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## **DISUNITY IN TIMES OF CRISIS: COVID-19, GEOPOLITICS AND VACCINE NATIONALISM<sup>3</sup>**

Geopolitics and vaccine nationalism have been seen as barriers in addressing the COVID-19 pandemic globally. Rich Western nations have nationalized vaccine production and distribution, while vaccines produced by Russia and China have been criticized in the West as lacking scientific rigor. This paper attempts to understand the negative implications of vaccine nationalism and seeks to explain how, in times of crisis, words such as unity and solidarity were replaced by populism, nationalism, and the politics of blame. To accomplish this, the paper employed a qualitative research method, where a review of the literature relating to the COVID-19, geopolitics, and vaccine nationalism revealed that the words unity and solidarity were non-existent in the fight against the pandemic. In doing so, nation-states put their interests ahead of the other states. It was observed that failure to ensure vaccines for developing countries risks prolonging the pandemic.

**Keywords:** vaccine, nationalism, states, realism, pandemic.

### **1. INTRODUCTION**

It is safe to contend that the COVID-19 pandemic brought with it unprecedented destruction that no state or government would have anticipated. It has resulted in millions losing their jobs, condemned millions of families to poverty, it increased global inequality, exposed how governance is fragmented in developing regions and has laid bare how in times of crisis, it is every nation for itself. The pandemic has affected the world like nothing else in recent history, triggering serious economic crises. It was expected that the global socio-economic and, by extension, political fallout from the pandemic would unite the world and merge global responses to the pandemic. It was hoped that it would allow rivals to put aside their geopolitical differences and not only work together to neutralise the spread of the virus but to also ensure global stability. However, what we have observed is the direct opposite; rather than a collective global effort to fight the pandemic, we have seen its politicisation between the West (Europe and North America) and the East (Russia and

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China), characterised by the blame game. Lal et al. (2020) conclude that the global response to COVID-19 has been fragmented; it has been fraught with geopolitics, nationalism, and an element of denial. Desvars-Larrive et al. (2020) maintain that millions of lives would have been saved if governments had been proactive rather than reactive and had put people rather than politics and populism first. The disunity in responding to the pandemic was reflected in the development, production and distribution of vaccines. From the outset, poor countries were at the mercy of developed countries that possessed the technology, infrastructure, and knowledge with regards to vaccine development. Rowland, Ruahla & Berger (2021) noted that Western multinational pharmaceutical companies, backed by their governments were keen to consolidate their monopoly concerning the development and distribution of vaccines. A vaccine developed in the East (Russia and China) was unthinkable, considering the current state of geopolitical affairs between the West and East. On the surface, vaccine development was about saving lives but, in the background, great power politics were at play, with the first country to develop a safe vaccine being able to expand its sphere of influence. From the onset of the pandemic, vaccine production in the East has been met with ridicule and mistrust in the West, where they were seen as inferior and rushed processes that were unsafe for human use (Baraniuk, 2021). The politicisation of vaccine development has become another factor hindering an effective global response to the pandemic. Arguably, vaccine politics and nationalism will not help anyone, rather the world needs a collective, all-encompassing solution to the pandemic that involves working together to ensure that all countries rather than a few wealthy countries stand an equal chance of receiving vaccines (Ghebreyesus, 2021). It should not matter where the vaccine comes from, as long as it is safe and can be of valuable assistance in the fight against COVID-19. This paper, therefore, seeks to examine how the terms 'solidarity' and 'unity' were disregarded during the peak of the pandemic. It seeks to understand the implications of vaccine nationalism and how it has become a barrier to unity and solidarity in times of crisis. To achieve the objectives of this paper, a qualitative research approach was employed where a literature review was undertaken to engage with this highly politicised topic. Data was collected at an international, regional and local level. This approach was deemed appropriate as it permitted the paper to go deeper into the current debates, arguments, and discussion around the understanding of COVID-19, geopolitics, and vaccine nationalism and how these have informed the global response to COVID-19.

## **2. THEORISING THE GEOPOLITICS OF VACCINES**

The global response to the pandemic reflected a great deal of disunity underpinned by populism, nationalism and the disregard for the interests of other states. Realism in international relations underscores the fundamental role of states and contends that all states in the international system are driven by their national interests, which at times are disguised as moral concerns (Guzzini, 2004). Hans J. Morgenthau's significant insights into international relations contributed considerably to bringing realism to the fore as one of the most important theories in international relations. For Morgenthau, greed and selfishness were the core values of human existence. The need to dominate and amass power, and the disregard for the interests of others were the main cause of conflict (Bell, 2017). Realism assumes that states are the major players in the international system. While other elements may be present (for example, civil society organisations and non-state actors) they however have limited power. Secondly, in the international system, states are seen as unitary actors

(Antunes & Camisao, 2018). In time of crisis, the need to project one's national interests leads the state to take drastic measures. Finally, realism argues that the international system is anarchic. Countries always seek to ensure and protect their territorial sovereignty and political autonomy (Antunes & Camisao, 2018). Once these two important elements are secure, however, the national interests of states take different forms, which may converge or significantly diverge. For some states, securing more land, resources and expanding their spheres of influence may be of national interest, while others may wish to expand their socio-economic and political systems to other areas, while others may just want to be left alone. Defining national interest within the realist context can be reduced to one word, 'power'. However, national power has a wide range of meanings since it can be defined in terms of economics, politics, military, economics and even cultural resources (Williams, 2007). Realists observe power as a relative concept, for example, does a state possess the capabilities to protect itself against the aggression (power) of another state or can a state force another state to alter its state policies? For realists, the importance of relative and not absolute power stems from the assumption that the international system is anarchic. Therefore, this anarchy forces states to rely on their resources to protect their interests (Antunes & Camisao, 2018). There is no authority over the nation-state, nor, for the realist, should there be. COVID-19, sadly, exposed not only the disunity in the international system but also the selfishness and greed of nation-states, from the hoarding of vaccines and rich countries directly dealing with manufacturers to secure billions of doses for their populations to countries restricting the export of materials needed for vaccine production (Belluz, 2021).

The pandemic has further reinforced Morgenthau's view that humans by nature are selfish and in times of crisis only think about themselves. The pandemic has greatly affected globalism within the context of international relations. On March 14<sup>th</sup> 2020, former US President Donald Trump banned citizens from 26 European countries from entering the US (Amaro, 2020). European countries also introduced similar measures to try and flatten the curve and reduce the spread of the virus. What soon followed was beyond what anyone could imagine; travel bans were put in place, borders were shut, mandatory quarantines were enforced. Such actions were classic examples of how the coronavirus pandemic exposed how realism in international relations is still alive today. How countries have been responding to the pandemic has reinforced the assumptions of realism where self-help and ensuring one's interests are secure has been the dominant feature of the global response to the pandemic. Realism in international relations does not put a great deal of effort into analysing pandemics such as COVID-19, nor does it address public health issues or epidemiology, but despite these limitations, realism can offer significant understanding of some of the issues that the pandemic has raised (Walt, 2020). Firstly, the pandemic reassured us that the state is still the major player in international relations. Over the years scholars have argued that the role of the state is diminishing and has been replaced by non-governmental organisations, transnational corporations, terrorists, and global economic markets. However, the coronavirus pandemic is providing yet another vivid reminder that states are central figures in international relations (Walt, 2020). Secondly, different versions of realism at times tend to downplay states (apart from relative power), so far, the pandemic has exposed the weaknesses and strengths of different regimes and political systems (Walt, 2020). Scholars have argued that authoritarian-led countries are more likely to be worse off with regards to epidemics, famine, and other forms of natural disaster because top

officials tend to withhold information from the public and hence may downplay the gravity of the situation, as in the case of Iran and China.

### **3. THE WORLD HEALTH ORGANIZATION AND THE GLOBAL RESPONSE TO COVID-19**

What began as a virus in Wuhan China soon expanded and inflicted devastating socio-economic conditions in every corner of the world. COVID-19, which was initially reported to the World Health Organization (WHO) on December 31, 2019, was on the 30<sup>th</sup> of January 2020, declared a global health emergency (Cucinotta and Vanelli, 2020). When it became clear that the virus had spread beyond the Chinese borders, the WHO on the 11th of March declared that outbreak a pandemic (Eurosurveillance Editorial Team, 2020). One can argue that the WHO was slow in its initial assessment and response to the virus and when it did react, the virus had already begun to cripple socio-economic systems globally. Former US President Donald Trump criticised the WHO and tweeted that the organisation “really blew it, for some reason, funded largely by the United States, yet very China-centric” (Lanyon, 2020). This was not the first time the WHO had come under attack for its lackluster response to the pandemic. Buranyi (2020) observed how, apart from Trump, even prominent people in academia, government and NGO sectors who had been supporters of the WHO argued that it had bent over backwards in response to nationalistic sentiments and caved into populism and failed to take the lead when it was supposed to. The international political system which the WHO relies on is unraveling, as aggressive populism and nationalism become entrenched around the world (Buranyi, 2020). In terms of the realist paradigm, it became clear that from the onset, nation-states were more concerned about their own interests, and this drove them to depend on their resources to ensure such interests were protected. While there is nothing wrong with this approach, it consolidates the notion that in times of crisis, concepts such as solidarity and unity are a myth. However, one cannot take at face value the criticisms levelled against the WHO without understanding the parameters within which the WHO operates. In essence, while the WHO has been expected to take the lead in devising strategies to protect the globe against the pandemic, the world also needs to look at China which has been accused of not sharing but rather concealing information about the pandemic. Months after the virus expanded beyond Chinese borders, US intelligence services communicated that out of fear of arrest, it is highly possible that officials in Wuhan China withheld information concerning the coronavirus from Beijing officials (Frias, 2020). According to a report by the Department of Homeland Security, the Chinese government knew about the severity of the virus but concealed the information from the international community in order to stockpile medical supplies while also reducing the export of key medical equipment (Williams & Luce, 2020). While China has denied concealing information, the subsequent arrest of doctors in Wuhan who had been at the centre of the pandemic gave rise to an increasing suspicion about whether China was being transparent. The prominent doctor who was arrested and later died of COVID-19 was Dr Li, who raised the alarm about the country's coronavirus outbreak. Li sent warnings of a deadly virus on social media (Kirton, 2021). The Chinese government moved to downplay the emergency. Li and seven others were arrested for spreading rumours.

Nevertheless, notwithstanding sustained criticism against the WHO and China, the pandemic had already spread to most if not all countries. It has gone on to overwhelm public health facilities and inflicted socio-economic devastation that will take years to redress.

There was a need for the world to react, and central to this reaction was the need to ensure that the spread of the virus was halted. One would have thought that cooperation, unity, and solidarity were words that were going to characterise a global response to the pandemic. However, what transpired was the total opposite, as populism, nationalism and the politics of blame soon took centre stage. To protect their interests, nation-states-imposed lockdowns, suspended air travel, imposed curfews, closed schools and universities, and decreed that face masks had to worn when in public and people had to practise social distancing (Bhutia, 2021). While these measures were being implemented, in the background, pharmaceutical companies were in a race against time to develop vaccines that could respond to the virus. Billions of dollars were poured into research and development as the rush to have effective vaccines was driven by the socio-economic devastation caused by the virus.

However, Iwuoha et al. (2020) argued that lockdowns are for rich countries. In poor countries, where living conditions are characterised by the prevalence of slums and informal settlements, where the economy is in the hands of a few and where people have no access to water and sanitation services, people are bound to disobey lockdown regulations. Moreover, rich governments have been able to offer stimulus packages worth billions of dollars; they have been able to furlough people to ensure that while they respond to the virus, people would be able to afford the necessities for survival. In developing countries, such has not been the case. Already cash strapped before the pandemic, lockdowns have not been accompanied by stimulus packages and thus people, in search of income, have often broken lockdown regulations, further compounding efforts to stem the spread of the virus (United Nations, 2020). The global response to the pandemic has not been equal; developing countries with constrained resources have been at the mercy of developed countries with regards to the resources needed to tackle the pandemic. When the WHO declared the virus a pandemic, it was the beginning of a global competition to see which country would develop a vaccine first. It was the beginning of the great power competition between Russia, China, and the West (USA in particular), but there were more than 30 other countries which were also engaged in the rush to find a vaccine (Wouters et al., 2021). By early June 2020, government and private laboratories, university research labs, medical institutions and pharmaceutical companies were working on 133 possible vaccinations. The rush to produce a vaccine reinvigorated the great power competition between China, Russia, and the U.S who are all keen to use their knowledge about vaccine development as diplomatic tools. Kirton (2021) argued that the United States was lagging Russia and China, who were consolidating coronavirus vaccines as their new soft power tool and expanding their influence. Generally, it is argued that in times of pandemics or public health crises, a testimony to the effectiveness of a country's health care system, its technological development, and the sophistication of its scientific research can be seen in its ability to produce effective vaccines. Within the context of great power politics, a country that could produce (promptly) an effective vaccine was likely to expand its sphere of influence via COVID-19 vaccines. The need to produce a vaccine saw countries putting their national interest first rather than advocating for international cooperation and coordination. However, the vaccine diplomacy race was not only being played out between great powers, as there were regional powers who were also keen on leveraging on the new- found vaccine diplomacy. For example, India has been wooing South Asians with its vaccine friendship drive aiming to enter markets and compete with Chinese vaccines (Bochkov, 2021).

#### 4. VACCINE PRODUCTION IN THE EAST AND ITS STIGMATISATION

The production of a vaccine was always going to be a geopolitical affair driven by great power politics. There was always going to be tension between the West and the East. Vaccines developed by Western companies were always going to be seen as trustworthy and effective and produced by companies in stable countries, unlike those in the East (France24, 2021). Since the pandemic erupted, vaccine development has been dominated by the well-known Western firms Moderna Inc, Pfizer, AstraZeneca, Johnson & Johnson, BioNTech, GlaxoSmithKline, Novavax and Sanofi. In the East, Russia's Gamaleya National Research Centre of Epidemiology and Microbiology (which produced the Sputnik V), China's Sinovac (the biopharmaceutical company behind the CoronaVac) and the Sinopharm Corporation are the most notable vaccines produced in the East and have since gone on to see an increase in usage in developing regions.

When, in August 2020, Russia claimed to have registered the first COVID-19 vaccine (Burki, 2020), dubbed Sputnik V, following two months of laboratory trials, the announcement was heavily criticised and labelled as premature by many Western governments and scientists. US officials called it a "Russian roulette" due to the limited time for its development (Bochkov, 2021). The EU cautioned Russia against gambling with the lives of millions. While countries in Asia, Africa and South America did not openly criticise Russia, they were cautious in their approach and argued that should the vaccine meet all scientific standards, they would probably consider it. It was expected that the West would ridicule Russia, but this paper argues that such criticisms were not born out of Russia's lack of scientific standards in vaccine production, but rather that geopolitical issues were at play, issues around Crimea, the poisoning of anti-corruption activist Alexei Navalny, Nord Stream 2, allegations of spying and espionage, and allegations of interfering in the US elections. Therefore, one may argue that because the vaccine was from an adversary which does not conform to Western standards, allowing the vaccine to expand beyond Russian borders would expand that adversary's sphere of influence. Hence, from day one, the Sputnik V vaccine was never accepted in the West. It became a huge geopolitical issue, as evidenced by the US pressuring Brazil not to authorise the usage of Sputnik V even though the US itself was engaged in vaccine nationalism (Rowland, Ruahla & Berger, 2021). Mistrust around Sputnik V stemmed from what Western scientists said, namely that the vaccine was yet to complete critical, late-stage clinical trials to determine its safety and effectiveness. In the latter months of 2020, the United States, Canadian and British governments all accused Russian state hackers of trying to steal vaccine research (Smith & Bradley, 2020). Russian officials denied the accusations and said that their vaccine was based on a design developed years ago by Russian scientists to counter the Ebola virus. In the beginning, the EU dismissed the Russian vaccine, arguing that Russia's global coronavirus vaccine supply campaign was a propaganda stunt by an undesirable regime. Karcic (2020) observed that realism manifested itself where the vaccine development processes became centralised and self-serving. Politics clouded the science behind the Russian development of its vaccine, even though the vaccine Sputnik V has been authorised in over 60 countries worldwide as of April 2021. Rather, great power politics and the competition for global influence overtook the need for collaboration, solidarity, and unity.

Like Russia, China's development of its own Sinopharm and CoronaVac vaccines was not received with open arms in the West, largely because of great power politics, where

major powers were locked in a global race for a vaccine. Like Russia, China is seen as the biggest threat to US hegemonic power, thus the US, its allies and Western media have downplayed the Chinese vaccines, often associating them with shortcuts, and being untrustworthy and lacking in scientific rigour (Wu & Gelineau, 2021). China is struggling to get the World to trust its vaccines. That mistrust and the reliance of dozens of poorer nations on China to inoculate their populations could set the stage for a major global political headache if citizens offered the Chinese vaccine feel they are being given an inferior product (Marlow, Msngi, & Lindberg, 2020). For those countries that have not yet secured a vaccine, China may be the only solution. The potential use of its vaccine by millions of people in other countries allows China both to repair the damage to its reputation from an outbreak that escaped its borders and to show the world it can be a major scientific player (Wu, 2020). Even though the Chinese vaccines may be of high scientific standards, past scandals have damaged its own citizens' trust in its vaccines, with manufacturing and supply chain problems casting doubt on whether it can be a saviour (Wu, 2020). However, despite the continuous criticisms around Chinese vaccines, as of September 18, 2021, China's Ministry of Foreign Affairs announced this that it had delivered 1.1 billion vaccine doses to more than 100 countries during the pandemic (Jennings, 2021). Chinese vaccines were seen as likely to go to countries with no other alternatives, thus regulatory approval was likely to be quick and hassle-free (Marlow, Msngi & Lindberg, 2020). To ensure potential customers of the safety and efficacy of its vaccines, in October 2020, 50 diplomats and ambassadors from African countries were given a tour of the Sinopharm Group Co. facility where the vaccines were being produced.

It is not surprising that vaccines produced in the East receive criticism from the West. While China and Russia are also directly competing for the same vaccine markets, both countries are beating the West at vaccine diplomacy, and are using coronavirus vaccines to expand their influence (Smith, 2021). Beijing and Moscow are marshalling the vast powers of their states to develop vaccines for domestic and international use, accompanied by grand claims of scientific and manufacturing prowess. Although Beijing and Moscow deny it, experts say they are beginning to see how the strategy of selling or donating their vaccines abroad is allowing them to expand their influence (Smith, 2021). Should this be the case, it would be of grave concern for the United States and other democracies. China and Russia are not just winning at vaccine diplomacy, the U.S. and others aren't even in the game yet. Washington and its allies have instead chosen to prioritise their domestic populations, keeping most doses at home, and causing resentment abroad (Smith, 2021).

## **5. THE PROBLEM WITH VACCINE NATIONALISM**

The realist theory in international relations assumes that humans are selfish and are motivated by self-interest. The pandemic has introduced new terminologies that the world was not familiar with, such as "social distancing", "flattening the curve" and "furlough". There has also been a new phrase in use among experts: "vaccine nationalism". Vaccine nationalism happens when governments (mostly wealthy countries) sign agreements (contracts) with manufacturers to supply their populations with vaccines ahead of them becoming available for other countries (Aljazeera, 2021). Even before COVID vaccines had completed the final clinical trials, wealthy countries such as the US, Britain, Japan, and the those in western Europe had signed deals worth billions with pharmaceutical companies to ensure that they would be first in line to be supplied with vaccines when they became

available (Aljazeera, 2021). By August 2020, rich countries had already secured more than 2 billion doses of vaccines. Conversely, there were considerable challenges in acquiring vaccines for low- and middle-income countries. By the time pre-orders began rolling in in early August of that year the United States had secured 800 million doses of at least 6 vaccines in development, with an option to purchase around one billion more (Aljazeera, 2021). The United Kingdom was the world's highest per-capita buyer, with 340 million purchased: around 5 doses for each citizen. It became clear that the world was witnessing the nationalisation of vaccine production and distribution (Aljazeera, 2021). Arguably, vaccine nationalism is not the most appropriate approach in seeking to reduce the spread of the virus. Limiting the availability of and access to vaccines risks keeping the virus alive in poor countries. If vaccines cannot reach countries in sufficient numbers, the virus will continue to disrupt global supply chains, thus affecting developed countries, regardless of vaccine nationalism (Weintraub, Bittom & Roseberg, 2020). Vaccine nationalism has a long history. For example, when swine flu pandemic, caused by the H1N1 influenza virus was at its peak in 2009, rich countries secured deals for vaccines before they were available. The same process unfolded when the HIV pandemic was at its highest level, with poor countries struggling to access lifesaving medication as the costs were too high. Nevertheless, it should be noted that rich nations committed themselves to helping poor counties through the COVID-19 Vaccines Global Access (COVAX) scheme. For example, the G7 countries committed themselves to ensuring that at least 20% of the population was vaccinated in low-to-middle income countries by the end of 2021 through the COVAX scheme (Huizen, 2021). It is important to debunk the notion that only poor countries will be affected by vaccine nationalism. The global economy is at risk of losing \$9.2 trillion if developing countries are not effectively catered for in the vaccine rollout (Oxfam, 2021). While pharmaceutical companies are producing millions of doses of vaccines, it might seem as if there are sufficient to go around, but vaccine nationalism has become a stumbling block in ensuring low- and middle-income countries have access to vaccines. Even though rich countries may nationalise vaccines, the more people the virus infects, the more likely it is that further mutations will occur, and it is inevitable that an escaped mutation will eventually surface. The new mutation is then likely to become the dominant strain and will find its way back to our shores, setting off a whole new set of infections in those vaccinated against only the old variants (Aljazeera, 2021) and did this tale place, for example, as the pandemic has progressed, new coronavirus variants have been detected around the world, B.1.1.7 (the variant first seen in the United Kingdom), B.1.351 (the variant first seen in South Africa) and P.1 (the variant first seen in Brazil) and the omicron variant, B.1.1.529, designated by the United states of concern (White, 2021) and (United States Food and Drug Administration, 2021)

The rand cooperation argued that the unequal allocation of vaccines, coupled with vaccine nationalism could potentially cost the global economy up to \$1.2 trillion a year in GDP terms. While some countries may eventually get the virus under control, if it is still prevalent in other countries, there is likely to be a global economic cost associated with the pandemic (Hafner, et al., 2020). Vaccine nationalism could cost the global economy up to \$1.2 trillion a year in GDP and If poorest countries cannot access vaccines, the word would stand to lose between \$60 billion and \$340 billion a year in GDP (Rand Cooperation, 2020).



## **6. COVAX AS A MEASURE TO CUSHION THE POOR AGAINST VACCINE NATIONALISM**

Vaccine Nationalism and the difference in purchasing power between poor and rich countries meant that the poor were on the back foot in terms of vaccinating their populations. Developing countries are lagging in the race to end the coronavirus pandemic through vaccinations, and without credible means to ensure access they are likely to contribute to prolonging the pandemic (Shah, Steinhauser & Solomon, 2020). COVAX is one of three pillars of the Access to COVID-19 Tools (ACT) Accelerator, which was launched in April 2020 by the World Health Organization (WHO), the European Commission, and France in response to the pandemic (Wouters, et al., 2021). This response brought together the private sector, civil society, governments, global health organisations, scientists, and manufacturers with the sole aim of ensuring unhindered, equitable and innovative access to COVID-19 treatments, diagnostics, and vaccines. The COVAX pillar focused on vaccines seeks to ensure that all people in all corners of the world regardless of their income can access vaccines when they become available. Shah, Steinhauser & Solomon (2020) noted that vaccine nationalism is hindering efforts to ensure that poor countries have the resources they need to fight the pandemic. With developed nations having secured vaccines and begun vaccination drives the trajectory of the pandemic had shifted away from developed nations to poor countries which are often characterised by deteriorating infrastructure and lack of capacity to enforce COVID-19 regulations. The COVAX scheme had initially earmarked 240 million doses of vaccines to be delivered to 92 low- and middle-income countries by the end of May 2021. While it aimed to deliver 1.8 billion doses to 92 low- and lower-middle- income economies, it had shipped only 1.1 billion doses by February 2022 (Loft, 2022). There is already a huge gap in the global vaccination process. The lack of vaccination in poor countries can create problems for the global economy. There is the general fear among epidemiologists that the inability to vaccinate the poor countries could leave large reservoirs of the virus circulating, thus increasing the possible of mutation (Steinhauser, Bariyo & Emont, 2021). COVAX was able to secure \$6bn (£4.3bn), but the scheme contended that it needed another \$2bn to meet its target for 2021. The US government in December (2020) pledged to provide \$4bn while the UK provided \$734m (BBC News, 2021). However, the WHO-backed programme for equitable vaccination distribution has been hampered by rich countries pursuing their own vaccine agendas. COVAX has been able to secure deals with Pfizer Inc., Johnson & Johnson and Novavax Inc. However, these companies have also signed direct deals with governments, which again limited the likelihood that vaccines can be allocated to the COVAX scheme in a timely manner. Moreover, the problem with the COVAX scheme is that many countries have come to rely on it, but the scheme itself does not have a steady supply of vaccines because of vaccine nationalism. WHO Director-General Tedros Adhanom Ghebreyesus urged wealthy nations to share vaccine doses with COVAX, saying the goal of equitable distribution was “in jeopardy” (Aljazeera, 2021). Vaccine nationalism has seen countries centralising vaccine supply and restricting key export of resources needed in the production of vaccines in what the WHO called a “grotesque” supply chasm between rich and poor nations, dealing another blow to the prospect of global solidarity in fighting the COVID-19 pandemic. The pandemic has affected all sectors globally, hence the WHO argues that rich countries have a role to play in ensuring no one gets left behind in the vaccination process. By 2020, rich nations, representing just 14% of the world's

population, had bought up more than half (53%) of all the most promising vaccines (BBC News, 2021). Vaccine nationalism is not the approach one should be taking, rather cooperation is key in the quest to ensure effective resource utilisation.

## **7. THE NATIONALISM OF VACCINES AS BARRIER TO FIGHTING COVID-19**

The Lancet medical journal, using the analysis of data from 20,000 participants in Phase 3 trials suggests that the two-dose Sputnik V vaccine offers more than 90% efficacy against symptomatic COVID-19 (Jones & Roy, 2021). The results indicate that Sputnik V is among the top-performing vaccines, along with the Pfizer/BioNTech and Moderna jabs that also reported efficacy exceeding 90%. Sinopharm's Vero vaccine achieved 79% efficacy in a Phase III study conducted in 10 countries. In a separate study in the United Arab Emirates, it achieved 86% efficacy. The efficacy of Sinovac's CoronaVac vaccine ranges from 50–78%, according to preliminary studies from Brazil and Indonesia. In clinical trials, the J&J vaccine showed 66% overall efficacy against COVID-19. From this it can be argued that vaccines made in the East are of a similar standard to those made in the West. Both vaccines are effective when it comes to preventing symptoms of COVID-19 and possibly preventing death. However, the geopolitical stigmatisation of vaccines from the East remain heavily ridiculed, often obscuring the scientific input behind their creation. Monyae & Nkala (2021) criticise the politics of blame by the West and argue that, unlike Russia and China, they have nationalised vaccine production whereas China and Russia have donated vaccines to other countries in need. In support, Bochkov (2021) reveals that Russia and China will stay committed to their diplomatic rhetoric of multilateralism with their promise to deliver vaccines at competitive prices worldwide. China is part of the COVAX global vaccine partnership, aimed at making inoculations more readily available to less developed countries. Vaccine Nationalism by the West has allowed other powers to use vaccines as a means of diplomacy. Russia and China are using vaccines developed by their scientists to bolster relationships with allies and forge new partnerships in countries like Mexico and Egypt. Arguing from a US foreign policy perspective, Smith (2021) explains that the US has lagged behind in vaccine diplomacy because, like the EU, distributing vaccines to developing regions is hinged on COVAX. Hence, other countries such as Russia and China, and to a lesser extent India and Israel, have stepped into the gap, via vaccine donations, sales and even agreements to build manufacturing plants in key countries. The Rand cooperation argued that vaccine nationalism is a significant barrier to defeating the pandemic. Vaccine nationalism can have several negative implications for the production and equitable distribution of potential vaccines across the world. Firstly, while the competition to produce an effective vaccine between great powers such as Russia, China and the US could ensure the successful development of vaccines, increased geopolitical competition could encourage countries to cut corners on vaccine development, and speed up trials to satisfy public demand (Hafner et al., 2020). This would then result in quicker but riskier regulatory approval. Should these vaccines have severe side effects or prove ineffective, this could, in turn, erode public trust in vaccines and complicate national vaccination plans. Secondly, although the current focus is on the development of vaccines once they have been developed and made available, they ought to be produced and administered at scale. The process of vaccine manufacturing is complex (Hafner et al., 2020). The type of vaccine will determine the type of infrastructure needed and this could be a challenge for poor countries that may not possess adequate systems to deliver and

administer doses that have been manufactured in different environments, mostly found in the wealthier countries. Additionally, the elements or components needed to make a vaccine are usually sourced from different geographical locations that specialise in specific stages of the production process (Hafner et al., 2020). A nationalistic approach to vaccine production could lead to global vaccine supply chains being interrupted if some countries hoard the key inputs, causing production delays. Thirdly, in a bid to secure vaccines, rich nations have secured millions of doses through direct negotiation with the manufacturer. These bilateral agreements affect the pricing, and the availability of vaccines as wealthier nations buy up the already insufficient stock available (Hafner et al., 2020). A nationalistic approach where each country is thinking about its own needs could eventually lead to the inadequate supply or allocation of available vaccines, thus favouring wealthy countries and negatively affecting poorer countries. Geopolitics and nationalism of vaccines are therefore not the approaches to dealing with the pandemic. Rather, the nationalism of vaccines is a barrier to fighting COVID-19 which has further divided the globe between those who have and those who do not.

## 8. CONCLUDING REMARKS

From the outset, it was expected that rich countries were going to go all out to secure vaccines for their own populations, regardless of the interests of other states. The realist approach to international relations reflects that nation-states are selfish and are driven by their own interests, even if these are at times disguised as moral concerns. It was not surprising to observe how Western countries rushed to secure deals with manufacturers for vaccines even before they became available. The pandemic has revealed that the concepts of unity and solidarity do not exist in times of crisis. Sadly, rich countries that have the financial power have been able to stock up on vaccines, while poor nations have had to depend on COVAX to access them. Receiving vaccines through the COVAX system is time-consuming as manufacturers prefer dealing directly with countries, hence poor countries must make do with the little they have. Russia and China have stepped in to fill the void left by the West that has nationalised vaccine production and distribution. The West has criticised Russian, and Chinese made vaccines fearing that should these vaccines be globally accepted they will increase the sphere of influence of the two countries. Rather than nationalising vaccines, Russia and China have been donating vaccines to poor countries, setting up loan facilities so that poor countries can purchase them and committing themselves to a multilateral approach in the production and distribution of vaccines. Realism is reflected in the response of countries regarding the pandemic, where national interests have superseded global cooperation and solidarity. Geopolitics and nationalisation of vaccines are not the desired approaches, rather a long-lasting framework built on cooperation and coordination is needed.

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