

# INTERNATIONAL AND NATIONAL SECURITY, RELATIVE POWER POSITIONS AND GLOBAL GOVERNANCE: RESPONSES TO THE NOVEL CORONAVIRUS PANDEMIC

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## ABSTRACT

This article deals with the challenges that global governance has been enduring in the 21<sup>st</sup> century and focuses on the role of the novel coronavirus pandemic over its institutions. The discussion begins with an overview of global governance, emphasizing the theoretic dichotomy in international relations literature over whether the liberal international order is dissipating or not. This will set the stage for the analysis of both national and international responses to the Covid 19 public health crisis. The article highlights how the interaction between national policies translate to the international behavior of states by linking the domestic-foreign policy divide from a qualitative perspective. As a case study, the article analyses the World Health Organization as a prime example of a global governance institution in the international system. For comparison purposes regarding the national aspect, this analysis takes the examples of the Unites States of America, China, Spain, Italy, Germany, France, Russia, Turkey and the United Kingdom as instances where national responses to the crisis translate into their international stance.

**Keywords:** National security, power, public health, international system

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## Introduction

There are two aspects to consider in the analysis of global governance in 2020; the first is to take a broad approach and investigate the effects of the CoVid 19 crisis on the global order in general. The second is a more specified method, which takes into account the key global governance apparatus of public health, the World Health Organization, as a starting point to understand how global governance within itself responds to a particular universal problem. As will be demonstrated later on, both perspectives contribute to our understanding of how the global system functions- albeit from various points.

Throughout history various global orders have been observed. Ranging from British hegemony to the time of America and the liberal world order (coined by Ikenberry), these systems all have demonstrated different characteristics, rules of procedure and types of governance measures. All of such will be explained in detail, organized through topics. The CoVid 19 pandemic tested every single international entity and actor as well as states' domestic structures. Certain states like Germany came out strong, proving the importance of premeditation and organization for emergencies, others like Italy crumbled under the stress that the disease put on their economies and health care systems. The traditional powers of the world like USA and Britain failed in many aspects of the battle against CoVid 19 in their domestic and international approaches to overcoming this crisis. President Trump's attitude towards public and global health along with his tweets and statements at press conferences all exposed the lack of preparedness in the Capital (Campbell and Doshi 2020). Emerging powers like China showed more determination and discipline against curbing the disease, gaining international appraisal against their superpower counterparts and challenging their global status. This dynamic between the United States and China is a prominent example of the stress that the status quo of the international system is under and requires an in-depth account of Washington's blunders and Beijing's calculated response on the world stage.

In the early stages of the coronavirus epidemic, actions of the Chinese Government and leaders was less than acceptable; the virus was first observed in November 2019 in the city of Wuhan, officials did not disclose of the information to the relevant authorities and even pressed charged against health care workers who reported their concern. Following the spread of the illness, China did not shift their clandestine approach as they rejected intervention from the Center for Disease Control and World Health Organization in an attempt to skew the number of cases in their favor (Campbell and Doshi, 2020). Beijing continued this trajectory until March and by then the Communist Party was under public disapproval (Campbell and Doshi, 2020). However, strict containment measures such as a country wide lockdown and cessation of daily life dropped the number of new cases to single digits, an accomplishment as recognized by international media. In an attempt to rectify the silence of the government in the early stages, Chinese officials visited the city of Wuhan. Beijing's international response follows this route as well; the government has worked relentlessly to underplay their initial mishaps and amplify their achievements. In a speech given by Foreign Ministry Spokesperson Zhao Lijan stated that "China has conducted itself as a responsible country. China's signature strength, efficiency and speed in this fight has been widely acclaimed." This statement was substantiated when the Director-General of the World Health Organization stated that China took unprecedented actions to contain the epidemic and that "China is setting a new standard for outbreak response." In contrast, the American response was categorized as "anti-globalist" by the media and President Trump received scrutiny for his uninformed commentaries regarding the virus as well as his earlier actions hindering the countries public health emergency processes. These heavy critiques stem from the President's 2018 decision to fire the entirety of the governments pandemic response team, which was put together by Barack Obama following the 2014 Ebola epidemic. The team was assembled to correct inter-departmental communications that have a say in emergency response procedures and measures, a problem which was experienced during that time. The disassembling of the chain of command structure and lack of scientific advise paved the way for the blunders of the Trump administration in response to CoVid 19. Taking advantage of the confusion in Washington, Beijing called "the political elite [...] incompetent."

More efforts were made to show China as leading the path; Beijing came to the aid of Italy's urgent need for medical equipment when European states failed to assist. Additionally, medical teams and masks were sent to Iran, and testing kits were sent to Serbia. However, it should be noted that China's ability to provide aid to other countries is consistent with the fact that production of masks, and medical supplies are mostly produced domestically, so their supply pool is much larger than others. The United States in comparison

does not have nearly as much capacity ; products in the nation's critical medical supply reserve is barely enough for domestic need, let alone providing medical supplies abroad. Regardless, Washington did offer aid to China in the early stages of the crisis, later on it was simply not viable continue similar support.

Perhaps the most vital triumph of Beijing lies in their global approach which contradicts the American isolationist politics employed by Trump; this is exemplified by the travel ban employed to restrict mobility from the Schengen area. This was done without the knowledge of most European states and received negative commentaries from many European leaders, including Angela Merkel. Therewithal, the Chinese party worked in the opposite direction, reaching out and establishing multiple diplomatic relations. Communications included central and eastern European countries as well African counties, Pacific Island states and more. By adopting the role and utilizing the tools of the global information provider, China has essentially demonstrated a superior standing than the United States during this time by enhancing much needed global coordination (Campbell and Doshi, 2020). Nevertheless, all of these successful actions have been analyzed relative to the failures of the policies and rhetoric of the United States and President Trump (Campbell and Doshi, 2020).

There is much way to be made for America to recapture the lead that Beijing has successfully taken in this instance. Domestically, the situation domestically requires attention. The White House's current chain of command structure in dealing with the issue has given less than desirable approaches, as demonstrated above. Internationally, the role of the United States in leading the way in global issues hitherto needs to be recaptured. It would be helpful if the White House is to sort the situation at home and deal with the mass confusion brought on by a lack of the chain of command. Next, a global coordination plan is key to overcome a major universal problem. This type of a response requires the emulation of the US's leadership on the international arena hitherto; by pursuing its goals through global institutions, coalitions and arrangements (Fernandes, 2020). Currently, this also requires and thus paves the way for a more integrated relationship with China on issues regarding public health. In short, the global order has undergone plethora of changes in the past decade, the coronavirus situation has amplified the challenges that have been presented to the world and it is evident that the global system is shifting into a novel scheme.

### **Nations in Crisis: A Brief Overview of Country Specific Responses**

In March 13, 2020 the World Health Organization declared the European Continent to be the new epicenter of the Covid pandemic. According to the European Center for Disease Prevention and Control there have been 1 311 066 cases which have been reported in the EU/EEA and the UK with 156 676 deaths (Team 2020). One of the primary cases of the coronavirus transmissions to Europe was seen in Italy when two Chinese tourists were diagnosed with CoVid 19 on the 31<sup>st</sup> of January. The first coronavirus death was in the northern Italian city of Padua (Spiteri et al., 2020). In March 2020, all regions of Italy reported patients diagnosed with the virus. The Italian response to this development initially was to cease flights to and from China. However rising death tolls combined with a lack of appropriate health care infrastructure pushed the Italian Prime Minister Giuseppe Conte to announce a nationwide quarantine procedure on the 8<sup>th</sup> of March. Following this action, the government also prohibited commercial activities and businesses on the 11<sup>th</sup> of March as well as the closure of all ports and international borders (Rossi et al., 2020). Cessation of the functions of non-essential businesses put the Italian economy on severe stress and 25 billion euros were given to relief efforts within the country (Spiteri et al., 2020). Under much duress the Italian health care system came to the brink of collapse and the Italian Army was sent to Bergamo to assist in handling the transportation and burial procedures of the dead (Livingston and Bucher, 2020). In April the government announced that the state would grant 200 billion euros of loans for businesses as well as another 200 billion euros to aid exports (Naisbitt et al., 2020). In late April 2020, Conte declared that a start of normalization and the opening of businesses slowly, called phase 2 would begin by early May.

The Spanish experience of the global health emergency is similar to Italian case with the first reported coronavirus diagnosis in early February in the city of La Gomera, Canary Islands. The second case of the virus was seen in mid-February in Palma de Mallorca, Balearic Islands. During this time the Spanish Director for Health Alerts and Emergencies, Fernando Simón dismissed the situation by claiming that Spain would only observe a small number of cases (Fernandes, 2020). The rising number of cases and country wide transmissions led to the town of Haro to be put on lockdown on the 7<sup>th</sup> of March, the Catalan regional

government announced that a fourteen-day quarantine would be put in place for their territories. Immediately following this declaration, the Spanish Prime Minister announced that a state of alarm was to be put in place within the whole country for the following fifteen days. With the approval of the government, the Spanish Parliament extended this state until mid-April. Widespread criticism came to the Spanish government as their lack of strict measures in response to the pandemic were inadequate to deal with such a serious threat to public health (Cherkaoui, 2020).

Perhaps one of the most successful models in dealing with a global pandemic is the German efforts against CoVid 19. Under the advisement of Robert Koch Institute the German Center for Disease and Epidemic Control the emergency was managed under a containment strategy in order to prevent the spread. The existing German National Pandemic Preparedness Plan was put in place and relieved health care workers and authorities with regards to their respective responsibilities during such a crisis. The plan projects a framework of three stages to combat a nationwide pandemic such as CoVid 19; containment, protection and, mitigation. The first case of CoVid 19 was seen in Germany on the 25<sup>th</sup> of January in Göppingen, Baden-Württemberg with five new cases being admitted in the subsequent three days. In February Germany introduced the self-quarantine rule for all individuals entering from abroad, or those who have had contact with persons infected. German flagship carrier Lufthansa decreased its flights, grounding 23 long haul aircrafts. By March 2020, the Robert Koch Institute announced that the coronavirus threat was of moderate degree in Germany and the European Center for Disease Control and Prevention declared a high degree threat within the greater continent. By March 11<sup>th</sup> the German Chancellor Angela Merkel assembled a press conference to discuss the coronavirus situation declaring that the German state would do all that is necessary both domestically and as a part of the European project (Vitzhum, 2020). Economically, the state would support companies in peril via liquidity support. The German government had been seemingly against a travel ban and closure of borders until the American decision to suspend travel from Schengen areas. This decision was stated as not being in coordination with their European counterparts and Germany received the information with surprise. By March 17 the Robert Koch Institute announced that the CoVid 19 threat level was raised from moderate to high as the number of cases of infected persons continued to rise without decelerating (Saeed, 2020). Consequently, Angela Merkel declared that the European Union had decided to ban all travel into the EU for non-EU citizens for the following 30 days (Saeed, 2020). The government banned social gatherings of more than two persons and social distancing measures were put in place, non-essential businesses like hairdressers and restaurants were ordered to close. The economic effects of these measures led the government to propose a new aid package totaling an astounding 750 billion euros which was approved only two days after its initial request (Nienaber, 2020). In May 2020 an ease on social isolation measures have been suggested.

The French response to this pandemic was not as well-crafted as their European counterpart as the country was already dealing with inner political and social turmoil due to disagreements upon pension reform. Internally, France had been dealing with the Yellow Jackets Movement which began in October 2018 as a grassroots populist movement that aimed to protest economic injustice (Zakaria, 2020). By December 2019 the movement had evolved into a social revolution, protesting against not only economic injustice but the social aspects dividing the rich and poor as well (Leclerc, 2020). When the French President, Emmanuel Macron, proposed a series of changes to the Republic's pension system, response from the public was far from positive and a country wide strike began on the 5<sup>th</sup> of December. The strikes continued into the new year and when the World Health Organization confirmed that a novel coronavirus was threatening public health in mid-January, the French Minister of Solidarity and Health announced that France was not at high risk (Méréo, 2020). The first virus related death occurred in mid-February, however the French government did not respond with adequate measures on the lines of quarantines and social distance rules. As a result, in late February, a religious gathering of 2,500 people in the city of Mulhouse caused for the virus to spread (La Dépêche, 2020). The government was too late in identifying the source of the outbreaks to Mulhouse and, the resulting wave of secondary infections swept through the country (Cherel, 2020). It was not until mid-March when Macron announced a fifteen day period of lockdown which was later extended to the 11<sup>th</sup> of May. The lockdown measures included a ban on ships, closure of non-essential businesses, schools, and travel- all of which are still ongoing.

Perhaps the most unsuccessful national response to the CoVid crisis is that of the United Kingdom. In early February, Prime Minister Boris Johnson made statements that undermined the state of emergency that

had been echoing throughout the globe. The Prime Minister's accounts clearly demonstrate that the major concern was an economic one rather than one of public health. In other words, the economic wellbeing of the state was considered more important than public health in the early days of the crisis. In his speech on the 3<sup>rd</sup> of February Johnson stated that "coronavirus will trigger a panic and a desire for market segregation that go beyond what is medically rational to the point of doing real and unnecessary economic damage." The government's attitude towards the pandemic did not change and by March Chief Scientific Advisor Patrick Vallance brought forth the idea that herd immunity would be needed in order to beat the virus (Booth, 2020). The first confirmed case of the illness was documented on the 28<sup>th</sup> of February and the virus spread throughout the country with relative ease due to a lack of government response. The official strategy was stated as being a four-phase solution with stages of containment, delay, research and, mitigation (Kobie, 2020). Public health officials advised travelers who arrived from China to self-isolate and for the general public to be alert (Russel, 2020). These inadequate measures against the pandemic and increasing public concerns led to the announcement of the Health Protection Regulations. The Secretary of State for Health and Social Care, Matt Hancock, urged the public to be cautious in their daily dealings. However, the rising number of cases pushed the government to declare the situation as a level four incident with the National Health Services utilizing all of its available resources (Razai et al., 2020). On the 27<sup>th</sup> of March 2020, Prime Minister Johnson stated via Twitter that he tested positive for the virus, would self-isolate and continue working from his place of residence. In the following days the Prime Minister was hospitalized and eventually moved to the intensive care unit. On the 12<sup>th</sup> of March 2020 the government declared that their strategy was ready to move to the next phase of delay with additional social distancing measures to be put into place, a mobile text message was sent to UK residents stating "you must stay home." Concomitantly, the Coronavirus Act 2020 was announced on the 19<sup>th</sup> and received royal assent by the 25<sup>th</sup>, granting the government emergency powers (Carmichael, 2020). Non-essential businesses, restaurants and pubs as well as sport and recreational centers were ordered to shut down until further notice. However, the government received backlash for their late response to the pandemic. Sir Lawrence Freedman claimed that the government did not demonstrate the necessary leadership needed in times of crisis (Freedman 2020). The leader of the opposition, Sir Keir Rodney Starmer criticized Boris Johnson on his lack of knowledge on the situation of the care homes (Rea, 2020). By April 2020 the British Government pushed a relaxation of the lockdown measures and announced guidelines for the procedure. By May 13<sup>th</sup> further relaxation was announced stating that persons could interact with others while maintaining social distance and exercise in open air, this situation is still ongoing.

Across the Atlantic Ocean, the experience has not been less challenging for the American party, who was involved in investigations regarding the coronavirus since the beginning of January. In early January, American health officials held a news conference bringing together key names, such as Attendees were U.S. Health Secretary Alex Azar, Centers for Disease Control and Prevention (CDC) Director Robert Redfield, National Center for Immunization and Respiratory Disease (NCIRD) Director Nancy Messonnier, and National Institute of Allergy and Infectious Diseases (NIAID) Director Anthony Fauci, in the field to brief the public on the ongoing global situation and the American efforts stating that the government had offered to assist China in their containment procedures by sending the Center for Disease Control's investigative team. Immediately after, the CDC declared that the American government was advised to take the threat of the coronavirus seriously and revise its emergency preparedness, response and, coordination strategies with regards to public health actions. A week later, on the 20<sup>th</sup> of January, the WHO declared that the first human to human transmission of the disease had taken place and in response the CDC decided to operationalize its Emergency Operations Center (Organization 2020). The White House formed the Coronavirus Task Force to deal with strategies to combat the escalating situation. Immediately after the WHO declared the novel coronavirus as a Public Health Emergency of International Concern on the 30<sup>th</sup> of January, the United States Government also declared a public health emergency due to a rising number of cases within its borders (Riechmann, 2020). The Federal Government put certain bans on incoming travel to the US as a result of the global situation restricting entrance into the country from China, Iran, and later on the Schengen Area. The Department of Homeland Security announced that persons traveling from high risk regions into the country would be subject to a fourteen-day quarantine and the CDC alerted the public to delay any international travel. By March the WHO declared the situation to be a global pandemic and specific cities and counties in

the US announced their own regulations of social distancing measures, however the enforcement of these guidelines was limited. In mid-March the confirmed number of CoVid 19 cases was above a thousand according to the CDC and the Surgeon General Jerome Adams stated that local governments would need discuss the implementation of bans on gatherings as well as closing schools and non-essential businesses (Tahir and Ehley, 2020). The severity of the situation, rising number of cases and related deaths as well as critical problems in hospital availability led for President Donald Trump to put in more effective measures to slow the spread. CDC recommended guidelines for this strategy was announced on March 16<sup>th</sup> (Keith et al., 2020). Perhaps the most severe criticism to the Trump administrations response to this pandemic was voiced by epidemiologists Britta and Nicholas Jewell where they state that should the CDC guidelines had been put into effect fourteen days prior to its original implementation, the mortality rate within the US would have been decreased by 90% (Jewell, Lewnard, and Jewell 2020). The end of March painted a drastically different picture of the country compared to just a few months ago: governors in larger states had implemented stricter bans on social distancing, schools and universities closed and non-essential businesses were shut down. President Trump deployed the National Guard to aid the relief efforts, additionally, two naval hospital ships the USNS Mercy and USNS Comfort were sent to Los Angeles and New York respectively. Although in discussion within the Presidential circle, a quarantine was not put in place for New York, New Jersey and, Connecticut to the dismay of the scientific community.

American Congressional response to this crisis came early March when the Coronavirus Preparedness and Response Act of 2020 allocated 8.3 billion dollars to assist in combatting the virus and its effects both theoretically and practically. The Families First Coronavirus Response Act was passed mid-March which gave emergency leave and more importantly, food aid. Following these two actions, Senate Majority Leader Mitch McConnell advocated another step to lessen the economic effects of the lock downs called the Coronavirus Aid, Relief, and Economic Security Act. The bill was unsuccessful and was revised under the Senate and the new bill passed without any hesitation with unanimous vote. President Trump signed the new bill and it was passed into force on the 27<sup>th</sup> of March. Further actions on economic relief were proposed and accepted by both the White House and Senate in April to the criticism of McConnell who stated that “until we can begin to open up the economy, we can’t spend enough money to solve the problem (Smialek and Irwin, 2020).” In addition to these measure, the Federal Reserve also announced a quantitative easing program to assist economic relief efforts. Additionally, interest rates were also dropped to a new low. The measures that the Fed took by cutting down the interest rates multiple times, were comparable to those of the 2008 financial crisis. Also similar to the events of 2008 were the degree of criticisms (Simialek and Irwin, 2020).

The United States’ response to the pandemic has been largely shaped by the country’s federal structure, which is not in line with the European belief that the state must lead. The diverging strategies taken by the federal states within the US both confused the general public and contributed to the lack of national response to the pandemic. President Trump and the White House have been the main recipients of widespread disapproval with regards to their communication strategies (Lipton et al., 2020). Media outlets have blamed the American leader as downplaying the crisis and failing to act in order to contain the illness early on. Trump’s response to this was that his efforts were to keep public morale up and to “give people hope (Amber, 2020).” By mid-March, the White House began to hold daily press conferences to update the media and the public on the coronavirus situation. Recognizing the severity of the internal situation within the USA, President Trump admitted that the situation was becoming hard to control as well as releasing CDC approved guidelines for the public in order to curb the speed of the spread (Dale, 2020). Within the following weeks, President Trump advocated the use of hydroxychloroquine- a chemical used in the treatment of malaria- and claimed that the drug was a major step in defeating the virus, despite having the concrete scientific proof to back these allegations. Concerned about the economic effects of the coronavirus and protests against social distancing measures, Trump stated that a relaxation period was desired.

The spread of the coronavirus worsened and by April 2020 and backlash to both the White House and Federal governments rose. Responding to critiques of the actions taken by the government, President Trump stated that he did not “take responsibility at all” and shifted the blame towards the Obama administration for not preparing for a health emergency and, the WHO for not identifying the threat earlier (Lemire, 2020). This attitude towards the World Health Organization worsened as Trump proposed to ceased its funding due to its

failure to act appropriately and adequately, claiming that the “US was leading the world (Borger et. al, 2020)”. The CDC continued to warn the government and the public against normalization beginning too soon, however in mid-May, the President expressed his disagreement with the head of the CDC, Anthony Fauci. Discussions with regards to normalizing and relaxing procedures are still underway as of late May 2020 and the number of total confirmed cases of CoVid 19 are 1,504,830 with 90,340 deaths according to the CDC.

Ranking at the 9<sup>th</sup> position of the WHO charts (as of the 20<sup>th</sup> of May 2020) of confirmed coronavirus cases, the Turkish response to the pandemic has been significantly successful compared that those of Italy, Spain and the United Kingdom. Before the World Health Organization declared a state of emergency for the international arena on the 31<sup>st</sup> of January, the Turkish Ministry of Health had already established a Scientific Advisory Board, in early January, consisting of specialists ranging from doctors to microbiologists in an effort to combat the coronavirus threat. The main functions of the Board was to provide guidelines for the public and, conduct research with regards to treatment options. The second step taken by the government was to screen passengers in airports via thermal cameras and filter out those who showed signs of the illness. Travelers from China were to be additionally screened as a measure of precaution. By the end of January the Turkish Government sent a cargo aircraft to evacuate 34 Turkish, 7 Georgian and, one Albanian citizen from Wuhan, China. The passengers were immediately quarantined following their arrival. After the WHO announcement declaring a public health emergency of international concern, all flight from China were ceased until the end of February. The government decided to close its borders with Iran following the rising number of cases and advised the Iranian government to impose a quarantine to Qom to no avail. Flights incoming from and departing to Iran were banned immediately and Turkey decided to widen the travel restriction to include Italy, South Korea and Iraq as well. Mid-March the Turkish Minister of Health, Fahrettin Koca declared that the first case of the coronavirus was confirmed in Turkey and that the sick individual had been traveling in Europe. Presidential Spokesperson, Ibrahim Kalin, announced that they had decided to close all primary and secondary schools as well as the universities. On the 13<sup>th</sup> of March additional travel bans were introduced restricting aircrafts from Germany, France, Spain, Norway, Denmark, the Netherlands, Belgium, Austria and Sweden. The rising number of cases urged the Ministry of the Interior to push harsher measures such as closing night clubs and bars. Recognizing the severity of the situation the Directorate of Religious Affairs announced that there would be a ban on prayer gatherings within the nation. The President of the Republic, Recep Tayyip Erdogan, ordered a comprehensive meeting dealing with the current situation in the country. Additionally, a group of officials and associations held a session to evaluate the status and strategy of emergency preparedness. By the 20<sup>th</sup> of March the Health Minister ordered hospitals with at least two specialists to be declared as coronavirus hospitals.

As the number of cases rapidly increased the Turkish government announced that it would restrict the mobility of people over the age of 65 and those suffering from any chronic illnesses by imposing a curfew on the 21<sup>st</sup> of March 2020. In their effort to treat patients with the coronavirus diagnosis, it was announced that a new drug called Fevipiravir was being utilized. Analysing the internal situation, the Turkish Confederation of Trade Unions publicly requested that potential layoffs to be banned and non-essential work to be stopped for a fifteen day period. President Erdogan proposed a 100 billion Turkish lira bill to aid companies and low income homes to lessen the economic burden caused by the coronavirus. Tax on medical equipment was lifted.

By the 3<sup>rd</sup> of April 2020, confirmed cases rose to astounding 20,921, to which the Chamber of Physicians declared to be far from the true number as the Ministry of Health was accused of disregarding the number of suspected coronavirus cases. A subsequent ban on 30 municipalities was put in place as well as extending the curfew to persons under the age of 20; masks were also made mandatory to wear in public. In late April confirmed cases surpassed that of China. Even more strict bans were proclaimed in early-May to confine the spread and with the month of Ramadan approaching these measures covered lockdowns on weekends and holidays. Erdogan announced that a gradual normalization process would come into effect and in a contradicting manner to the lockdowns, shopping malls, hairdressers, beauty salons were allowed to open on the 11<sup>th</sup> of May. The Minister of Industry and Technology broadcasted that automobile factories would reopen. The normalization process is still underway, and the latest confirmed number of cases is 152,587 and 4,222 deaths are recorded according to the Minister of Health.

This brief screenshot of national responses to a global pandemic cover both successful strategies and failed attempts, painting a micro picture of how the world is dealing with such a threat. However, in order to fully understand and comprehend the situation that global governance is in within the system of anarchy in international politics requires a broader approach therefore, it is imperative to analyze the state of affairs in both global and national levels to paint a coherent picture of the shortcomings, failure and, successes of 21<sup>st</sup> century global governance.

### **Narrow National Interests at Play: The Case of the World Health Organization**

As of May 2020, there is much debate over the actions of the WHO in response to the global pandemic; its institutional structure as well as its capabilities are under scrutiny by President Donald Trump and American policy makers (Gilsinian, 2020). However another interesting aspect of these accusations made by the US exists; blame is being put on the WHO for succumbing to Chinese pressure (Borger, 2020). Since the early days of the coronavirus pandemic there have been mixed reactions to the decisions made by the World Health Organization beginning with their late declaration of a public health emergency of international concern despite reports confirming human-to-human transmissions. However, these allegations were vehemently denied by Tedros Adhanom, the Director General of the WHO stating that China's measures to contain the virus should be commended.

The earliest WHO involvement in the coronavirus pandemic dates back to the 31<sup>st</sup> of December, 2019 when the Chinese authorities reported cases of pneumonia of unknown etiology in Wuhan City, Hubei Province of China to their branch office. This report also informed the WHO about an unconfirmed potential link to the Huanan Seafood Market, which signified a zoonotic disease. On the first of January a team of experts were assembled to deal with a potential outbreak situation and the next day member states of the WHO were informed about the disease in Wuhan. In the next days, the WHO issued a series of guideline to assist states in their efforts to test the illness also alerting members of possible but unconfirmed human to human transmission. Still unsure about the ongoing situation in China, the WHO ordered further investigations in Wuhan. In the emergency committee meeting on the 22<sup>nd</sup> of January, officials could not decide whether a Public Health Emergency of International Concern should be declared. Rising number of cases and international occurrences pushed the organization to do just that, only days later on the 30<sup>th</sup> (Kennedy, 2020). Despite declaring the emergency status, Tedros Adhanom stated that there was no need to disturb international travel and trade due to the coronavirus. The Director General's optimism proved ill-timed as the disease spread around the globe. Additional research and development committees were formed, and a team was sent to China. The organization also issued guidelines to assist countries with feebler health systems and warned the international community against actions breaching the International Health Regulations. Soon the coronavirus disease was declared a pandemic and alerted all states to take the threat seriously. The CoVid Solidarity Response Fund and the Solidarity Trial for Treatments were established to support WHO efforts in fighting the pandemic on the financial and medical fronts. In late April, the WHO coordinated with the United Nations to set up a task force concerning supply chains for life saving medical devices and tools. The research done during this time suggested the antiviral drug remdesivir as a useful agent to combat the effects of the novel coronavirus. Financial Times reported that the drug had failed clinical trials, however, the pharmaceutical research and development company, Gilead Sciences, stated that drug trials were inconclusive and that they would issue a statement later on (Kuchler, 2020). It was uncovered soon after that reinfection had not been ruled out and immunity passports were not being discussed as a result. In addition to these policy related actions, the WHO also took on a more media centric role, holding press conferences and releasing daily situation reports about the last-minute developments. Recognizing the impact of social media, the organization also used the social media platform Twitter to counter the abundance of misinformation. They also partnered with popular musician Stefani Germanotta, also known as Lady Gaga, in a fundraiser for health workers, raising 35 million dollars. The CoVid 19 pandemic is still ongoing as of May 2020.

The actions taken and advice given by the World Health Organization has received much criticism on multiple fronts and the aforementioned rift between the United States and China has escalated rather than alleviating the situation. Global health researcher and academic at Harvard T.H. Chan School of Public Health, Ashish Jha, has stated that the unfolding of events and WHO response will dictate how the

organization will be perceived and valued from now on. Therefore, tensions between two major powers in the WHO directly effects its role on the international arena.

Such allegations that the WHO being "too close to Beijing" came about in the initial week of the outbreak as critics charged the WHO with relying on information coming from the Chinese whose government has had a long history of covering up and censorship (Griffith, 2020). Against multiple comments, Director General Tedros Adhanom stated that "China has done many good things to slow down the virus [...] The whole world can judge. There is no spinning here." In the same speech, he also emphasized the importance of a collaborative effort in the battle for public health urging leaders to stay away from stigma (Lau, 2020).

According to Lawrence Gostin, director of the O'Neill Institute for National and Global Health Law at Georgetown University, the WHO's seemingly close ties with the Chinese Government has put the organization at an impasse- "a near-impossible situation" caused by the rapid acceleration of the pandemic. Gostin adds that the critical reason behind the seemingly close relationship between WHO and Beijing is of pragmatic origin. In this specific instance and time, alienating the Chinese, would cause more harm than good as the WHO is dependent on information arriving from Wuhan, Hubei. In the beginning of April 2020, things took a turn for the worst when the US President threatened to cut off funding to the WHO as a result of their "incompetence" in dealing with the crisis. Trump claimed in a tweet on the 7<sup>th</sup> of April that "The W.H.O. really blew it. For some reason, funded largely by the United States, yet very China centric. We will be giving that a good look. Fortunately, I rejected their advice on keeping our borders open to China early on. Why did they give us such a faulty recommendation?" America's harsh outburst was received with discontent by African states as they rallied behind the Ethiopian Director General, announcing that the African Union was behind the WHO and Tedros Adhanom. Japan, on the other hand, agreed with the United States and stated that the WHO should be called the Chinese Health Organization because of its close alliance with Beijing. In mid-April Trump made true of his threats and froze WHO funding for a 60 to 90 day period. The WHO responded by announcing the "WHO is reviewing the impact on our work of any withdrawal of U.S. funding and we will work with partners to fill any gaps and ensure our work continues uninterrupted." Philanthropist and founder of the Bill and Melinda Gates Foundation, Bill Gates stated that taking this action in the middle of a pandemic, when the world needs the WHO the most, was a mistake.

The United States escalated tensions even further when President Trump declared that he was considering to permanently freeze WHO funding in a letter to Director General Adhamon. Moreover, the President wrote that if the WTO "does not commit to major substantive improvements within the next 30 days, I will make my temporary freeze of United States funding to the World Health Organization permanent and reconsider our membership in the organization." His rationale behind this decision was to protect American taxpayers in an international situation that was clearly not serving American interests. Causing confusion and turmoil, both Trumps letter and threats were the main subject of discussion in the World Health Assembly meeting on the 19<sup>th</sup> of May. Initially aimed to discuss the global trajectory of CoVid 19 responses and future, the meeting instead focused on the conflict between China and the United States. During the meeting, Chinese President, Mr. Xi Jinping connected to the conference through videoconference and strategically committed to a 2-billion-dollar donation (Julian, 2020). Donald Trump was not in attendance and the American government, namely John Ulyot of the National Security Council, declared that this was an effort of the Chinese to cover up their initial mistakes in handling the crisis and that they already had a responsibility to give more due to their mishaps. It is worth to note that Xi Jimping's donation overlaps with the beginning of the National People's Congress, thus, the strategic action was aimed to gain popularity both domestically and internationally.

## Conclusion

Broadly analyzing 2020's global governance in the light of the Coronavirus crisis has painted a picture of an international system in confusion and under much duress. Crises are amplified and the current arrangement is cracking under the increasing stress of power politics, which aims to increase narrow national interests and maximize security, between China and the USA. This is also is playing out on international platforms, which is why a narrow illustration as such is incomplete. Global governance does not solely consist of states as a unit of analysis; it not state-to-state interactions or international politics. Focusing on the world order and global governance without international organization constellations would a serious

mishap as it has been observed over and over again that states seek place within global governance. Regardless of narrow national interests, even great powers such as, the United States and United Kingdom pursue UN Security Council approval to a certain extent. Just the fact that the American and British bring issues to the table of the Security Council is a testament to the importance of global governance institutions. However, not all schemes of global governance have proven to exude the strong position of the UN Security Council on international issues. The novel coronavirus pandemic shows the inadequate standing granted to the World Health Organization- an autonomous specialized agency coordinated with the UN by agreements and dedicated to public health issues- by states. The dynamic has also translated to other global issues and agencies as demonstrated by both the public health crisis as well as the economic, social, and cultural challenges that globalization has brought forth. The broad question still remains; will the postwar liberal world order crumble or persevere under these circumstances?

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# ULUSLARARASI VE ULUSAL GÜVENLİK, GÖRECELİ GÜÇ POZİSYONLARI VE KÜRESEL YÖNETİŞİM: YENİ KORONAVİRÜS PANDEMİSİNE YANITLAR

Aylin Ece Çiçek

## ÖZ

Bu makale, küresel yönetişimin 21. yüzyılda katlandığı zorlukları ele alıyor ve yeni koronavirüs salgınının kurumları üzerindeki rolüne odaklanıyor. Tartışma, uluslararası ilişkiler literatüründe liberal uluslararası düzenin dağılıp dağılmadığı konusundaki teorik ikilemi vurgulayan küresel yönetişime genel bir bakışla başlıyor. Bu yaklaşım, Covid 19 'un halk sağlığı krizine hem ulusal hem de uluslararası tepkilerin analizi için zemin hazırlayacaktır. Makale, ulusal politikalar arasındaki etkileşimin, iç-dış politika ayrımını niteliksel bir bakış açısıyla ilişkilendirerek devletlerin uluslararası davranışına nasıl dönüştüğünü vurgulamaktadır. Bir vaka çalışması olarak makale, Dünya Sağlık Örgütü'nü uluslararası sistemdeki küresel yönetişim kurumunun en önemli örneği olarak analiz ediyor. Ulusal boyutla ilgili karşılaştırma amacıyla, krize verilen ulusal tepkilerin uluslararası duruşlarına dönüştüğü örnekler olarak Amerika Birleşik Devletleri, Çin, İspanya, İtalya, Almanya, Fransa, Rusya, Türkiye ve Birleşik Krallık örneklerini almaktadır.

**Anahtar Kelimeler:** Ulusal güvenlik, güç, halk sağlığı, uluslararası sistem