The Vaccine Chessboard: China’s International Interactions in Times of Pandemic, from Inter-Actor Agreements to Foreign Policy Approaches

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Abstract
COVID-19’s pandemic outbreak, and its modulations, swiftly reshaped systemic interaction patterns across the international arena. Thus, vaccines became essential goods, transforming health, from a peripheral field, into a vital tool, whose instrumentalization led to a suite of agreements and foreign policy approaches to emerge.
This paper aims to analyse, through qualitative techniques, how PRC’s external behaviours, in times of pandemic, have overlapped with medical normative frameworks and vaccine-driven trade arrangements, as a form of smart-power dissipation. In this sense, we conducted a comparative analysis of China’s diplomatic and trade relations’ evolution, in the global range, sectioned into major continental boundaries (Africa, Latin America, Asia, Western), due to the communality of challenges between actors, within the pandemic’s timespan, aspects that were not present, in this manner, within the body of specialty literature. Through the study of secondary data, together with an in-depth observation of specificities, underlined when juxtaposing the normative, paradigmatic and operational realms of PRC’s cross-border actions, we were able to interpret and present an encapsulated (each section having its own methodology-results cycle applied) overview of vaccine diplomacy’s omnidirectional deployment. Our research revealed that PRC, through distribution networks and branding of medical elements as IPGs, initially focused its efforts in former strategic areas and power voids, as means to establish new bridges, pivotal points or amplify its presence. A strategy which, albeit initially fruitful results, regarding political power poles or economic centrifugal forces’ creation, brought mixed end-results, especially when it was later met by other actors’ pushes. With this our research paves the way for prospective explorations, especially more concentrated ones, enabling a better apprehension on how smart power usage can be employed by statal and non-statal actors, as a mean to promote their own foreign agendas, in various non-traditional and connex fields such as the case of vaccines.

Keywords
Vaccine diplomacy; People’s Republic of China; Foreign policy; multilateral agreements; soft power; trade arrangements.

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Introduction
From the moment the Covid-19 pandemic became a global phenomenon it transformed health from a conceptualization, rather peripheral or adjacent to inter-actor arrangements, especially commercial agreements, into an element that took primacy in numerous agendas (Shatz, 2021). Furthermore, there is a variety of works which showcased how no singular actor possessed neither the capacities and capabilities to produce or procure the entirety of necessary goods, needed to counter such a widespread medical crisis, in parallel with its ripple disruptions, in an autarchic manner (OECD, 2020; Shatz, 2021). As both aspects merged, paving the way towards the globe’s newest negotiation table, based on increased interdependent
dynamics needed to tackle such non-human formations, vaccines and other medical advancements became universalized bargaining chips.

Albeit the emergence of vaccine-spearheaded systemic influence projections, the need to regulate network flows of medical goods or services was hampered by new agreements negotiation’s cumbersome procedures, aspects which would have fostered the establishment of coherent pandemic policies across the international spectrum. On the other hand, such gaps in present-day policies’ effectiveness favoured People’s Republic of China’s deployment of vaccine trade, in complementarity to a suite of other medical elements, as an instrumentalization of alternative diplomatic and foreign policy approaches, especially vis-à-vis of soft and normative power pivots’ dissipation, within its own decade-long foreign policy lines (Ding and Panda, 2021).

Thereafter, in the pandemic’s incipient stages, crisis management measures were marked by an exponential increase in vaccine nationalism tendencies, especially across the demos, all while actor’s behavioural patterns followed suite. In this regard, governmental and legislative agencies, already under tremendous internal and external pressures, were forced to securely forestall the doses’ supply chains, as a way of leveraging enhanced crowd immunisation, which led to Advance Purchase Agreements’ (APAs) usage by countries with higher GDP rates. This went up to a point where ¼ of the globe’s population had pre-ordered billions of doses (some of which later donated or destroyed due to expiry dates), with some states having secured, in a matter of months from the virus’ discovery, more than 60% of their national need, as part of broader vaccine-nationalist trends, which later spiralled into a true tragedy of the commons, in part due to the commonality of challenges faced and individualistic behaviours exerted (Sharun and Dhama, 2021). It can be observed that, through these agreements, higher-income countries prioritised, or even monopolised, their access to vast amounts of vaccine doses and other medical goods, sometimes at the expense of lower-income countries (McAdams et al., 2020). In addition, with every new international agreement that was signed, PRC’s image as vaccine and medical developer, manufacturer and supplier increased, as it became the largest producer of four primary vaccines and numerous secondary ones, reaching by March 2021 33% of global doses with an export rate of 62%.

So far, trade-driven omni-directional interaction assemblages in this sector are divided between two major pivotal areas, with the European Union and United States of America being at the centre-stage of normative-based distribution, especially leaning towards high-income buyers (as larger quantities are preferred), while the Republic of India spearheads shorter-term focused deliveries into emerging markets, with lesser legal prerequisites. As far as the PRC is concerned, a much broader orientation towards the whole spectrum of foreign medical collaboration networks and cooperation frameworks can be noted, alongside an exponential spike and overall repositioning underlined, when compared to mainly domestic-driven pre-pandemic markets or regional formats (Guetta-Jeanreanud, Poitiers and Veugelers, 2021). Furthermore, amid global economic slowdown and sectorial shutdown, entrenched into individualistic separation or autarchic statal behaviours, Chinese firms pledged to send abroad over 400 million new vaccine doses, although at that time it managed to immunise mostly essential personnel, high-risk persons, and diplomatic staff (Segev, and Lavi, 2021).

If we were to juxtapose these elements, with other connex elements found in the broader literature, as part of a qualitative analysis, we could observe the ways in which PRC’s international approaches have shifted during the pandemic crisis, especially in terms of trade-driven inter-actor formats of collaboration and foreign policy projections, all of which form the basis for the paper’s main research question. Thus, certain variations can be noted, through an in-depth analysis of secondary data, based on the selection, extrapolation and interpretation of specialised literature and documents, at the present juncture, in terms of systemic medical distribution patterns, compared to pre-pandemic periods. Elements and specificities that are particularly underlined when overlapping both the legal ramifications, within the internal community, and the foreign policy tendencies or avenues that were instrumentalized by the People’s Republic of China through, with and within the medical sector, in times when it engulfed almost all the Globe’s agendas, as a paradigmatic interpretation. All of the analysed juxtaposed aspects, temporarily structured within the pandemic timeframe, apart of when comparisons with the general status quo, Beijing’s external alignment or pre-existing normative frameworks are needed, are spatially coagulated into a continental logic, due to the commonality of particularities found between those actors, structure which delineates the analytic spheres within the bulk of the work into smaller-sized capsules. Each of them possesses its own modular and self-oriented literature, results and discussion, while the methodology applied remains unitary, sole exemption being the introduction and conclusion which switch from the bottom-up approach towards a singularized and uniformized bird-view scanning of the subject at hand. This is due to the fact that it enables and easier reading, simplifies the writing and maintains the structural cohesion of the works’ body, all while allowing for easier extrapolations and comparisons to be made between the continental spheres.
1. Vaccines – a global juxtaposition of commercial interests and diplomatic strategies

**Africa – feeling and filling soft power’s voids**

The modern times African continent is nothing like it was decades ago, yet, albeit a plenitude of forward leaps, the fact that it is sometimes overlooked or even shadowed by bigger actors’ interactions remains a constant, one which often forestalls its ascendency on the international stage. Such aspects generate both voids and surges in power dissipation, across a palette of pivotal strategic interests’ areas, the latter transcending its focalized or intrinsic modulations, through continental ripple-effects or spill overs, primarily in times of crisis, into a grand opportunity to project, regardless of the level, soft and hard power manoeuvrings from abroad, chances whose instrumentalization was gradually perfected by the PRC (Itugbu, 2021; LSE Ideas, 2021).

Thus, to achieve and secure its long-term strategic aims, Chinese entities, agencies, or representatives sought to strengthen diplomatic ties with their counterparts within the African continent. As way of example, the summer of 2020 was marked by President Xi Jinping’s assurance of HM King Mohammed VI of Morocco, during a bilateral conversation, that Chinese vaccine’s goal is to become a „global public good” and that its distribution is part of Beijing’s vision of a „shared future for the people of the world to work as one”, like positions taken during World Health Assembly meetings (MFAPRC, 2020). Concomitantly, Wang Yi, PRC’s foreign minister, embarked on a continental tour, as to attract and offer investment guarantees to both favourable partners and those that weren’t quite aligned, in addition to promote vaccines as IPGs (international public goods that are nonexcludable, non-rivalrous, and globally available) or as Global Commons, its meetings being held in DRC, Botswana, Tanzania, or Seychelles, by way of example to illustrate Beijing’s orientations in terms of early-stage medical cooperation against the pandemic (Zhao, 2017; Barabanov et al., 2020).

Despite PRC’s efforts to cosmeticize its image at a continental level, there were still some states which did not hesitate to show their animosity or even confront the *dragon*, believing that every dose was dripping its influence. Nigeria for instance was a strong opposant of Beijing’s actions, with even medical personnel being met by equally forceful responses from the national authorities, especially as its leaders tried to showcase how PRC’s infection rates were higher than the Global South’s and that Nigeria already possessed well-trained medical corps able to act across the borders (Staden and Wu, 2021). Thereafter, some of PRC’s diplomatic endeavours and foreign policy approaches, in juncture with its pandemic efforts, where forestalled by the nationalistic, populistic, or extremist tendencies of some of the actors, the latter determined to play either a self-reliance card or a trans-regional grandiose positioning. Aspects that can be explained as countermeasures to what Nye (2008) described as „power of co-optation” to „obtain desired outcomes through attraction”, especially since the current systemic foreign policy endeavours had unprecedented individualistic and competitive behaviours across the spectrum, aspects never foresighted, even in the most extreme, pre-Covid-19, conceptualizations of global health interactions and vaccine diplomacy (Katz et al., 2011; Kelman, 2019).

Even across the MENA regions such endeavours fluctuated, yet during a visit to Iran, Saudi Arabia, UAE, Turkey, Oman and Bahrain, Wang Yi promoted, alongside medical solutions’ distribution and donation, a multilateral vaccine production facility, similar to Africa’s CDC, as a part of broader plans to „deepen vaccine cooperation in the light of the needs of regional countries, an idea often employed across Beijing’ strategic documents and regional prospective pathways (Woertz and Yellinek, 2021).

**Latin America – vaccine-fuelled modern-day space race, on earth.**

For the Latin American continent, PRC’s relations are defined by clustered patterns of coagulated interactions, which commonly takes the form of in bloc exchanges with the Community of Latin America and Caribbean States (CELAC). This continental umbrella, originally created during the Latin American and Caribbean Unity Summit on Integration and Development (CALC) in 2010, formalised its unitary functions with Caracas Declaration’ signage in 2011, which in turn laid off its main core: the establishment of a shared common cross-border political, economic, social, and cultural space, and the alignment of prospective developmental avenues in these strategic sectors (Soria and Herrera-Vinelli, 2020; CELAC, no date; MFAPRC, 2021).

The idea of vaccine diplomacy looked like a race against the clock, especially in the Latin Americas, in which statal authorities, private entities, civil societies and even entire international communities or organisms sought to reach the finish line first and pioneer entire support schemes overseas. From this perspectives, western countries had a relatively moderate progressive slope, with the United States, for instance, sending out the first doses of vaccine by June 2021, while their eastern counterparts have already
begun shipments as early as March. Furthermore, Brazil served as a continental springboard, with July 2020’ Sinovac trials that were the first tests conducted abroad and a mark of credibility, alongside steppingstone for more in-depth collaboration assemblages, which were only rejected by Suriname and French Guyana in the end (Locke, Iancu and Kappos, 2021).

Apart of having 21 partners, which received 10 mil. doses in donations, some even under the auspices of South-South Cooperation and Belt and Road Initiative frameworks, alongside 396 mil. more in sales, out of which 230 represent Sinovac’s ¼ of global transactions, as of 2022, there are some countries that embarked on a FP rollercoaster (BRIDGE, 2022). An example would be Paraguay, one of the few to recognize the Taiwan area as independent, which received 20,000 doses through Chile and almost passed a bill to open relation channels with Beijing, of course in exchange for a more favourable approach to the Two China’s Issue, with Nicaragua being one of the players who chose the latter course of action (Karásková and Blablová 2021; Voss, Zhou and Shuldiner, 2021).

Asia – a silent dragon and a responsible power

PRC, alongside almost all its public, private or governmental entities, has taken numerous initiatives in regional multilateralism over the years, particularly in Asia, with a strong emphasis on the applanation of security dilemmas and dismissal of China’s Threat Theory, especially as the latest Lowy Institute’s Asia Power Index (2021) show a loss of comprehensive power across regional actors, with a tendency to asymmetrical power balancing acts, when compared to pre-pandemic levels. As to achieve this target, in conjunction with other strategic goals or generalised ambitions, of gaining primacy as a regional player and trans-continental actor, we can observe a wide array of soft power projection’s usage patterns within Asian countries, more so than outside the latter’s boundaries, with clear orientation towards the creation of a statal image as a „responsible great power“ (Liao, 2012). Therefore, COVID-19 pandemic´ systemic reverberations and modulations represented an opportunity to consolidate influence in Southeast Asia and capitalise on emergent political rearrangements within the ASEAN Regional Forum, amongst some of the first steps.

In respect to the crisis’ management, actual support actions were doubled, by what seems to be a praxis in Beijing’s vaccine distribution policy, or even a modus operandi for high-uncertainty times, namely a suite of diplomatic or official’s visits to soon-to-be partner countries, overlapped with normative and declarative assurances from high-ranking representatives. A perfect example of wielding tight-knitted multi-actor collaboration networks would be China’s build-up of interactions with ASEAN members, from early 2020’s Vientiane (Laos) meeting, aimed at the promotion of pandemic cooperation, all the way to 2021’s grand ceremonies held in Chongqing, which celebrated the 30th anniversary of bilateral relations, to promote pandemic cooperation all the way to 2021’s grand ceremonies held in Chongqing (ASEAN, 2021). In this context, Wang Yi intensified his visits to ASEAN countries’ frequency and hosted numerous encounters with his counterparts in the mainland, both acts seen as an indicator of regional close ties’ importance for the state agencies, and as part of global health diplomacy intersection with trade (Chattu, Pooransingh and Allahverdipour, 2021).

In terms of normative and quantitative vaccine-driven connections, a simple look at the numbers showcases how, just within early pandemic Southeast Asia, more than 25.6% of China’s international medical commitments, or over 203 million doses alone, were allocated to the area, with main buyers in the likes of Indonesia, Philippines and Thailand. Even in terms of donations and direct support offered, in the same timeframe, the region received 7.3 million (roughly 29%) out of the 25 million doses which Beijing globally distributed free of charge, a number closely followed by Africa (Khairulanwar, 2021). In this head-start game, even by December 2020, Indonesia already received its first 4 million doses, out of the 15-months plan to full immunisation by Chinese solutions since these vaccines posed lower technological challenges to manoeuvre and deposit.

Such behavioural patterns, founded on partnership and trade agreements, alongside numerous visits and even donations, contour a PRC willing to deliver on its promise that vaccines should be seen as global public goods alongside a benevolent approach driven on its policy of generosity.

2. Relations with the Westerners – between cooperation and competitiveness

East-West divides and linkages seem to have oscillated, since the first case of Covid-19 was reported, from collaboration attempts all the way to tacit struggles over vaccines’ monopoly. In this context, we can deduce, by compiling the data offered by Think Global Health initiative of the Council on Foreign Relations, that leading powers pledged 2.7 billion doses in donations, with US’ 1.1 bil., or almost 40% of donations, which also the highest per capita donation followed by Australia, PRC’s 884 mil. by July 2021,
and EU’s ½ bil. (Choi and Janke, 2021). In this sense, the EU has been relatively open to form partnerships with China, albeit it preferred to keep its stance and remain at arms lengths or at least reserved in face of vaccines developed in the East. On the other side of the scale, US’ approaches did not fluctuate, both Washington and Beijing keeping alive existing divergences, especially if we were to search for proof of effective cooperation, since a simple look at some of the Senate’s proposals, introduced in 2021, showcase a direct reference to endeavours needed to „counteract China’s vaccine diplomacy” or develop a „Marshall Plan for global vaccinations” (Congress, no date). Furthermore, the US juxtaposed its stance, although a bit late in the game, within PRC’ spheres, with actions like a 10$ per capita donation to COVAX, in comparison to Beijing’s 7 cents, broader appeal of Quadrilateral Security Dialogue to provide international public goods or assume, in March 2021, a collective donation of over 1 bil. doses to the Indo-Pacific partners by the end of 2022.

As such, Eurasian interactions consisted mainly of mutual assistance in punctual matters, whereas Brussels’ bloc showed support to PRC by specialised equipment donations, at the peak of infections, while the latter returned the favour when it was needed. Such endeavours and deals are an open door for European investors to access a 1.4 billion customers’ market and compete more fairly with mainland entities, particularly facilitated by the medical fields (European Commission, 2020). However, no matter economic or political positions, we can observe how Brussels remained reluctant to adopt Chinese-developed medical solutions, as only a handful of partners, in the likes of Hungary or Serbia (marked with even an ambassador’s visit at the airport), WB6, Ukraine, Moldova, Belarus etc., opted for large-scale vaccination with Chinese or Russian doses, until alternatives were introduced (Vucksanovic, 2021; ISPI, 2021; Leigh, 2021). If we look at the data collection from 2021, we underline how the first PRC’s vaccine tranches arrived in Hungary and Serbia with 1.5 mil. and 0.5 mil doses by the end of February (up to 4.5 and 4.2. mil by 2022), with another 57 mil. sold to other countries, on top of which 123 mil. doses were donated indirectly by Turkey (in comparison to Beijing’s official 3 mil.) as of this year (Stec and Poggetti, 2021; UNICEF, 2022; BRIDGE, 2022).

As Western and Eastern leading powers donated through strategic lenses, rather than equitability’s prism, the result was an uneven dispersion of vaccines, primarily in pivotal and focal areas, within their own regional security complexes, based on international arrangement and normative assemblages, often in bi- or tri-lateral formats, and driven by the authorities’ foreign policy perspectives. (Fetahu, 2021) Only in later stages, as some actors stepped on the pedal and others entrenched themselves, that multilateral endeavours started to sprout, an example being large development banks that allocated around 30 bil. USD to vaccine rollout in developing countries (World Bank Group’s 20 bil., and Asian Development Bank’s 9 bil.) or vaccine technological exchanges between academic and scientific communities.

Conclusions: The vaccine’s shots were silenced

During the pandemic most countries associated unique nation brands to its evolutions, in the collective imagery some nation-states were more successful as others in riding the wave, aspects which enables the later transposition of emergent socio-political and economic gains into more solidified cooperation formats or the leverage of reputational losses. If we were to extrapolate from past indicators, prior to COVID-19, PRC’s global projection of smart power was somewhat gradual in nature and with a more pinpointed range or scope at its core (Nye, 2015; Cao, 2016; Yang, 2020). A pattern that was completely reverted, towards a broader instrumentalization of national imagery projections, when shifts in soft power dynamics occurred, noticed by correlating fluctuations across indexes, as PRC, alongside other of the systems’ leviathans, had a drastic fall in the demos’ eyes, due to early political and institutional disarray, mass-media coverages, restrictive measures, and the list can go on (University of Edinburgh, 2017; Mcclory, 2019; ETNC, 2021; Szimigiera, 2022).

From that point, a plenitude of foreign policy adjustments was made, as competitive identity began to spill-over into the medical and health-related field, which led to the emergence of vaccine diplomacy as another core of multi-track omni-directional endeavours. As medians peaked, socio-political and economic sides of these cross-border capacities and capabilities’ infusions surfaced, in the form of diametral, intersected, juxtaposed or overlapped interactions between leading powers and their (now permeabilized) spheres of interests and influence. The PRC, like many actors, albeit first one of the international communities to export both the vaccine doses and such a behavioural pattern of multilateral vaccine-driven soft power network development, started to approach entire continents based on its former paradigmatic, operational and pragmatic frameworks, an aspect which can be concluded through a comparison of its overseas development finance, trade routes, commercial nodes, political affiliations etc. and early vaccine distribution or donation maps (BU, no date; OEC, 2020; Lowy Institute, 2019).
Within this mixed model of globalised specialised trade, in which doses were, initially, regarded as global sticks and carrots (tools of coercion, reinforcement or reward for entire nations), thereafter hoarded based on national or strategic interests’ aegis, we can oversee some of the actor’s efforts to frame the development, production and distribution of vaccines as common goods, which should be treated with equity. One of these was the PRC, which, from the first months, spearheaded a plenitude of multilateral normative initiatives across the globe, as it sought to adjacently infuse bits of its soft power further away than ever before, an approach picked up later by all other global actors, under similar virtuous flags. How effective were these measures and countermeasures of systemic influence dissipation, alongside the non-linear modulation and reverberations they brought, is beyond this paper, yet one thing can simply be extrapolated: numerous nodes, nexuses and interlinkages were created across the international communities’ assemblages, how they will play out is up to what the next “x” diplomacy will choose to instrumentalize what was already set in place.

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