluctance.

Keywords: Pandemic, health care reform, medical assistance, PCR tests, civil society, foreign assistance.

INTRODUCTION

The coronavirus pandemic, which broke out in late 2019 and wreaked havoc on the global social, economic, and political fronts in the first half of 2020, remains
a central issue on the world agenda. As global healthcare systems stood in the
front lines of the battle against a single enemy, uncertainty reigned, and countries
attempted to manage the crisis as they waited for a solution to emerge. The
pandemic has spread to nearly all countries, causing numerous economic, social,
and political repercussions. The Arab Republic of Egypt, like other countries, has
attempted to combat the pandemic’s harmful impacts through a series of policies
and tools aimed primarily at reducing the number of confirmed cases and deaths
and arming the healthcare sector with the tools necessary to curb the spread of
the pandemic, among other measures. The coronavirus was reflected in Egyptian
diplomacy across various foreign policy circles, as Egypt sent medical assistance
to various Asian, African, and European countries in parallel with its internal fight.
Egypt sent medical assistance to India and Djibouti, for example, in May 2021 (the
peak of the third wave in Egypt).

POLICIES ADOPTED AGAINST THE CORONAVIRUS

Egypt has experienced three waves of coronavirus (the first wave February-
September 2020, the second wave November 2020-January/February 2021, and
the third wave April-July 2021). In the three waves, Egypt adopted several measures
to curb the spread of the pandemic during its consecutive waves, such as:

Social distancing: Various official organizations have emphasized the need for
social distancing, which is the most essential weapon in preventing the spread of
the virus, through a range of Egyptian media. For example, the United Nations
Population Fund, in collaboration with the National Council for Women, the
Ministry of Health and Population, the World Health Organization, and with the
support of the Italian Agency for Development Cooperation, launched an
awareness campaign that included a series of videos presented by doctors from
various fields. The videos, which featured medical information and advice on the
prevention of the coronavirus, were widely shared on many social media
platforms. Also notable in this regard are the efforts of the Ministry of Awqaf
(Religious Endowments), launched with the slogan of “Prostrates before Mosques”
which the Minister of Awqaf Dr. Muhammed Mukhtar Gomaa defined as the
preservation of the human soul, as it was one of the most important public
purposes of Sharia Islamic law. Within its framework, all mosques carry out a broad
campaign for cleanliness and sterilization countrywide, while also reducing
commotion, limiting the work of mosques to prayers only, reducing the time of
sermons to 10 minutes and implementing social distancing between worshippers,
both inside and outside places of worship without crowding (Abdul Hady, 2020).
Screening: The Egyptian Minister of Health explained that in December 2020, Egypt carried out between 15-20 thousand PCR tests daily in government hospitals, hospitals, and private laboratories. From the beginning of the crisis in early February 2020 till December 2020, the total number of such tests exceeded 300,000 swabs. This is consistent with the statements of the Head of the Department of Central Laboratories of the Ministry of Health, Nancy Al-Gendy, who confirmed that the number of daily swabs carried out at the Ministry’s laboratories and hospitals averaged 10,000 swabs. That means that hospitals and private laboratories carry out between 5 and 10 thousand PCR tests daily (Al-Qady, 2020). Every day, the Egyptian Ministry of Health releases a statement detailing the number of people who have died, survived, or been infected. Nevertheless, the statement only includes the number of positive PCRs conducted by the ministry’s hospitals only, leaving out the remaining cases, which were discovered by private hospitals and laboratories, and many university hospitals of the Ministry of Higher Education. Some hospitals limit their medical service to cases suspected of the coronavirus, conducting blood and chest scans and corresponding them through a qualified physician without performing the specific swab on the patient. Many patients also seek treatment in private clinics where PCR tests are not permitted (Al-Qady, 2020).

Reducing the attendance of the public sector employees: In the face of the peak of the coronavirus waves, the Egyptian government resorted to reducing the daily presence of public administration staff. It also approved the recruitment of any employee with an exceptional leave, according to the need of work. This took into account, for example, the nature of the health sector, where the leave was handled differently; the Ministry of Health decided to suspend all medical staff leaves at all hospitals and subordinate units. The Ministry of Health also decided to suspend non-mandatory leaves, which included travelling abroad, improving income, or accompanying a spouse (Sammy, 2021). The Ministry of Education and other state bodies allowed those whose employer permits them to work from home to perform their assigned tasks without having to be present in the workplace for the duration of the Prime Minister’s decision, provided that the rest of the employees perform the tasks of their jobs alternately, daily or weekly. Any staff member suffering from a chronic illness, according to what is proven in their job file, was granted exceptional leave for the entirety of the duration of this decision, and any staff member with a non-chronic illness was granted the same exceptional leave for the same duration, provided a report issued by a government hospital that he/she is entitled to such leave (Sammy, 2021).

Temporary employment: The Ministry of Manpower disbursed financial grants for irregular employment over three phases; the first phase cost EGP 300 million,
and around 1.6 million employees benefited from the grants. The second phase began on 21 April 2020, at the same number and cost. The three phases together totalled EGP 800 million (Abdel Nasser, 2020). The regular workers, whose names have been registered, have been subject to conditions to pay the grant in all provinces, centres, and villages, from mail outlets around the Republic, which exceed 4,000. This has taken into account the care of those most in need during the pandemic and the support of irregular employment (Al-Badawi, 2020). The Chief of the Council of Ministers Crisis Chamber confirmed that the government was launching a website, titled “Our people”, intending to assist temporary workers who suffer as a result of the state’s precautionary measures towards the coronavirus. Also, to achieve a degree of social solidarity between businessmen and temporary workers in order to cope with the damage caused by the spread of the coronavirus, the temporary employment website will include a link to their registration and documentation in parallel with that of the Ministry of Manpower (Abdel Nasser, 2020).

**Partial closure:** During the peaks of the coronavirus, Egypt took firm steps to ban all conferences and parties in hotels and clubs while also scheduling closure times for shops, malls, coffee shops, and restaurants from 9 pm to limit the spread of the coronavirus. These partial closure procedures were taken to face the three waves of the virus. The Minister of Health stated at one of her official conferences that Egypt has not imposed a policy of full closure like many other countries, which benefited the public interest, and which also depended on the number of infected cases, the degree of government hospital work, the prevention of economic collapse and other economic and social considerations (Sputnik, 2021).

**Vaccine production:** In Egypt, the Pharco pharmaceutical company announced that it had acquired the rights to produce the Russian vaccine Sputnik V and that the production should begin before the end of 2021. This move coincided with the local production of the Chinese Sinovac vaccine in Egypt, alongside plans of the Egyptian Ministry of Health to produce the European AstraZeneca vaccine later, as well as the ongoing research on a 100% Egyptian vaccine for its manufacture in the country. Egypt aims to produce a variety of foreign and local vaccines to reach “self-sufficiency”, to meet the needs of the citizens, to start exporting abroad, to provide the largest quantity of vaccines, and to vaccinate 70% of the population (Sky News, 2021, June 18). The Egyptian Ministry of Health recently announced the beginning of the production of Sinovac in Egypt, the first dose of which will be produced within factories of the company holding biologics and vaccines VACSERA. Egypt aspires to produce 40 million doses of that vaccine by the end of 2021, to transfer the entirety of its manufacturing technology to Egypt, to invest in this production to achieve self-sufficiency in vaccines, and to
export the surplus and manufacturing technology to Arab and African countries. With Egypt’s success in producing Sinovac, it will become the first African country to produce an anti-coronavirus vaccine locally (Sky News, 2021, June 18).

**EGYPT’S TOOLS TO FIGHT COVID-19**

Towards containing the spread of the novel coronavirus, Egypt deployed different tools, including:

**Institutional tools:** In response to the COVID-19 pandemic, Egypt established the Higher Committee for the Management of the Coronavirus Crisis headed by the Prime Minister. The committee’s regular meetings and constant contact with the Egyptian people is one of its distinctive features. The members of the committee include the Minister of Health and the Minister of Social Solidarity, among other prominent figures. The Financial Regulatory Authority has also been engaged in control efforts aimed at ensuring the high capacity, quality, and effectiveness of pharmaceutical institutions involved in the production of medications and making them available to the public. The Ministry of Health also formed a committee to combat the coronavirus headed by Dr Hossam Hosny. The committee took on several tasks, including declaring coronavirus-related decisions, revealing new symptoms associated with the coronavirus, providing updates on the epidemiological situation and medical condition of some celebrities who got infected with COVID-19, and reviewing treatment protocols in hospitals, among others (Sobhi & Sami, 2020).

Concomitantly, the Ministry of Higher Education and Scientific Research established the Supreme Committee for Respiratory Viruses headed by Dr Khaled Abdul-Ghaffar, the Minister of Higher Education and Scientific Research. The committee took over several responsibilities, including monitoring the epidemiological situation, reviewing, and discussing scientific research related to the virus, particularly studies on the third wave of the virus, and providing approved recommendations to reduce the rate of infections. Chief among them was a recommendation to establish specialized clinics in university hospitals for the post-coronavirus syndrome, comprising a number of specialties to treat the psychological and medical effects on those recovering from the virus across Egypt (Sobhi & Sami, 2020).

**Civil society:** On March 22, 2020, the Egyptian Food Bank (EFB) launched the “Supporting Day Labour Responsibility” campaign in collaboration with 4,365 charities across governorates. For its part, the Misr Al-Kheir Foundation donated 28 ventilators and 2,000 devices for COVID-19 antibody detection and launched the “Your Zakat in Times of Crisis” campaign to provide isolation and quarantine
hospitals with medical protective equipment and sterilization supplies (Abu-Sekeen, 2021, April, pp. 181-183). The Al-Orman Charity Association has identified 50 villages, each of which houses about 400 families affected by the coronavirus crisis and provided them with a two-month supply of basic foodstuffs. Moreover, basic food assistance and 10,000 blankets were distributed to COVID-19 isolation hospitals in cooperation with the “Tahya Misr Fund”. Concomitantly, the Coptic Evangelical Organization for Social Services (CEOSS) launched several initiatives, including “Thank You Doctors and Medical Teams” in collaboration with the Beni Suef governorate to provide medical staff with an allowance to buy protective tools and face masks. (Abu-Sekeen, 2021, pp. 181-183).

In parallel, the “Ahl Masr Foundation” (AMF) launched an initiative called “People of Egypt Are up to Responsibility” aimed at providing 60 public and university hospitals with medical devices and preventive equipment. The AMF also managed to provide 10 intensive care units and 32 ventilators to hospitals and mounted the “Protecting the White Army, Our Responsibility” campaign, which proved successful in providing protective supplies to medical teams in 63 hospitals across all governorates (Abu-Sekeen, 2021, pp. 181-183). Relatedly, the Red Crescent Society carried out over 1,200 relief campaigns for needy families and villages that were most affected by the repercussions of the pandemic. The Red Crescent convoys have travelled through governorates offering medical examinations and treatment to more than 17,000 beneficiaries affected by COVID-19. (Abu-Sekeen, 2021, pp. 181-183).

High-tech tools: Egypt brought its high-tech solutions to the front lines of the coronavirus battle, combining the efforts of the Ministry of Communications and Information Technology (MCIT), the private sector, and innovators, giving rise to a number of innovative robots, novel initiatives, e-applications, and thermal imaging infrared cameras, etc. On 10 June 2020, Mansoura University launched its first domestically manufactured robot designed to provide food and medical supplies to coronavirus patients in isolation hospitals. High-resolution thermal imaging infrared cameras were used in airports for the early detection of suspected cases of COVID-19. As of 5 June 2020, the Egyptian Holding Company for Airport and Air Navigation started installing thermographic cameras in arrival halls at Cairo International Airport. (ElBahy, 2020). Additionally, Egypt launched the Sehat Misr [Egypt’s Health] mobile app dedicated to COVID-19 resources and inquiries. The app was introduced to replace the hotline 105 established by the Ministry of Health for the same purpose. The app includes COVID-19 related questions and guidance. Through the app, users can report suspected cases of COVID-19 by clicking the “Report” button and entering the patient’s name and national ID number. (ElBahy, 2020).
The “Tahya Misr Fund”: To tackle the repercussions of the coronavirus pandemic, the “Tahya Misr Fund” that was launched in July 2014 by the Presidency of Egypt to activate the previously-announced initiative by the President to establish a fund in support of the economy and to achieve sustained and comprehensive economic growth, moved in two main directions: 1) supporting the medical sector in the face of the virus and 2) supporting vulnerable families and informal workers. Since the launch of the Tahya Misr Fund, it has actively sought follow-up and coordination with the Ministry of Health, Department of Medical Services, and the Egyptian Authority for Unified Procurement, Medical Supply and Technology Management (AUPP). To receive contributions and donations from inside and outside Egypt, the Fund established a bank account “No. 037037 – Responding to crises and disasters” to support the activities of the Fund. The same bank account was also used to receive donations for providing the vaccine for vulnerable groups. Contributions of the Tahya Misr Fund in this respect included providing 1,000 infusion pumps for critical care units, 240 ventilators, 16,000 protective isolation suits, 1 million surgical facemasks, 60,000 N95 masks, 50,000 litres of disinfectants and sterilizers for fever and chest hospitals, and 1,000 virus detectors. Moreover, the Fund co-founded a field hospital at Ain Shams University (Amer, 2021).

Since the outbreak of the pandemic, the Tahya Misr Fund convoys have been involved in distributing foodstuffs under the “Bel Hana Wal Shifa” [Bon Appetite] initiative aimed at supporting vulnerable families and non-regular employment through 6 phases to alleviate the crisis. Through its various phases, the initiative has been successful in providing support to over 8 million citizens across Egypt with a total of 1 million dry ration boxes, 200 tons of meat, 2,150 tons of poultry, 30,600 hot meals, 200 tons of vegetables and fruits, and 133,000 canned food boxes. In coordination with the Ministry of Manpower, the Fund participated in providing one million irregular workers with grants valued at EGP 500 million (Amer, 2021).

Egypt’s foreign assistance: On 10 May 2021, three military transport aircraft took off from the East Cairo Air Base carrying large quantities of medical aid provided by the Ministry of Health to India. This step came to alleviate the burden on the Indian people due to the rapid spread of the coronavirus and the high rate of infections and deaths amid a severe shortage of medication, medical supplies, and protective equipment (Othman, 2021). In addition, Egypt built an air bridge for medical supplies and treatment to victims of the Beirut Port explosion of August 2020. In October 2020, Egypt sent tons of milk and medication to Iraq. Egypt also sent medical aid to the Jordanian people in December 2020. Moreover, three aircrafts loaded with large quantities of medical supplies, equipment, and
milk were sent to Lebanon in the face of the spread of the second wave of the coronavirus (Magdi, 2021). In May 2020, Egypt sent a large virus-aid shipment of sterilization tools to the United States of America following a surge in death rates. The shipment, which consisted of tons of medical devices, carried the label, “From the Egyptian People to the American People”, an initiative that was later extended to include other countries (France 24, 2021, May 14). In April 2020, a time when Italy was one of the first hotspots of the pandemic in Europe, Dr Hala Zayed, Egypt’s Minister of Health, visited Italy to personally deliver the Egyptian aid, which included protective masks and gloves, to the Italian Minister of Foreign Affairs, Luigi Di Maio (France 24, 2021, May 14). In the aftermath of the outbreak and the declaration of a state of emergency in Italy in April 2020, Egypt was one of the first countries to provide medical aid to the European country to help it contain the crisis after recording the highest infection rate worldwide, exceeding the infection rate in China, where the virus first emerged. For instance, in April 2020, Egypt sent a huge shipment of protective equipment to Britain to help it fight the virus (Russia Today, 2021, May 6).

According to official statements by the Egyptian Minister of Health on May 21, 2021, Egypt is the first African country to provide COVID-19 medical aid to 30 African countries, including Libya, South Sudan, and Congo, among others. Furthermore, according to instructions from President Abdel Fattah Al-Sisi, Egypt sent $4 million-worth medical aid to African countries to help contain the coronavirus pandemic. In a related context, Egypt sent aid to Sudan on board two military aircraft that took off from the East Cairo Air Base carrying large quantities of food aid to contribute to relieving the burdens on the Sudanese people. (Russia Today, 2021, May 6).

EGYPT’S CHALLENGES

Despite the multiple policies and tools Egypt has adopted and used to curb the spread of the COVID-19 pandemic, numerous challenges have emerged, such as:

Reluctance to receive vaccines: Egypt conducted serious negotiations with the three companies that produce coronavirus vaccines — China’s Sinopharm, US Pfizer, and British AstraZeneca — to get enough vaccines to vaccinate 40% of Egypt’s 100 million population by the end of 2021. Egypt has not relied on a single vaccine in response to COVID-19. Of course, the negotiations required meetings with representatives of Pfizer USA, UAE, and Egypt in the presence of the scientific committee observing the fight against the COVID-19 and representatives of the Unified Procurement Authority and Egyptian Drug Authority to consult with on the supply of the company’s vaccines after the company presents its financial
offer. It also required the approval of the Egyptian Drug Authority, which approved the licensing of the Chinese Sinopharm vaccine for emergency use. (Al Arabiya.net, 2021, January 3).

Although the state launched a website to register the data of those who want to receive the available anti-COVID-19 vaccines, a state of reluctance to register has been observed among both doctors, although they are the most in need of vaccination, and citizens. The Minister of Health Hala Zayed stated that only 50% of medical staff have registered for the anti-COVID-19 vaccine, while 100% were targeted, and 40% of the registered medical staff failed to appear (Omran, 2021). Undoubtedly, citizens’ reluctance to receive the vaccine did not occur only in Egypt but also in most countries in the world. This was attributed to social media, fear of side symptoms and long-term effects of the vaccine, especially with insufficient research, and the AstraZeneca vaccine linked to blood clots. To address these and other concerns, the Egyptian President, Prime Minister Mustafa Madbouli, and several ministers have published images of their vaccination to encourage citizens to receive the vaccine and urge them to register and get vaccinated. Several officials, primarily the deputy of the Health Committee in the House of Representatives Mahmoud Abu Khair, have consistently stressed the need to take the vaccine to avoid the severe symptoms affecting citizens in the third wave of COVID-19, especially since all vaccines in Egypt are guaranteed and tested worldwide and in Egypt (Omran, 2021).

The private sector: There have been negotiations concerning the participation of the private sector in the COVID-19 vaccination campaign. The Proposals and Complaints Committee of the House of Representatives has approved a proposal on private sector participation in the vaccination system, provided that private sector institutions receive the approval of the Egyptian Drug Authority. A senior executive of the Ministry of Health confirmed in a statement that some steps are being taken by the Ministry in this direction. There are procedures currently taking place for contracting with two companies to provide the vaccine to citizens, as there is room for any company to apply to participate under the standards of the Ministry of Health. There is no doubt that this step requires precise study. It is well-known that vaccines and treatments are provided free of charge in times of pandemics and health epidemics under the supervision of the Health Ministry. So, opening the door to the private sector will thus create inequality and commodification at a time of the global pandemic. There will be two vaccination systems, one free of charge with a waiting list for those who want to get it through government outlets, and the other is with fees for those who want to be vaccinated quickly (Ghanam & Azzab, 2021).
Economic considerations: Egypt faced a challenge in terms of providing strategic stocks of certain food commodities, particularly as some consumption patterns changed with the spread of COVID-19. This has required strenuous efforts on the part of the Ministry of Supply and Internal Trade, represented by the General Authority for Supply Commodities and the Ministry of Agriculture and Land Reclamation, to expand wheat cultivation through; the contract farming system, procedures for early contracting with external actors to ensure the supply of appropriate quantities, provision of appropriate import ports and wheat collecting centres, in particular the establishment of modern metal silos and the development and upgrading of the list, and ensuring a strategic stockpile that meets the demand of some 70 million citizens on an estimated 128 billion loaves (5 loaves per person per day) (The Nile Letter, 2020, March 29). The Ministry of Agriculture’s strategic crop production plans had to be fully coordinated with the Ministry of Supply and Internal Trade’s import plans to determine the extent of the food gap and the volume of total imports to fill the gap at the level of the most important agricultural products. It was also necessary to strengthen the financial capacity of the Holding Company for Food Industries, which is entrusted with the provision of food commodities, so that it could import the requirements of the domestic market for strategic goods, primarily sugar, oil, and rice, besides completing sugar and dry food packaging factory chains, and others (The Nile Letter, 2020, March 29).

Reforming the health sector: The majority of world countries, including Egypt, have embarked on a serious scheme to reform the health sector. It is a serious challenge, especially since it requires progressive reform in partnership with various bodies in the governmental, non-governmental and private sectors to provide Egyptians with quality services. There is a need to improve the mental image of all healthcare providers, continue medical training, promote a positive working environment, and scientifically develop medical and nursing staff accommodation in government hospitals to attain this goal. There is no doubt that special legislation is required to prepare for the launch of The National Project for Model Hospitals in all governorates of the Republic in conjunction with implementing the National Project for the Unified Health Insurance (Magdi, 2018).

CONCLUSION

Overall, the Egyptian battle against the coronavirus was a successful one. Egyptian policies took into account the social dimensions and health implications of the coronavirus without having a severe impact on the Egyptian economy, with the acknowledgement of international organizations. This is particularly important
compared to several leading international experiences that have either strained the health system or strained the economic system. An increase in the population of over 100 million has undoubtedly imposed constraints that undermine social distancing policies, require large-scale medical examinations, and require a doubling of the budget of the Ministry of Health.

However, the use of innovative tools and reliance on citizen awareness, various technological tools, and the creation of several websites (for citizens who want to register to receive a vaccine or temporary employment, etc.), the concerted efforts of civil society and the creation of crisis management committees have all contributed to managing the COVID-19 crisis and mitigating its negative impact not only at home but also abroad through Egyptian medical diplomacy.

Some of the challenges that Egypt faces are indeed global, particularly the reluctance to receive vaccines, the health system reformation, and the difficulty in obtaining vaccines. On the other hand, there are purely Egyptian challenges stemming from the specificity of the Egyptian situation, such as those relating to the potential participation of the private sector in the vaccination process and the increasing dependence on certain crops, primarily wheat. In both cases, civil society is joining forces with government policies to face these challenges, giving priority to the Egyptian citizen as the engine of development.

Yet, vaccine reluctance remains the biggest challenge. It can be attributed to the lack of trust in the vaccine’s efficacy and safety, the fears of the side effects and long-term impacts, the spread of rumours and long waiting lists. Taking into account these reasons, a total of 10,418,988 million vaccine doses has been administered as of 5 September 2021 (according to the World Health Organization). So, despite the effective policies, the national vaccination plan must be developed, and a targeted awareness campaign must be launched. This proves that the battle against the coronavirus is not only a battle of the Egyptian government to be fought, but also a battle that necessitates the efforts of civil society, the citizens, and the official bodies, altogether. The media, electronic press, and social media must be fully utilized.

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