## COVID-19 and Global Governance: Waking Up to a Safe New World

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The COVID-19 pandemic has infected millions and killed more than two hundred thousand globally. After months of shutting borders and imposing lockdowns in desperate efforts to stop the spread of the disease, countries are now starting to ease restrictions and reopen for business.

COVID-19 is a once-in-a-lifetime threat to humanity that has inflicted immeasurable suffering on billions of people. Yet, as the collateral damage unfolds, the response has been astounding for at least two reasons.

First, the difference in national responses to COVID-19, even among developed countries, could not be more stark. Most of the Group of Seven (G7) nations, where rapid responses to prevent and stop the virus were expected, instead demonstrated denial, inaction, and delay. The numbers tell the story: the United States, France, Italy, Japan, and the United Kingdom are responsible for almost two-thirds of the total cases of infection and deaths. Meanwhile, the governments in Hong Kong, New Zealand, Singapore, South Korea, and Taiwan have fared much better and are now setting standards for pandemic preparedness and rapid and effective responses.

Second, some countries are politicizing the pandemic. The United States, Germany, Japan, and the United Kingdom are blaming China for its lack of transparency and want to hold it accountable for allowing the virus to spread globally. Speculations about the origins of the virus are adding further political controversies. U.S. President Donald J. Trump accused the World Health Organization (WHO) of being slow to warn the world about the real threat level and for being an apologist for China. Japanese Deputy Prime Minister Taro Aso even referred to the WHO as CHO, the China Health Organization. Trump went a step further and halted U.S. funds to the WHO. His decision is part of his strategy to deflect responsibility for his administration's mishandling of the crisis. Other world leaders' proposals for a postmortem of WHO actions reflect a palpable disquiet with its management of the pandemic.

## SECURITY AND THE POLITICS OF GLOBAL HEALTH GOVERNANCE

The pandemic has highlighted the lack of appreciation by leaders and policymakers for the increasing threat of emerging infectious diseases to national security. Outbreaks of highly pathogenic pandemics like COVID-19 are regarded as black swan events—low probability and high

impact. Not since the 9/11 terrorist attacks in the United States has the importance of preparing for black swan events become so consequential to national security planning around the globe.

The entrenched views of what constitutes a threat to national security are often skewed toward military threats such as weapons of mass destruction. Thus, military and defense expenditures trump improvements in health-care systems. It is not surprising that even in less-developed countries, defense and military expenditures are much higher than health-care systems, which make up only about 10 percent of total government expenditure. Moreover, interest in biosecurity is focused more on preventing biological threats coming from deliberate and malicious use of dangerous pathogens than on emerging infectious diseases.

The pandemic is also a reminder that health security is critical to national security, and that countries with weak health systems are poorly equipped to mount a strong defense against the massive onslaught of an unseen enemy. Pouring funds into building up sophisticated military surveillance capabilities is no match for and of little value to the much-needed global and national diseases surveillance systems that can prevent, detect, trace, and respond to a rapidly spreading virus with lethal potency.

In the aftermath of COVID-19, it may do well for countries to bring health security—the free-dom from diseases and access for all to primary health care—back to mainstream national security thinking, which currently prioritizes military threats over others. In this time of crisis, the world should heed UN Secretary-General Antonio Guterres's urgent plea to "end the sickness of war and fight the disease that is ravaging our world. . . . Time to put armed conflict on lockdown and focus together on the true fight of our lives."

## SECURITY AND GLOBAL ECONOMIC GOVERNANCE

The rapid spread of COVID-19 has dealt a devastating blow to people's lives and economic security. As businesses shut and international travel came to a halt, COVID-19 was no longer just a health crisis but also an economic crisis of global proportion. The International Monetary Fund considers this economic crisis more severe than the 2008 global financial crisis, and the worst recession since the Great Depression of the 1930s.

The failure to avert the twofold crises is a failure of global leadership and governance. Increasing U.S.-China tensions are also hampering efforts to deal with the crisis. The nature of global leadership required to deal with this global health crisis, however, is predicated on effective leadership at the national level. Arguably, the Trump administration's prevarication and lack of action, as well as the lack of transparency by the Chinese government and its local administration, have had global consequences, costing lives and jeopardizing economic security.

COVID-19 exposes the deep fault lines in international economic governance, which is marked by widening income disparities. The lockdowns have seriously disrupted food and manufacturing supply chains and increased the insecurities of employment in the gig economy. The pandemic has also heightened the vulnerabilities of migrant workers, whose protection and well-being are

not necessarily guaranteed given that global norms of social protection are not widely institutionalized. The only bright spot is the major advances in digital technologies that enable greater interconnectedness via online platforms. Were it not for these technological developments, the lockdowns would have had even more severe consequences.

The development of stronger national health systems can not only improve basic health-care services, but also strengthen the economic resilience of both developed and developing countries. An infectious disease outbreak in one state can easily spiral into a global health emergency and cripple national, regional, and global economies. Asian countries that bore the scars from outbreaks such as Severe Acute Respiratory Syndrome (SARS) in 2003 and H1N1 in 2009 have made health security and economic cooperation important components of regional partnerships. For example, Association of Southeast Asian Nations (ASEAN) countries and ASEAN Plus Three (China, Japan, and South Korea) have established programs on information sharing, capacity building in technical expertise, and a regional task force for highly pathogenic pandemics.

## ENVISIONING A POST-COVID WORLD

The world faces a long road ahead to ending COVID-19. David Nabarro, the WHO's COVID-19 envoy, has stressed that until a reliable vaccine is found and can be made available, which could take eighteen months, people need to learn to live with the virus. Much needs to be done to make the world COVID-ready, particularly given the latest warning of the U.S. Centers for Disease Control that a second wave of the pandemic could occur and be more fatal.

At the national level, pandemic fatigue must not be allowed to set in at a time when medical services have to be scaled up to contain and mitigate the spread of the virus. This requires sustained vigilance and increased efforts in detecting, isolating, and treating COVID-19 cases. The examples set by Germany and South Korea in conducting thousands of readily available tests daily are instructive.

Given that countries differ in their capacity to deal with pandemics, the importance of multilateral cooperation cannot be overemphasised. At the regional level, existing frameworks of cooperation such as information and data sharing of disease surveillance and control should be strengthened. Capacity-building programs that need to be addressed include both ramping up scientific and medical expertise, laboratories, and diagnostics, and training a highly qualified healthcare workforce, among others. Countries should also increase high-level collaboration and partnerships to pool expertise, akin to establishing a global corps of medical experts.

Among ASEAN and ASEAN Plus Three countries, three areas of cooperation are noteworthy. First is the creation of an ASEAN response fund for health emergencies to address shortages of medical supplies such as test kits and personal protective equipment, as well as funding research into vaccines and other therapeutics. Second is the establishment of a regional stockpile for essential medical supplies that can be readily deployed for emergency needs. Third is preservation of open markets for trade and investments, which ensures the resilience of supply chains for essential goods such as food, medicines, medical supplies, and other essential products.

Keeping supply chains open in a health emergency is critical, especially seeing how other countries have suffered due to a lack of access to vital medical goods. Doing so necessitates lifting export bans and eliminating tariffs and other trade barriers. This is a life-saving agenda that policy-makers around the world need to immediately focus on.

In the fight against this pandemic, international institutions are essential pillars of global health governance. International support for the WHO should therefore continue, despite its shortcomings. Concerted efforts for reform of the WHO should be an imperative going forward. In these extraordinary times, good health is good politics and international cooperation and solidarity is the only game in town.