

*On the COVID-19 Pandemic: Economy and Vaccine Nationalism*

Philip Højme (Hoejme), GSSR, IFiS, PAN.

---

Let me begin this letter in a roundabout fashion, with the conclusion. Capitalist altruism as a solution to the global inequality in vaccine distribution is at best a band-aid and, at worst, a public relations gimmick. At the current stage of the ongoing pandemic, there seems to be a possibility of returning to *normality* on the horizon, at least in the affluent world. With this possibility drawing closer, an increased interest in providing vaccines to developing parts of the world (European Parliament 2021) is developing in, e.g. Europe, where vaccines are being promised to the COVAX program.

To me, the COVAX program seems short-sighted because it resembles symptomatic treatment instead of fixing the cause. The COVAX program then turns out to be a symptom of *the current state of affairs*, a symptom that showcases how developing countries can less afford the market prices of COVID-19 vaccines. This lack of access to vaccines furthers global health inequality across the globe. The causes of this are many, and it would be beyond the scope of this short letter to provide an exhaustive list of the various reasons for this inequality. Instead, let me focus on a single factor whose impact on the symptom mentioned above can reasonably be conceived as an overarching cause: *the economic power or financial resources* available to handle and mitigate the pandemic.

It is common knowledge that various countries have different economic outputs and financial resources because of differences in, e.g. their taxation, and access to natural resources, all of which impact and dictate their current development (GDP, Gini, or HDI). I will refrain from going into a more thorough discussion of how Western colonialism has negatively impacted areas and countries commonly designated as *the developing world*. Instead, my focus on the affluent world is a starting point for a critique that wishes to expose its (Capitalism's) calculative logic. A logic which seeks to save the Westerner before turning to altruistic concerns

with the rest of humanity.

Foucault has extrapolated the relationship between capitalism and bio-power, the latter of which “was without question an indispensable element in the development of capitalism” (Foucault 1978, 140-141). This remark is one of several Foucault made on the connection between capitalism and bio-power; Foucault’s lectures (2003; 2007; 2008) link bio-power and capitalism with eugenics and racism. According to Foucault, it was the rise of bio-power as the dominant mode of government that facilitated a change in how governments govern.

The art of governmentality, which for Foucault describes the strategies by which a government exerts power over its population, slowly turned the state into an institution for creating and maintaining a healthy, strong (able-bodied) population. The state needs such a population for two reasons. Firstly, to supply its military with a fighting force to deter foreign powers from attacking or to attack foreign powers weaker than itself. Secondly, to keep the wheel turning – to increase industrial output. Hence, the altruistic concern with the developing world, which has manifested itself in the West of late, ought to serve as a reminder that there cannot be any large-scale altruism before (Western) capitalism has secured its base. And even in the West itself, the logic of the day seems to have been *each to their own*.

Case in point: the European Union. The multiplicity of nations and nationalities which make up the European Union makes this an important example of what others have called *vaccine nationalism* (Eaton 2021; Katz et al. 2021; Lagman 2021). Even within the European Union, there seems to have developed an extensive range of different responses to the COVID19 pandemic. From more *laissez-faire* approaches to more authoritative responses, the European Union has seen it all. Comparing one of the earliest lockdowns in Europe (Denmark) with the reaction in the United States of America, Franco and Gómez-Ochoa conclude that “what is clear for everyone is that every severe case and death due to COVID-19 cannot be prevented; however, understanding the different factors influencing the transmission of the virus and applying national policies congruent to these taking into account the inherent socio-cultural factors, and as promptly as possible, are crucial actions for the effective management of the SARS-CoV-2 crisis worldwide” (Franco, Gómez-Ochoa 2020, 992). However, this conclusion fails to address the elephant in the room.

The ‘inherent sociocultural factors’ that impact a country’s ability to secure the health of its population are directly tied to its economic power or financial resources. A successful overcoming of the pandemic is bound to these economic conditions. Although hardest hit early on, the affluent world is likely to achieve herd immunity before the developing world, giving it a financial edge. This advantage might enlarge the wealth disparity between the West and *the rest* down the road. With the pandemic slowly lessening in Europe, various countries have started sending protective gear and vaccines to countries in need. Case in point: Denmark

has sent almost 360.000 doses of AstraZeneca to Kenya (Christiansen 2021), and while this is a helping hand, one must remember why Denmark can send these vaccines. The country is rich enough to afford to discontinue using this vaccine because of its side effects. Another case in point: India, when the current wave of pandemic hit, slashed exports of vaccines to the African continent (Peel, Pilling, Findley 2021). This has been highly problematic since a large share of COVAX's vaccines are produced in India, thus further undermining the COVAX initiative.

The COVAX initiative constitutes a symptomatic treatment of economic inequality because it fails to address both the economic and social differences that have made certain countries better equipped to overcome the pandemic over the years. By stating that COVAX constitutes a symptom of economic inequalities between *the West and the rest*, this letter aims to provide a point from which to discuss a fairer distribution of vaccines aimed not at returning to normality but rather than helping those whose economic and social situation makes them most vulnerable (i.e. sending vaccines on a global scale to countries with inadequate health care before sending them to the West). The arbitrariness of who was lucky enough to live in an affluent country when the pandemic hit ought to suggest a need for reflections on why it is acceptable for Western democracies to prioritize their own citizens over and above those populations elsewhere who are far more at risk of dying from COVID19.

## References

- Christiansen, Rasmus. 2021. 'Danmark sender 358.000 doser AstraZeneca-vaccine til Kenya' [Denmark sending 358.000 doses of AstraZeneca vaccine to Kenya]. In *Danmarks Radio* [Danish Radio]. June 4th, 2021. Online News. <https://www.dr.dk/nyheder/seneste/danmark-sender-358000-doser-astrazeneca-vaccine-til-kenya>.
- Eaton, Lynn. 2021. 'Covid-19: WHO Warns against "Vaccine Nationalism" or Face Further Virus Mutations'. In *British Medical Journal* 372. <https://doi.org/10.1136/bmj.n292>.
- European Parliament. 2021. 'COVID-19: MEPs Want to Ensure Developing Countries' Access to Vaccines'. Press Release by the European Parliament. <https://www.europarl.europa.eu/news/en/press-room/20210201IPR96811/covid-19-meps-want-to-ensure-developing-countries-access-to-vaccines>.
- Foucault, Michel. 1978. *The History of Sexuality Vol. I*. Translated by R. Hurley. Vol. 1. 3 Vols. New York. Pantheon Books.
- . 2003. *Society Must Be Defended*. Edited by Mauro Bertani and Alessandro Fontana.

Translated by David Macey. New York: Picador.

———. 2007. *Security, Territory, Population*. Edited by Michel Senellart. Translated by Graham Burchell. New York: Palgrave Macmillan.

———. 2008. *The Birth of Biopolitics*. Edited by Michel Senellart. Translated by Graham Burchell. New York: Palgrave Macmillan.

Franco, Oscar H., and Sergio A. Gómez-Ochoa. 2020. 'COVID-19: Facts and Failures, a Tale of Two Worlds'. In *Elsevier Public Health Emergency Collection* 53: 991–94. <https://doi.org/10.1007/s10654-020-00692-7>.

Katz, Ingrid T., Rebecca Weintraub, Linda-Gail Bekker, and Allan M. Brandt. 2021. 'From Vaccine Nationalism to Vaccine Equity — Finding a Path Forward'. In *The New England Journal of Medicine* 384: 1281–83. <https://doi.org/10.1056/NEJMp2103614>.

Lagman, James D. N. 2021. 'Vaccine Nationalism: A Predicament in Ending the COVID-19 Pandemic'. In *Journal of Public Health*. <https://doi.org/10.1093/pubmed/fdab088>.

Peel, Michael, David Pilling, and Stephanie Findlay. 2021. 'Covax scrambles to make up vaccine shortfall due to Indian export halt'. In *Financial Times*. May 21st, 2021. Online News. <https://www.ft.com/content/5f38b956-9eaf-4026-99ee-b7887e38dd16>.