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RESEARCH ARTICLE

COVID VACCINE DIPLOMACY ACROSS THE GLOBE: A STUDY OF THE GLOBAL SOUTH

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Abstract

The pandemic caused by the COVID-19 virus has altered the political landscape of the globe and had an effect on the day-to-day lives of people all across the world. In the previous years, political, economic, and military diplomacy were given precedence over health diplomacy; but, in the most recent year, health diplomacy has become more significant. As opposed to their roles during earlier crises, emerging nations are increasingly taking the lead in health diplomacy, particularly in countries that are still in the development stage. Especially China and India have been aggressive in their pursuit of diplomatic goals via the deployment of medical supplies and, more lately, military weapons. In this study, we examine the various strategies used by nations for vaccine diplomacy and think about the implications of its emerging norms. Keywords: Health Diplomacy, Global North and South, Vaccines, Coronavirus, Political Strategies.

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Introduction:-

The COVID-19 epidemic wreaked havoc on regional and global geopolitical structures, as well as bilateral and international interactions. It has become one of the justifications for degrading India's bilateral and global ties in several circumstances. To combat the epidemic, several governments have pursued global health diplomacy. One of them, India, has been a leader in the development of the COVID-19 vaccine. India has committed to vaccinate its citizens as well as help neighbouring nations. In Indian foreign policy, the 'Vasudhaiva Kutumbakam' has played a key role.¹ India has always been prepared to assist nations in the event of disasters such as flood, earthquakes, tsunamis, and even epidemics/pandemics. When neighbouring nations were confronted with the difficult burden of delivering treatment at the right time, medications, and vaccines, India adopted a humanitarian approach to the global health crisis and resolved to supply vaccines to the countries in question. Vaccine distribution is a critical component of India's Neighbourhood First Policy. Under the 'Vaccine Maitri' effort, India's Covishield vaccine, made by the 'Serum Institute of India' (SII), was provided to all South Asian Association for Regional Cooperation (SAARC) nations except Pakistan. The nations that are geographically near to India are referred to as India's immediate neighbourhood in this research. This endeavour seems to have caught Beijing off guard, highlighting the strategic significance of India's neighbourhood. This study aims to look at vaccine diplomacy and addresses two important questions: (1) How does the country's vaccination diplomacy affect the weakened links it has with the nations that are its neighbours? (2) To conduct research on the geopolitical and humanitarian implications of vaccine supply, an area in which China has been working to surpass India in terms of its performance via the use of vaccine diplomacy. According to this report, India's humanitarian approach has proven to be effective and is in line with the

¹ Abi-Habib, M. and Yasir, S., 2020. India's coronavirus lockdown leaves vast numbers stranded and hungry. *The New York Times*, 29.

country's overall goals up to this point. The results demonstrate that India's health diplomacy has had an effect on medical and humanitarian assistance reciprocation on a regional and global scale. As a direct result of using this plan, India was able to get medical supplies and vaccinations from other countries who were battling COVID-19 during the second wave of the epidemic.

Significance

Vaccine diplomacy occurred in the domain of health diplomacy before the COVID-19 pandemic.² On the other hand, we understand it in a different way now than we did when we were first given it. The term "vaccine diplomacy" refers to a country's ability to leverage the availability of the COVID-19 vaccine in international relations to advance its "national interest." According to Hotez (2014), it is a subfield of global health diplomacy that focuses on the administration of vaccinations or the distribution of vaccines. According to Kickbusch et al., the manufacturing, manufacture, and distribution of vaccines as public health products are integral to every facet of international health diplomacy (2021, p. 185). Perhaps the most in-demand product on the planet, the coronavirus vaccination has developed into a crucial tool for public diplomacy in international relations. International relations and diplomatic history have long been marked by the struggle to sway domestic public opinion abroad for political ends. The "major" nations' foreign policy now embraces this idea of popular diplomacy. On the other hand, using public diplomacy to use soft power on a global scale is a legal and appropriate tactic in the pursuit of a nation's foreign policy goals.³ The countries that produce the COVID-19 vaccines have used them to advance their foreign policy objectives through soft power and popular diplomacy.⁴ By purchasing far more vaccines than they require and storing them, large league salary countries have been able to advance antibody patriotism. For the purposes of this article, immunization patriotism is defined as the cycle by which wealthy nations cling to their domestically produced hits while developing and emerging nations wait till later to approach them. It has made vaccinations less accessible in low-income countries in the global south. Protected innovation or patent freedoms are one of the most daunting challenges facing clinical professionals and countries where the relationship between wellness and international strategy is evident. This, as a result, led to India and South Africa submitting a request to the World Trade Organization (WTO) for a temporary waiver of the patency right with the assistance of about 55 other nations. If approved, this would enable mass vaccination production at a reduced cost and contribute to a reduction in regional differences in immunisation coverage. Vice President Joe Biden's group issued a public statement on May 5, 2021, expressing its unwavering support for the Coronavirus vaccine patent waiver. The choice made by Biden is a critical help for immature countries as well as the WHO, regardless of the way that agreeing among all gatherings included would take some time. Regardless of whether the patent waiver may not be sufficient to totally eradicate inoculation differences, it gives state-run governments around the world, especially those with limited incomes, a reason for optimism. Strategy in the field of worldwide wellbeing incorporates antibody discretion (GHD).⁵ The term "global health" refers to the state of people's health that is impacted by and contributes to problems that traverse international borders. As a result, the normative focus placed on the achievement of universal health equity will directly lead to an improvement in the health of disadvantaged people. GHD is described as a multi-level, multi-stakeholder negotiation process that creates and manages the environment for global health policy. GHD is defined by Fauci as "winning the hearts and minds of people in impoverished nations by exporting medical care, experience, and manpower to aid those who need it most" in 2007. When one considers the political ramifications of the COVID-19 vaccine being delivered by producing nations to countries in the global south, Fauci's thesis becomes pertinent. GHD is a brand-new discipline that combines issues about international policy with global health. Fidler's concept of GHD highlights two characteristics of diplomatic action that are linked to health. Priority should be given to issues involving public health, such as pandemics and communicable diseases. Second, incorporating health into an all-encompassing strategy for enhancing international relations by employing ideas and methods from the healthcare sector to fulfil goals that are not directly related to health. In the second scenario, nations use health as a "soft power" tool to gain influence, allies, and a tactical edge in international statecraft. As a result, the term

²STUART BLUME, The Politics of Global Vaccination Policies in *The Oxford Handbook of Global Health Politics* (OUP, 2020).

³ Sharun Khan, *India's role in COVID-19 vaccine diplomacy*, 28(7) JOURNAL OF TRAVEL MEDICINE (2020), <https://academic.oup.com/jtm/article/28/7/taab064/6231165>.

⁴ Michel Leigh, *Vaccine diplomacy: soft power lessons from China and Russia?*, BRUGEL (16 Jun. 22), <https://www.bruegel.org/2021/04/vaccine-diplomacy-soft-power-lessons-from-china-and-russia/>.

⁵ Seow Ting, *Vaccine diplomacy: nation branding and China's COVID-19 soft power play*, NATIONAL LIBRARY OF MEDICINE (16 Jun. 22), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8259554/>.

"COVID-19 vaccine diplomacy" is now used all over the world, particularly in the countries that are categorised as having a low income.

Global South Versus North

The coronavirus has no geographical boundaries, making the pandemic of the last two years a genuinely global occurrence. The crisis, on the other hand, has shook the globe in various ways in different areas, with one effect being a growing imbalance between the Global North and the Global South.⁶ In order to tackle the virus, governments in industrialised northern countries, which have seen a significant number of outbreaks and waves of the disease, have invested an unprecedented amount of money, effort, and technology. Unprecedented social policies and an exceptionally cooperative scientific community around the globe came together to discover answers to put a halt to the ongoing devastation caused by the virus. Although the experience of previous pandemics may have made some countries and peoples in Africa and Asia more resistant to outbreaks, this knowledge did not prepare them to deal with the effects of the coronavirus on the recovery prospects of the Global South or to take ownership of the solutions to the problem.⁷ The pandemic has had an effect on a variety of spheres, including education, migration prospects, manufacturing, and trade, and its aftereffects are predicted to be long-lasting. The way the global crisis was handled highlighted the divide between the United States, Europe, China, and Russia's shaping power on the one hand, and the rest of the world's path reliance on the other.

The European Union (EU) has used the coronavirus epidemic to push for ambitious reforms, with a particular focus on green and digital transitions, which might give European integration a new energy and direction.⁸ However, much of this innovation took place inside the union's boundaries.

The EU did not miss to put aside resources to assist the rest of the globe in dealing with the effects of the coronavirus, which is commendable, particularly considering the crisis environment of the early months of 2020. However, despite adopting an international solidarity narrative, the union did not take advantage of the chance to rectify some of the fundamental economic and political disparities in its connection with the Global South. These recollect varieties for cash and the transport of pay, as well as a messed-up structure for supervising new commitment; trade limits; contrasts in prosperity and tutoring frameworks, expertise, and imaginative work (R&D); ceaseless competition for permission to the Global South's resources and raw parts; and significantly held certain grumblings and a shortfall of trust.⁹

Vaccine distribution remains inequitable, while debt reduction and economic assistance for low-income nations are insignificant. Because of resistance from the EU, notably Germany, changes to World Trade Organization (WTO) regulations on patents and permissions, which would have expanded vaccine production capacity, were not implemented.

This was a squandered chance to redefine donor-recipient ties at a time when the EU is seeking ways of interaction with the rest of the world based on ideas of equitable partnership. This failure underlines the discrepancies between European internal and exterior policy once again, contributing to the widening gap between the North and the South. Finally, the current condition of things exposes nations to growing geopolitical rivalry and more politicised health policy.

⁶ Rosa Balfour, *Coronavirus and the Widening Global North-South Gap*, CARNEIGE EUROPE (2020), https://carnegieendowment.org/files/Balfour_etall_Southern_Mirror_Final.pdf.

⁷ Purushothaman, U. and Moolakkattu, J.S., 2021. The politics of the COVID-19 pandemic in India. *Social Sciences*, 10(10), p.381.

⁸ Ana E. Juncos, *Vaccine Geopolitics and the EU's Ailing Credibility in the Western Balkans*, CARNEIGE EUROPE (2020), <https://carnegieeuropa.eu/2021/07/08/vaccine-geopolitics-and-eu-s-ailing-credibility-in-western-balkans-pub-84900>.

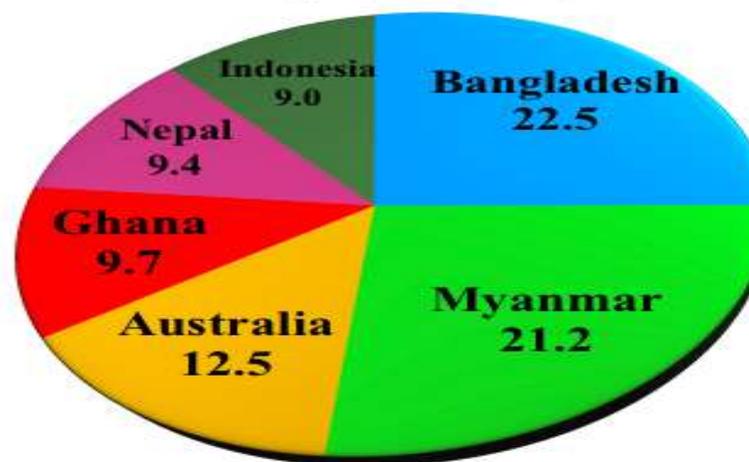
⁹ Justin McDevitt, *EU vaccine diplomacy: Will slow and steady win the race?*, EUROPE IN THE WORLD, <https://eitw.nd.edu/articles/eu-vaccine-diplomacy-will-slow-and-steady-win-the-race/>.

Indian Perspective

India is one of the world's major pharmaceutical producers, generating over 60% of the world's vaccinations in terms of volume.¹⁰ With over ten million illnesses (second only to the United States at the time of writing), it has been heavily struck by the epidemic and critically needs vaccinations to safeguard its people and economy.¹¹ While India has multiple vaccine options in various phases of clinical testing, Covishield, a modified version of the British vaccine created by AstraZeneca and Oxford University, is the major vaccine it employs for vaccine diplomacy. In April 2020, the Serum Institute of India, the world's greatest antibody creator, consented to make 1 billion AstraZeneca-Oxford immunization dosages, half for home-grown use and half for other low-and center pay countries, with simply fabricating costs to be charged. The Serum Institute had produced 40-50 million portions of Covishield by January 3, 2021, when India permitted crisis utilization of the AstraZeneca-Oxford antibody, with 300 million dosages due by July.¹² India possesses extra vaccinations for diplomatic reasons due to its poor domestic inoculation capability.

India has been involved in bilateral and, to a lesser degree, multinational vaccine diplomacy. India, as a low- and middle-income nation, is both a receiver and a donor to the COVAX programme. Despite this, it has committed to provide 240 million doses of the AstraZeneca-Oxford vaccine in the first half of 2021 as a key manufacturer.¹³ India, on the other hand, has spent a greater proportion of its resources on bilateral agreements and grants. While the initial COVAX supplies didn't arrive in countries until late February, India's bilateral contributions began in January. Donating vaccines to India's South Asian neighbours and friends as well as those in Southeast Asia and Africa is the primary emphasis of India's vaccine diplomacy. Countries that have received vaccine contributions include Myanmar and Bangladesh. In February, India expanded its humanitarian aid to the Caribbean, providing 570,000 pills to fifteen countries. These countries are home to a sizeable Indian diaspora population. To date, India has contributed 6 million doses of vaccine assistance while also exporting 29.4 million doses of vaccines for commercial purposes. Some of the countries that have benefited from India's commercial exports of vaccines include large economies such as Brazil, Algeria, South Africa, and Egypt.

As of July 15th, 2022 - Vaccine Supply to nations under India's Vaccine Maitri strategy (in millions)



¹⁰ Bawa Singh, India's Neighbourhood Vaccine Diplomacy During COVID-19 Pandemic: Humanitarian and Geopolitical Perspectives, JOURNAL OF ASIAN AND AFRICAN STUDIES (2020), <https://journals.sagepub.com/doi/full/10.1177/00219096221079310>.

¹¹ Serum Institute produces over 100 million Covishield doses in June, BUSINESS STANDARD (16 Jun. 22), https://www.business-standard.com/article/current-affairs/serum-institute-produces-over-100-million-covishield-doses-in-june-121062700594_1.html.

¹² Vashishtha, V.M., 2021. Is 'original antigenic sin' complicating Indian vaccination drive against Covid-19. *Human Vaccines & Immunotherapeutics*, 17(10), pp.3314-3315.

¹³ Mathur, D., 2022. India's COVID-19 vaccination policy-an analysis of problem, politics and policy. *International Journal of Health Governance*.

Conclusion:-

In today's globalised society, transnational transmission of health dangers is a new reality. COVID diplomacy is significant in terms of the amount of its influence as well as its long-term viability, given New Delhi's soft power strategy. As a result, India must use COVID diplomacy to achieve the following goals:

Expand mutual economic engagement for Indian entrepreneurs in medical and other related as well as non-related sectors such as medical research, medical equipment manufacturing, aviation, shipping, and hospitality (for medical tourists) with friendly countries, begin engagement with countries with strained bilateral ties, and establish Indian presence in geo-strategically important locations.

Promote international collaboration and the construction of a worldwide transnational response system for any future pandemic to help boost WHO's ability to cope with future pandemics, if any.

Leverage its measures to promote the development of medical infrastructure and the expansion of friendly countries' healthcare sectors by increasing medical exports, hence providing the much-needed space for medical start-ups as well as India's public and private actors via joint ventures.

Investigate prospects in traditional Indian medicines for health and wellbeing, including Yoga, Ayurveda, Siddha, Unani, and Homeopathy, which provide India with a unique competitive edge over other global companies.

Establish a comprehensive data and knowledge sharing platform for extended neighbourhood nations, including BIMSTEC, CAR, West Asia, South East Asia, and the Indo-Pacific, to enable appropriate and timely data exchange to make relief and aid procedures easier.

The need to provide ample space for COVID diplomacy has never been greater. With the far-reaching consequences of health security's effects and causes on a country's overall national security and stability, ignorance of this sector has enormous potential costs. While it is true that COVID diplomacy, like all other aspects of international diplomacy, will not be able to yield many fruits on its own, it is past time for it to be recognised on par with other historically significant diplomacies. Only with the passage of time will it be possible to determine how far India can stretch its diplomatic muscle via its medical industry in order to seize this chance to reshape the international order.

As a teen living in the post-COVID world, I felt the need to understand and make others comprehend the politics of manufacturing and distribution of the vaccines across the globe that are being inoculated into us to prevent the virus.

This paper serves as a medium for others to understand what goes behind the entire process of vaccinations in a language that is accessible to everyone.

Furthermore, the suggestions provided personally have the scope of using the aftermath of the excruciating pandemic to accelerate economic growth whilst highlighting the cultural prospects of India. This paper is based on secondary research however the suggestions and questions raise here are crucial to further investigate into this dynamic discourse of contemporary relevance.

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