The COVID-19 Vaccines as Extension of Foreign Policies by Other Means\(^1\)

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Abstract: Existing knowledge of the geopolitics of public health and the coronavirus pandemic indicates that states, particularly the most powerful ones (the United States, China, Russia), have used the current global crisis to strengthen their influence worldwide, in line with their geopolitical, economic, and military aspirations. Geopoliticisation of the COVID-19 vaccines have not been explored so far. Based on the qualitative analysis of the media content and statistics on the vaccines’ distribution, this article makes two arguments. First, these vaccines have become an extension of foreign policy by other means. Second, geopoliticisation of the distribution of vaccine contributes to an instrumentalisation of the pandemic, raising global insecurity and the destabilisation of states and economies on the periphery and semi-periphery. Due to this new Cold War between the ‘vaccine superpowers,’ the world has become divided into Western and the Eastern ‘vaccine-blocs.’ Within this context, the chances for multilateral cooperation to counter global threats are on a downward trajectory.

Keywords: geopolitics of vaccines, vaccine diplomacy, vaccine superpowers, geopolitical tool, Serbia

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Introduction

As soon as the COVID-19 pandemic emerged in early 2020, biotech companies, pharmaceutical corporations and research institutes worldwide began to explore potential vaccines to counter it. The World Health Organization (WHO) activated a Research and Development Blueprint to facilitate a coordinated and accelerated response to the pandemic.\(^2\) By the end of 2021, there were 137 vaccines in clinical development and 194 vaccines in pre-clinical development. The leading vaccines approved for emergency use\(^3\) at the end of 2020 and the beginning of 2021 were developed by biotech companies and research groups in China,\(^4\) the Russian Federation,\(^5\) United States (US),\(^6\) the United Kingdom (UK),\(^7\) Germany,\(^8\) and India.\(^9\) Not surprisingly, the vaccines were first developed in the most economically advanced countries that have simultaneously been the key players in the new global geopolitical games of the last decade. This period has been characterised by the melting of unipolarism under the dominance of the USA and its allies and of western values established during the 1990s with a gradual shift towards multipolarism.

The purpose of this paper is to contribute to the research on geopoliticisation of public health and the coronavirus pandemic by exploring the geopolitical dimension of distribution of the COVID-19 vaccines. Their manufacturers are situated in the states that are currently the key global players with respect to their economic, political, and military power. Thus, these countries may be seen as ‘vaccine superpowers’. Our main research question is the following: Has the administration, and distribution of COVID-19 vaccines been primarily driven by the geopolitical interests of powerful states in which the vaccines were manufactured? With respect to other states which did not produce a COVID-19 vaccine, such as Serbia, we question whether their political and economic interests have any impact on deciding which type of the vaccine they have purchased. We explore these issues by looking into the main flows of the COVID-19 vaccines from manufacturer countries to recipient states at the beginning of the vaccines’ rollout. To explore the geopolitical positioning of states, we used online media sources and published statements of national leaders. Based on the findings of this analysis, we indicate the level of readiness

\(^2\) WHO 2021b.

\(^3\) The WHO emergency use listing is a procedure for assessing and listing unlicensed vaccines with the aim of expecting their availability to people affected by a public health emergency, such as the COVID-19 pandemic. This means that each country should undertake a policy process to decide whether to give the vaccine and to whom, with prioritization specified for the earliest use.

\(^4\) CanSino, Sinopharm/Beijing, Sinopharm/Wuhan and Sinovac.

\(^5\) Gamaleya and Vector Institute.

\(^6\) Moderna, Johnson & Johnson and Novavax.

\(^7\) AZD1222 vaccine is developed by researchers of the University of Oxford, UK and the British-Swedish company AstraZeneca.

\(^8\) Comirnaty coronavirus vaccine is developed by the US-based Pfizer corporation and the German Company BioNTech.

\(^9\) Bharat Biotech.
of states, particularly the most powerful ones, to develop efficient multilateral cooperation in response to threats to global public health. In the globalized world, many health issues, besides the current pandemic, demand joint action, and partnership among various nations, disregarding their political, economic, and military aspirations. The manner of distributing the vaccines against SARS-COV-2 may be considered a litmus paper test when it comes to the readiness of states to overcome differences and agree on joint actions for the sake of public health.

The article is divided into five parts. The first section gives a short overview of the current knowledge of the geopoliticisation of the pandemic based on a literature review. A section on the methodology we used is followed by an overview of COVID-19 vaccine distribution and rollout policies seen in the US and the EU. The fourth section summarises the key findings from the empirical research that indicate geopoliticisation of the vaccine rollout. In this section we also present how foreign media commented on Serbia's success in securing vaccines at the start of the vaccination campaign. In the last section we discuss and wrap up the main points of the paper. The findings indicate that the vaccines have been used as an extension of foreign policy by other means. The rollout mirrors current global geopolitical tendencies towards a multipolar world and the shift of the power from the West to the East.

**Geopoliticisation of the COVID-19 Pandemic**

The last decade has witnessed a melting of the unipolar order under US dominance created after the fall of the Berlin Wall. The US positioned themselves in the role of global leader, by establishing and maintaining a united Europe under their leadership and the security protection of NATO, as this position was a prerequisite for taking dominance over Eurasia. The aim was to push apart the geopolitical partnership of Russia and China threatening to become the political and economic counterweight to the US. For the US, this has been of vital importance, since Russia's consolidation and China's economic empowerment contributed to decreasing the US global supremacy in the first decade of the 21st century. New military and economic powers emerged, China and Russia, while the global influence of another two big Asian countries, India, and Iran, has been on the rise. Military interventions by the US, such as those in the former Yugoslavia, Iraq, Libya, Afghanistan, and Syria, have also been parts of the country's strategy to maintain its authority over other nations.

In his article on the geopolitics of containment of the post-Cold War World, Pejić concludes that the strategy of containment that helped the US to prevail over the Soviet Union cannot be fully implemented in today's multi-polar world. Gearóid Ó Tuathail

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11 Ibid., 32.
12 Pejić 2018, 1402.
argues that in this post-modern geopolitical concept, “non-state entities are immensely influencing the strategic choices of the states thus radically changing the classical geopolitical concept out of which containment was born.”

Therefore, the US are no longer successful in countering the rising political, economic, and military powers such as China, Russia, and India. Besides, under the Trump Presidency, the US rejected economic globalization, most notably evidenced by the US-Chinese trade war, and turned towards the implementation of protectionist economic policies. It was expected that under the Biden administration, the US would return to its previous hegemonic policy, and focus on strengthening influence in the Americas, Eurasia, and the Indo-Pacific region.

Many authors argue that the evolution of the US-Sino great power competition in Asia has emerged as a key geostrategic issue in international politics. Moreover, President Trump clearly stated that China was one of the biggest challenges to US national interest. Schreer demonstrates that the US and China’s strategic behaviours in East Asia “reflect the ideas of classical geopolitical thinkers in ways that could make the management of peace and stability much more difficult.”

Markey,17 Frankopan18 and Ali19 describe the ways China transforms its national wealth and economic power into tools of global political influence. Apparently, nowhere else is China’s rapid rise to power more evident than in Africa. Alden20 and Lou21 demonstrate that China’s economic and political reach is redefining Africa’s traditional ties with the international community. The country’s huge capital investments in the heart of Europe, particularly the Budapest-Belgrade-Skopje-Piraeus (BBSP) corridor, magnifies the true potential of the ‘One Belt, One Road’ Initiative (B&RI).22

The current pandemic has not halted the geopolitical games on the global chessboard. Many authors have observed the geopolitical dimension of the pandemic and that this global crisis accelerated the balance of power shifts toward the East. Their arguments confirmed that a disease is a geopolitical issue, as Alan Ingram claimed in 2005. Ingram concludes that, following the end of the Cold War, the disease has been seen as a geopolitical affair in terms of four main dimensions: destabilisation, sovereignty, the instrumen-

13 Tuathail 2000 according to Pejić 2018, 1402.
14 Sothirak 2021.
15 Schreer 2019; Ross 1999; Allison 2017; Montgomery 2014; Markey 2020a; Markey 2020b.
16 Schreer 2019, 517.
17 Markey 2020a; Markey 2020b.
18 Frankopan 2015.
20 Alden 2007.
21 Lou 2014.
22 José Lenardo 2018.
24 Ingram 2005.
talisation of health, and the geopolitical economy. According to Ingram, “the emergence of disease as a geopolitical issue calls urgently for critical thinking about the nature of security itself and how it may be fostered in the era of globalisation.” The current globally unprecedented crisis indicates that a disease may be a threat to security at many other levels, outside the scope of public health.

A special issue of *Eurasian Geography and Economics* in 2020 presented a set of commentaries on the geographies of the COVID-19 pandemic, including geopolitics. Mionel, Negut and Mionel referred to the current phenomenon as to pandemopolitics, a fruit of the recent international context. They suggest that humanity has entered “a new geopolitical cycle in which China’s centrality cannot be ignored.” Its centrality would strengthened the process of the emergence of a multipolar world dominated by China, “who will not be shy to use all geopolitical and geoeconomics levers to discourage its competitors.”

In an article on the topic of the specificities of Serbia’s response to the coronavirus, Šantić and Antić discussed the role of aid and “coronavirus diplomacy” in this country’s relationship with China, Russia and the EU. Isabelle Ioannides has analysed the geopolitics of COVID-19 vaccines in the Western Balkans. She concludes that Russia and China have made strides in this area, while the EU lost relative power in the geopolitics at play, caught up in the difficulties of ensuring the distribution of the sufficient vaccine’ doses to its member states.

Ndlovu-Gatsheni explores the issue of the geopolitics of power and knowledge in the current pandemic, in the context of decolonisation of Africa. This continent is also in the focus of the research of Nhamo. He investigates the COVID-19 vaccines development collaboration in the BRICS (Brazil, Russia, India, China and South Africa), and its implication for Africa. The race for the vaccine and medical resources with an emphasis on the origins of the new type of competition for medical resources is dealt with in research by Alexandra Sarcinschi. She concludes that the pandemic orients the security analysis “towards a new hypothesis according to which medical resources become an important element of defining a new type of struggle for power in this health crisis, similar to the nuclear race or the conquest of territories.”

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25 Ingram 2005, 541.
26 Vol. 61, No. 4/5.
27 Mionel, Negut, and Mionel 2020.
29 *Ibid*.
30 Šantić and Antić 2020.
31 Ioannides 2021.
33 Nhamo 2021.
34 Sarcinschi 2020, 23.
The existing research indicates that the current pandemic has turned into the geopolitical issue. However, research on the geopolitics of vaccines is scarce. The aim of this article is to contribute to the scholarship in the field by filling this gap.

Methodological Approach

We used a geopolitical approach to understanding international relations, in addition to an empirical study. A qualitative content analysis of the online media narrative related to the distribution of the COVID-19 vaccines was used to find out about the purposes of the communication content, and to identify patterns in communication. We consulted online media sources from various geographical locations (the US, the EU, Russia, China, India, Latin America, Balkan countries, and others) that were available in English, as well as in the languages spoken in the ex-Yugoslav region (Serbian, Croatian, Bosnian, Montenegrin, Macedonian and Slovenian). We searched relevant media articles by using the following keywords in the Internet search engine: “COVID-19 vaccine”, “vaccination against COVID-19”, “vaccination campaign”, “geopolitics”. Because our research was limited due to the used languages, most articles found are published in English, or, in other words, are published by the British, the US and the European media.

The period studied incorporates the first two months of the global vaccination campaign: from its beginning on December 13, 2021 until February 13, 2021. This period was chosen because, at the time, the vaccines against COVID-19 were brand new and considered a ‘hot’ and highly demanded commodity, and all available vaccines had been approved by the WHO for emergency use only. For most states, the vaccines were very difficult to obtain due to the shortage thereof. The start of the global vaccination campaign was the focus of attention of the whole world, so the media gave it a lot of attention. Our intention was to explore whether this vaccination campaign reflects the geopolitical aspirations and interests of the states.

Data collected and presented is based on the official statistics of the WHO and the EU, as well as on the statistics and research related to coronavirus pandemic published in the global online database Our World in Data developed and supported by Oxford University, UK. These sources of statistics have also been used to explore the flow of the vaccines from manufacturing country to recipient state.

Overview of the COVID-19 Vaccines Distribution and Rollout Policies

In the first two months of the vaccine distribution, from 13 December 2020 to 13 February 2021, more than 171 million COVID-19 vaccine doses had been administrated world-

35 Ritchie et al. 2022.
The online global database *Our World in Data* showed that 87.75 million people living in 85 countries received at least one dose of the vaccine in this period, mainly in Europe, Northern and Southern America and Asia (Figure 1). Out of this number, 30.56% were fully vaccinated against COVID-19 up to 13 February 2021. A majority of them lived in the US (13.08 million), Israel (2.46), Germany (1.33 million), Italy (1.28 million) and Spain (1 million) (Figure 2). A majority of people who received at least one dose of the vaccine were American (37.06 million) and British (14.56 million) citizens.

Figure 1: Cumulative COVID-19 vaccination doses administered per 100 people, Feb 13, 2021 (Source: Our World in Data)

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36 As of 26 October 2022, a total of 12.83 billion vaccine doses had been administered, and 63.6 persons per 100 population have been fully vaccinated (WHO 2021c).

37 All the presented numbers related to the vaccination in this section are from the global database (Ritchie et al. 2022).
With respect to the total population share which received at least one vaccine dose, Israel was at the top of the list with 44.19% of population. The others at the top included the UK where 21.44% of the total population received at least one vaccine dose, Bahrain (14.24%), Serbia (11.51%), USA (11.08%), Chile (9.61%) and Malta (7.64%) (Figure 3). EU Member States failed to purchase sufficient doses of the vaccine. Only 1.53% of the total EU citizenship received at least one dose of the vaccine in the period studied.

**Figure 2: Number of people fully vaccinated against COVID-19, Feb 13, 2021 (Source: Our World in Data)**
Out of 85 countries which started the vaccination campaign in the period studied, a majority chose to use vaccines from manufacturers based in the US and Europe: namely Pfizer/BioNTech, Moderna and Oxford/AstraZeneca. The Russian vaccine, Sputnik V, had been approved for use by 26 countries in total, including Algeria, Argentina, Bolivia, Iran, United Arab Emirates, Serbia, Venezuela, Hungary, and Palestinian territories. The vaccines by the Chinese manufacturers were in use in Bahrain, Chile, Egypt, Morocco, Peru, Serbia, Seychelles, United Arab Emirates, Brazil, Indonesia, Northern Cyprus, Turkey, and Pakistan.

In the period studied, the United Arab Emirates (UAE) and Serbia were the only two countries in which these two maps overlapped. The UAE decided to take vaccines disregarding the nationality of their manufacturers. They administered as many as five different types of vaccines from both the West and the East (Oxford/AstraZeneca, Pfizer/BioNTech, Sinopharm/Beijing, Sinopharm/Wuhan, Sputnik V). Serbia was also an exception, as it purchased US (Pfizer/BioNTech), Russian (Sputnik V), and Chinese (Sinopharm/Beijing) vaccines at the same time.

The US vaccine strategy was based on Operation Warp Speed which was introduced by the White House in May 2020. It was aimed at accelerating the development, production,
and distribution of COVID-19 vaccines, therapeutics, and diagnostics in order to produce and deliver 300 million doses of safe and effective vaccine, with the initial doses being available by January 2021.39 Contributing stakeholders included the Department of Defense, the Department of Health and Human Services (including the Center for Disease Control and Prevention), the US Food and Drug Administration, the National Institute of Health and the Biomedical Advanced Research and the Development Authority.

By 13 February 2021, the US administrated 52.88 million vaccine doses in total, this being the highest number of doses per country in the world. Every tenth US citizen received at least one dose of the vaccine (11.08%); so, the US was the second on the list of the countries with respect to the share of the population fully vaccinated (4.21%).40

The EU implemented a centralized approach in designing and implementing policy responses to the pandemic. On 17 June 2020, the European Commission presented the European Strategy to accelerate the development, manufacturing, and deployment of vaccines against COVID-19.41 The Strategy aimed at securing the production of vaccines in the EU and sufficient supplies for its Member States through Advance Purchase Agreements (“APAs”) with vaccine producers and adapting the EU regulatory framework to the current urgency, to accelerate the development, authorization, and availability of the vaccines. This meant running a single central procurement procedure on behalf of all Member States, with a view to signing EU-level APAs with vaccine manufacturers. Those APAs would include up-front EU financing to de-risk essential investments and increase the speed and scale of manufacturing successful vaccines (“Vaccine Instrument”). In return, the APAs would provide the right – or under specific circumstances the obligation – to Participating Member States to buy a specific number of vaccine doses within a given timeframe and at a given price.42

Based on the Agreement of 18 June 2020, the European Commission was mandated to conclude the APAs with vaccine manufacturers on behalf of the Member States. All relevant vaccination policies remained within the competences of the Member State. By signing this Agreement, a participating Member State adopted the obligation not to negotiate separately for advance purchase of that vaccine with the same manufacturers.

40 Having 29.29% of population fully vaccinated, Israel was the leading country with respect to the vaccination campaign (Ritchie et al. 2022).
The APAs were financed by the European Emergency Support Instrument, a financing instrument directly managed by the Commission that allows it to provide support within the EU in case of disasters. In the context of the coronavirus pandemic, EUR 2.7 billion was allocated to support EU Member States in their immediate response, exit and recovery phases from the pandemic. Between April and September 2020, the Emergency Support Instrument provided financial support of EUR 150 million in total to 18 Member States and the UK, for the transport of essential medical items. By the end of 2021, the European Commission had paid more than EUR 2.55 billion in down payments to vaccine manufacturers.

The EU considered solely ‘Western’ vaccines, namely those produced by US, British, German, and French bio-tech companies. Under the Vaccines Strategy, the European Commission forged agreements with individual vaccine producers on behalf of EU countries. By 14 February 2021, the three vaccines authorized for use in the EU had been developed by BioNTech-Pfizer (USA-Germany), Moderna (USA), and AstraZeneca (UK). The European Commission later concluded a further three contracts that allowed the purchase of vaccines once proven safe and effective with Sanofi/GSK (France/UK), Johnson & Johnson (USA) and CureVac (Germany). Under the European Support Instrument, the European Commission reached agreements with these six companies for the purchase of the vaccines against COVID-19 once these would be authorized for use by the European Medicines Agency. In addition, the Commission concluded exploratory talks with two other pharmaceutical companies, Novavax (USA), and Valneva (France), with a view to purchasing their potential vaccines against COVID-19.

In the first two months of the vaccination campaign, a total of 21.02 million vaccination doses from the three manufacturers (BioNTech-Pfizer, Moderna, and AstraZeneca) were administered in the EU. As deliveries faced delays, the European Commission’s President Ursula von der Leyen acknowledged the EU’s vaccine rollout failures, saying: “We were late to authorize. We were too optimistic when it came to massive production and perhaps too confident that what we ordered would actually be delivered on time.” Only 1.53% of the total EU population have received at least one dose of the vaccine. The share of people vaccinated in Germany (3.27%), France (3.32%), Spain (3.04%) and Italy (2.82%) was far smaller than in some non-EU countries, such as Israel (44.19%) and Serbia (11.51%). In response to the delays of deliveries of the vaccines approved by the EU,

43 European Commission 2021b.
44 European Commission 2021c.
45 European Court of Auditors 2022, 8.
46 European Commission 2021a.
47 European Commission 2021b.
48 This is counted as a single dose, and may not equal the total number of people vaccinated, depending on the specific dose regime (e.g. people receive multiple doses) (Ritchie et al. 2022).
49 BBC News 2021.
50 Ritchie et al. 2022.
Hungary purchased Russian and Chinese vaccines independently of the EU and become the first EU country which authorized the ‘Eastern’ vaccines.

The start of this process exposed the EU’s weaknesses in implementing a centralised policy. That caused dissatisfaction within many Members States. On the other hand, states outside the EU were more successful in purchasing vaccines because they were not tied by any authority above them in decision making and taking the action.

**Geopoliticisation of the COVID-19 Vaccines’ Rollout**

In this section we present the findings of our empirical research of the media narrative and its presentation of the successes and failures by states to start administering vaccines. The Western media dedicated a lot of attention to the distribution of Chinese and Russian vaccines in developing countries. We summarized the key messages presented by the media, and the relevant published statements by national leaders. This section also presents media’s geopoliticisation of Serbia’s successful start of the vaccination campaign.

**Geopolitical Positioning of the Media**

US media was particularly keen to frame Russia and China as misusing COVID 19 vaccines to increase global influence. *The Americas Quarterly* considered this ‘vaccine diplomacy’ as “a new cold war.” The paper stressed that thanks to vaccine diplomacy, “Russia and China have stepped up their influence in Latin America, complicating President Biden’s hopes of hemispheric dialogue.” *The Americas Quarterly* accused these two countries of seizing an opportunity and stepping up to provide the developing world with their own vaccines, as the US and other developed countries “speed forward in their own nationalistic vaccine rollouts”. In this article, *The Americas Quarterly* noted that in Latin America “these efforts will bring unpredictable consequences for alliances and geopolitics for years to come.”

*Bloomberg News* accused Russia of using vaccine as a weapon in their conflict with Ukraine. *The New York Times* suggested that Ukraine turned to China, because it had been blocked from obtaining vaccines from the US. An article published in *The Week* suggested that vaccines might be also used in the opposite direction, to soften territo-

51 The research was limited due to the languages used (English and the languages spoken in the ex-Yugoslav region). Thus, most of the found articles relevant for the purpose of this research are published by US, the British and the European media.

52 Lozano 2021.

53 Ibid.

54 Krasnolutksa and Choursina 2021.

55 Varenikova 2021.
rial disputes between countries. Likewise, *Geopolitics News* optimistically indicated that countries may step into cooperation in the future, joining effort to produce vaccines, and that this could profoundly improve the possibilities of avoiding “World War III” between the US (and its allies) and Russia (and its allies). *The Diplomat* noted that the Chinese government faced sharp criticism, notably from the US, for its expansionism, tied to investments and soft loans, and for promoting their vaccines, driven by political and foreign policy considerations.

*CNN* claimed that “being first to provide the world with a vaccine would present China with an opportunity to shore up its global standing by positioning itself as a leader in fighting the pandemic, filling the void left by the US and consolidating its position as a true superpower.” *CBC News* also underlined that Russia, India and China had raced to win friends and influence through vaccine distribution: “What we see is that the countries that prefer Chinese vaccines are the ones that have supported the Belt-and-Road Initiative, meaning that as a whole, they’re favourable to growing Chinese influence.” *The Strategist* warned that “Chinese and Russian influence campaigns risk undermining Covid-19 vaccination programs.” The article suggested that Russian and Chinese media, social media and leaders shift negative portrayals of the ‘Western’ vaccines and that this might erode public trust in all vaccination programs. On the other hand, there was a noticeable lack of coverage of the ‘western’ vaccines’ shortcomings in the Western media.

According to the *Council on Foreign Relations*, the ‘vaccine diplomacy’ of China in African countries was a continuation of that country’s efforts “to frame itself as the solution to – rather than the cause of – the pandemic.” Similar suggestion was given by *The Week* in its article titled “China looks to turn vaccine distribution into diplomacy.” The article observed that while the US, Canada, and other wealthy countries “stockpile doses, enough to vaccinate their entire population multiple times over, (...) China has stepped in, offering priority access to Chinese-developed vaccines to countries in Africa, the Middle East, and Southeast Asia.”

According to narratives in the media studied, ‘the vaccine race’ did not involve only the West and the East, but also different vaccine producers. *The Strategist* indicated that “China and India are using the inoculation drive against Covid-19 as part of their diplomatic

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56 McGowan 2021.
57 Zuesse 2020.
58 Hunt 2021.
59 Gan 2020.
60 Dyer 2021.
61 Bogle and Zhang 2021a.
63 McGowan 2021, 14.
efforts to shore up global and regional ties (...) reflecting an emerging flashpoint between the two powers." According to the article:

(...) state-linked social media accounts and media outlets in both countries have amplified negative narratives about their competing vaccine candidates. The Chinese Communist Party-linked Global Times, for example, has published more than 20 stories mentioning India and vaccines in January in its English-language edition. Global Times pieces have spotlighted ‘safety and efficacy’ concerns about India's vaccines, contrasted with a piece about how Indians in China are embracing China's vaccines. Another said, ‘New Delhi could take note that vaccines should not be a geopolitical tool and vaccine exports is not a contest.’ On 25 January, China’s Ministry of Foreign Affairs spokesman Zhao Lijian was asked about India’s ‘vaccine diplomacy’ at a press conference and decried ‘malign competition, let alone the so-called “rivalry”’.65

The remark by Zhao Lijian was related to India giving millions of doses of its vaccine as a gift to its traditional partners, Nepal, Bangladesh, Myanmar, Mauritius, and Seychelles, in January 2021. In its article covering Nepal's launch of the immunization campaign following a gift of one million doses from its giant Indian neighbour, Reuters made a comment that this “could prove a pushback against China’s activities in the region”, as this nation between India and China “has become a playground for competition over diplomatic and strategic influence between the Asian giants.”66 The Economic Times underlined that India’s vaccine diplomacy to the CARICOM – Caribbean Community members was built on two centuries of connection and support for each other in the multilateral fora.67 They expanded their cooperation with their traditional partner, India, in the area of fighting the pandemic. To assist these countries, India sent medical assistance to all CARICOM members. The Wall Street Journal noted that in “a COVID-19 diplomacy, India emerges as a vaccine superpower.”68 CBS News observed that “India is giving its vaccine away to neighbouring countries free of charge. It gifted millions of doses in January to Bangladesh, Nepal, Myanmar, Mauritius and the Seychelles, among others — a gesture of generosity so far unique in the world.”69 Similarly, China’s link with the ASEAN countries70 had strong impact on their choice of the vaccine manufacturer.71

64 Bogle and Zhang 2021a.
65 Bogle and Zhang 2021b.
67 Chaudhury 2021.
68 Trofimov and Bellman 2021.
69 Dyer 2021.
70 ASEAN stands for the Association of Southeast Asian Nations, political and economic union of ten Asian countries (Thailand, Singapore, Philippines, Malaysia, Indonesia, Vietnam, Myanmar, Laos, Cambodia, and Brunei) aimed at promoting economic growth, and regional stability formed in 1967.
71 Hunt 2021.
The US vaccine distribution policy received criticism not only from the East, but from the West, too. In an article on the geopolitics of vaccine distribution, Berezow noted that the US already had a tense relationship with Europe, and “a fight over vaccine batches would put more stress on a fragile trans-Atlantic relationship, especially since the country that receives the most vaccine doses have a likelier chance of improving its economy the quickest.” German DW News accused the US of ‘a vaccine nationalism’, keeping the America First stance, in times when Europe faced a vaccine shortage.

According to DW News, COVID-19 vaccine could become “a tool for governments, rebel groups and other fighters involved in conflicts in the Middle East to advance their own goals”; using vaccines this way “is a form of indirect, passive biological warfare.” In another article, the DW News openly indicated that “with the US absent as a global player and the European Union scrambling to inoculate its own citizens, China and Russia are seizing the opportunity to present themselves as saviours of the world”.

This German media indicated that “while rich countries such as the US, European states, and Israel have bagged most of the supplies of the top-flight BioNTech-Pfizer and Moderna vaccines,” the other countries were forced to opt for Russian and Chinese vaccines, not without some political calculation. The article raised concerns that Sputnik V “has side effects” in forms of “geopolitical and economic controversies that this vaccine has triggered”. German Spiegel stressed that vaccines might be used to reward a country for a good behaviour, as well as a tool of repression. Some articles compared the ‘western’ and the ‘eastern’ vaccines, describing the latter as the “second-best”.

Discussing the Russian vaccine entry into Argentina, the Deutsche Welle claimed that “Russia is hoping its new medical product will help repair its image, which has taken somewhat of a battering over issues such as Syria, Ukraine and Alexei Navalny. But not all Argentines are pleased about being part of the Sputnik V experiment and Russia’s plans for the world.”

**Geopolitical Positioning of State Leaders**

Concerns related to the geopoliticisation of vaccines, that US, British and European leaders expressed through media, reflected their political attitude towards Russia and China, blaming them for ‘corona-diplomacy’. EU authorities raised attention that these two big

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72 Berezow 2020.
73 Roscic 2021.
74 Shaer 2021.
75 DW News 2021b.
76 Pieper and Bushuev 2021.
77 According to Bogetić 2020.
78 Pieper and Bushuev 2021.
79 Georgievski 2021.
global geopolitical players were strengthening their influence worldwide, including within the EU, while the EU was having problems purchasing vaccines. China was accused by the European media of complementing their ‘mask-diplomacy’ with ‘a vaccine policy’, using a “charm offensive” to implement its Belt and Road Initiative.80

In an interview to *Deutsche Welle*, German Health Minister Jens Spahn claimed that Russia and China had used vaccines to implement their geopolitical aspirations and spread their political influence across the world.81 However, in an interview to the *Frankfurter Allgemeine Zeitung*, he admitted that Germany could use the vaccines developed by China and Russia, if Europe’s medicines watchdog approved them.82 Similarly, an article by *Deutsche Welle* claimed that German Chancellor Angela Merkel had offered Russia support with their vaccine, should it be approved by EU regulators.83 The French President Emmanuel Macron announced that he was ready to consider purchasing the Russian vaccine regardless of politics, and insisted that “geopolitics isn’t a factor when it comes to making decisions about sourcing life-saving coronavirus vaccines”.84 However, this openness to cooperation with Russia vanished as soon as the Pfizer/BioNtech and other ‘Western made’ vaccines had become available on the market. Hungary was the only EU Member State that realised its announcement to purchase Russian and Chinese vaccines without the EU’s approval. Moreover, at the beginning of 2022, Hungary was alone in going against the European Medicine Agency (EMA) regulatory, as it administered both Russian and Chinese vaccines. *Deutsche Welle News* anticipated that Budapest’s decision would set up a clash with Brussels.85 *Bloomberg News* commented that Hungarian Prime Minister Victor Orbán “has been building ties with Moscow while defying the EU over his increasingly autocratic rule.”86

Some countries have refused donations of vaccines from the East in order to stay loyal to their political and military allies. For example, Albanian Prime Minister Edi Rama, called Russia’s offer to deliver their vaccine “a provocation.”87 Lithuania also refused to buy the Russian vaccine, declaring it a geopolitical tool.88 Iran’s Supreme Leader, Ayatollah Ali Khamenei, banned imports of US and British vaccines into the country.89 This statement followed a rise in tensions between Iran and the US, exemplified by Iran’s seizure of a

80 Deutsche Welle 2021.
81 Haselbah 2021.
82 Didili 2021.
83 DW News 2021a.
84 Amiel and Nussbaum 2021.
85 DW News 2021a.
86 Kuzmanovic, Savic, and Bratanic 2021.
87 Georgievski 2021.
88 Seputyte 2021.
89 DW News 2021c.
South Korean oil tanker at the beginning of 2021. The worst-hit country in the Middle East thus started inoculations with Russia’s Sputnik V vaccine.

In response to the attacks by the Western media, Chinese leaders, and state media raised concerns that almost all the news about the Chinese-made vaccines in the major press in the US and the West were negative, aiming to destroy their reputation, and in hopes that the world will wait for “Western companies to produce surplus vaccines and finally get vaccinated”.90 However, CNN declared these responses by the Chinese media and officials as propaganda, and accused China of hitting back “at criticism of its vaccines with a dangerous disinformation campaign”91 Moscow also denied that it was using its vaccine to advance diplomacy.92

### Geopoliticisation of the Case of Serbia

With respect to the vaccine rollout, Serbia’s case in particularly caught public attention.93 This small Balkan country that aspires and is negotiating to become an EU member for over 20 years, was on the top of the list of countries leading in early vaccination campaign. The share of the population in Serbia that received at least one dose of the vaccine was at the time ten times higher than the EU average, and far exceeding that of Slovenia, Croatia, and other countries in the region (Figure 4).94

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90 Griffiths 2021.
91 Ibid.
92 Sputnik Srbija 2021.
93 Walker 2021.
94 This success of the vaccination campaign in Serbia was the result of the efforts of its Government to acquire vaccines as soon and as much as possible. The Government purchased all vaccines available at the beginning of the immunisation campaign at the same time: the Chinese (Sino-pharm/Beijing), the Russian (Sputnik V) and the Western vaccine (Pfizer/BioNTech). Over time, Serbia has lost his leading position in vaccination due to hesitancy in vaccine uptake. On January 1, 2022, the share of Serbian population vaccinated against coronavirus was 48%, less than in the European Union (73%), Slovenia (60%) and Croatia (48%), and less than world average (58%). Source: Ritchie et al. 2022.
Western media explained this Serbian success as a product of geopolitics. In the article titled “Trapped in Geopolitics, Staring at Serbia”, Deutsche Welle noted that local politicians in the Western Balkans considered that the Serbian advancement in the vaccination campaign was based on geopolitics. Nato members, Montenegro, Albania, and North Macedonia, started to scrutinize ‘Eastern’ vaccines, but not before they realized it was in vain to wait for the ‘Western’ ones. In another article, Deutsche Welle claimed that the intentions of Serbia have been facilitated by the EU; thankful to the EU’s mistakes regarding the rollout of vaccines, the Balkan countries were “literally pushed in the embrace of China... That may weaken the position of Brussels and Washington” A similar observation was noted by Bloomberg News. In its article “Vaccines Turn into Geopolitics in Europe’s Most Volatile Region”, this US media outlet stated that the Western Balkans was “once again cleaving along geopolitical and ethnic lines over efforts to get people vaccinated.”

The article raised concerns about the risks of pushing the region further away from the EU’s orbit, as Russia and China extended their reach, and that “it wouldn’t be surprising if some countries change their geopolitical orientation in the future exactly because of the ‘stepmother’ treatment by the EU”. The article quoted short statements by the President of Serbia, Aleksandar Vučić, and Prime Ministers of Bosnia and Herzegovina,

95 Georgievski 2021.  
96 Deutsche Welle 2021.  
97 Kuzmanovic, Savic, and Bratanic 2021.  
98 Ibid.
Zoran Tegeltija, North Macedonia, Zoran Zaev, and Albania, Edi Rama, that indicated the geopolitical position of their counties and the relationships with their allies. In another article, the same US media outlet indicated that Serbia made an advancement in the vaccination campaign only thanks to its allies, Russia and China, who used EU’s weaknesses to strengthen their geopolitical and geoeconomic aspirations in the Balkan region.

In an interview with the German portal Focus, Serbian Prime Minister Ana Brnabić denied that Serbia had made vaccination a geopolitical issue. She underlined that “the origin of vaccines has never played a role as long as they are safe for use.” Commenting on the remark that Serbia got vaccines from China and Russia and asked whether it was problematic to observe that Europe’s conflicts with these two countries were increasing in intensity, the Serbian Prime Minister noted that Serbia was one of the first countries in the world to sign contract with Pfizer-BioNTech. On the same occasion, BBC News noted that “Belgrade’s warm relations with Beijing and Moscow have undoubtedly helped bring in quantities of vaccine that EU countries can only envy.” Ioannides observed that Russia and China’s strides in this area were made thankful to shortcomings in EU foreign policy and its slow reactions to emergencies in the Balkans. On the other hand, Russia and China had already been present in Serbia through large energy, transportation, and infrastructure projects and investments, so their vaccines rollout only accelerated geopolitical and geoeconomic dynamics already at play.

Obviously, Serbia’s vaccine policy was in fact the extension of its foreign policy, currently based on balancing among four main external factors: the US, the EU, Russia and China.

It was not only Serbia which acted in line with its foreign policy. The findings of this empirical study indicate that this was indeed the case with all countries, both donors and recipients. The US and the EU have not approved the ‘eastern’ vaccines, while Russian and Chinese allies and partners have refused to purchase those produced in the West.

Our analysis of the Western media narrative indicates that it presented Russia and Chinese’s distribution of their vaccines to other countries as the extension of their foreign and economic policies. Many articles have put the accent on the geopolitical aspect of

99 “(Serbian President) Vucic said this month he predicted Brussels would be slow to respond, so he started talks on procuring shots from Russia and China, as well as the U.K. and U.S…. Vucic said Serbia will find a way to help Kosovo, regardless of ethnicity.” “North Macedonia is expecting to get vaccines from Serbia, as well as from the EU and its own purchases.” “Albanian Prime Minister Edi Rama, meanwhile, has pledged to send “a symbolic number of vaccines” to Kosovo for front-line medical personnel as early as next week. “It is important to think not like the EU, but to think that we are not alone, because Kosovo and Albania are one in joy and trouble, Rama said after getting his shot.” (Kuzmanovic, Savic, and Bratanic 2021).

100 Savic and Dudik 2021.
102 Delauney 2021.
103 Ioannides 2021.
the ‘eastern’ vaccines’ distribution describing it as ‘a race’,\textsuperscript{104} ‘a geopolitical tool’,\textsuperscript{105} ‘corona-diplomacy’\textsuperscript{106} and ‘pandemic diplomacy’.\textsuperscript{107} Moreover, Western media raised concern and criticism related to the efficacy and the level of transparency of the trials of the Chinese and Russian vaccines, praising the efficacy and safety of their own vaccines and questioning the intentions and the effectiveness of ‘the others’. The Western media narrative related to this issue mirrored rising tensions with their rivals on the global stage.

Discussion

The findings of the empirical study described in the previous section indicate that many states positioned themselves according to the values and political aspirations they shared with their allies, notably with the EU, China, Russia, and the USA. Western countries were steadfast in supporting ‘Western’ vaccines, while the Eastern states, as well as the developing states in Latin America and Africa, preferred those manufactured by their allies. A sharp West – East division regarding vaccine preferences persisted throughout 2021. The geographical maps below show the countries which utilize ‘Western’ or ‘Eastern’ vaccines. They indicate that at the beginning of 2022, the world had been divided into ‘vaccine-blocs’ (Figures 5, 6 and 7).\textsuperscript{108} A divide between the high-income and the low-income countries with respect to this issue has been also noticed. The COVID-19 pandemic led to a kind of ‘geopolitical lockdown’, i.e. the ‘lockdown’ of various geopolitical units/spheres of (geopolitical) influence, which is evident from the previously described ‘geopolitics of vaccines’ due to which, given the country of origin, vaccines could be perceived as friendly or hostile.

\textsuperscript{104} Sherwin 2021; Walker 2021; Deutsche Welle 2021; Mackintosh, Mezzofiore, and Polglase 2020.
\textsuperscript{105} Trkanjec 2021; Bogetić 2020.
\textsuperscript{106} Haselbah 2021.
\textsuperscript{107} Dyer 2021.
\textsuperscript{108} The Figure 5 represents the distribution only of the Pfizer/BioNTech Comirnaty vaccine against COVID-19. Although this is only one of a number of the ‘Western’ vaccines being used, the vaccine produced by the Pfizer/BioNTech is leading with respect to the number of the countries that have approved it (149).
Figure 5: Where Pfizer-BioNTech vaccine (US/Germany) is being used, 3 January 2022
Note: Countries in green: approved. Countries in yellow: Early, limited or emergency use
(Source: The New York Times 2022)

Figure 6: Where Russian Sputnik V vaccine is being used, 3 January 2022
Note: Countries in green: Approved. Countries in yellow: Early, limited or emergency use
(Source: The New York Times 2022)

Figure 7: Where Chinese Sinopharm vaccine is being used, 3 January 2022. Note: Countries in green: Approved. Countries in yellow: Early, limited or emergency use (Source: The New York Times 2022)
The West seemed to be absent from vaccine diplomacy, but it is so only at superficial glance. This may seem so partly because western vaccines are not produced by state-affiliated institutions, as is the case in Russia and China, so the link between a state’s foreign policy and a pharmaceutical company in the West is not so obvious as in the East. Vaccines manufacturers in the developed Western countries are all privately owned (BioNTech-Pfizer, Moderna, AstraZeneca, Sanofi/GSK, Johnson & Johnson and CureVac). These are biotech and pharmaceutical giants with thousands of employees around the world, whose research, development, and manufacturing are primarily profit-driven. They are among the key players of corporate globalization, whose annual revenues are greater than the national budgets of many states. Thus, they are more powerful than many states, and they are important players in the geopolitical and geoeconomical battle. The vaccine manufacturers’ home countries have used their privileged status within the pandemic context to increase their economic, diplomatic, military, geoeconomic and geopolitical influence on their allies and other countries.

The beginning of the global vaccination rollout was marked by sharp attacks by the West on Russia and China, accusing them of using their vaccines as a geopolitical tool. At the same time, Western countries tried to promote their vaccines as more effective than ‘Eastern’ ones. Sharpness of their diplomatic and media attacks on Russia and China in this respect, and an apparent widening of the gap between the ‘vaccine blocs’, heralded a new Cold War of the ‘vaccine superpowers’.

109 BioNTech, Europe’s largest privately-held biopharmaceutical company, was founded in 2008. Its financial shareholders include the Struengmann Family Office as its majority shareholder, Fidelity Management & Research Company, Invus, Janus Henderson Investors, MIG Fonds, Redmile Group, Salvia and several European family offices (BioNTech 2021; Browne 2020). In August 2018, this German company signed collaboration agreement with Pfizer, US-based multinational pharmaceutical giant, to develop mRNA-based vaccines for prevention of influenza (Pfizer 2018). Pfizer is one of the world’s largest pharmaceutical companies founded in 1849.

110 Moderna is a US based biotech company founded in 2010. It is pioneering a new class of medicines made of messenger RNA (mRNA) to treat rare diseases and cancer (Moderna 2021).

111 AstraZeneca is a British-Swedish multinational pharmaceutical and biotechnology company founded in 1999 through the merger of the British Zeneca Group and the Swedish Astra AB. It has three strategic R&D centres in the UK, the US, and Sweden, and has 10,000 employees working in R & D in 40 countries (AstraZeneca 2021).

112 Sanofi is a French-based corporation with 73 manufacturing sites in 32 countries, and more than 100,000 employees (Sanofi). GlaxoSmithKline (GSK) is a British-American multinational pharmaceutical, vaccines and consumer healthcare company with around 100,000 employees worldwide (GSK 2021).

113 The US-based multinational healthcare corporation with more than 130,000 employees across the world (Johnson & Johnson 2021).

114 The Germany-based company founded in 2000, the world’s first company to harness mRNA for medical purposes (CureVac 2021).

The route of Chinese vaccines’ distribution and donations has overlapped with the country’s global economic aspirations as reflected in the “One Belt, One Road” Initiative to which China has devoted a high-level of diplomatic attention, while also dedicating hundreds of billions of dollars to its financing.\(^{116}\) Due to its speed in producing, distributing, and donating COVID-19 vaccines, China has strengthened its spheres of influence in African, Asian, and South American countries. Besides spreading and fortifying its political, economic, and military influence worldwide, China multiplied its chances of becoming a multilateral leader in global health security. India also directed its largest vaccine donations to its economic and political allies in the Asia-Pacific region; as a result, this country became a rising ‘vaccine superpower’.

Russia also took the advantage of the fact that it manufactured a vaccine to make itself more visible and influential in the global arena and in its regional geopolitical spheres of interest, such as Serbia. The Russian vaccine Sputnik V has been approved in 74 countries, mainly in Asia, Africa, and Latin America.\(^{117}\) The positive response of these countries in obtaining the Russian vaccine, contributed to Russia’s efforts of countering political, diplomatic, and economic pressure of the US in various fields.

On the other hand, the US under the Trump Presidency continued to focus on domestic-oriented politics and to secure sufficient doses of the vaccines for its own population. Consequently, the country faced accusations of pursuing ‘vaccine nationalism’. To counter this criticism, in June 2021 the Biden’s administration announced an enormous vaccine donation programme: half a billion Pfizer/BioNTech vaccines were purchased and donated to 92 low- and lower middle-income countries and the African Union.\(^{118}\) Two billion USD was announced to contribute to COVAX, one of the pillars of the Access to COVID-19 Tools Accelerator, launched by the WHO. Undoubtedly, the US expects that this “historic” initiative would contribute to confirming their role as a ‘vaccine superpower’ and repairing its image as the global leader. This move has geopolitical attributes, as a majority of the low-income countries, receivers of the future donations, are situated in Africa and Asia, where China has strong geopolitical and geoeconomic interests.

Due to its supranational and complex nature, in responding to the pandemic, the EU has faced different challenges to those of national states. The problems with purchasing and administering COVID-19 vaccines has exposed a lack of coordination and other problems with respect to its centralised policy. The European Commission experienced difficulties in imposing its decisions on Member States in response to the pandemic. Nevertheless, this situation highlighted a wide spectrum of political, economic, and geopolitical interests within the EU and the difficulties of bringing them all under the same umbrella. For example, Hungary instantly expressed an interest in purchasing Russian and Chinese vaccines, as soon as they became available, disregarding Brussels’ opposition to Moscow and

\(^{116}\) Markey 2020a, 2.
\(^{117}\) VIPER Group 2022.
\(^{118}\) The White House 2021.
Beijing. Seemingly, Hungarian economic interests regarding supplies of Russian natural gas and investments from the Chinese B&RI, prevailed. The economic interests of Germany and France to support the South Stream Pipeline project were reflected in their openness to procure the Russian vaccine and offer production links. As expected, their attitudes were halted by the US which strongly defended their interest of keeping Russia outside the EU.

The findings of this empirical study confirm that the ‘battle over vaccines’ has contributed to a new cold war of the global ‘vaccine superpowers’. Public health was being instrumentalised by the most powerful states for the sake of strengthening their geopolitical and geoeconomics position. The Western media accusation of Russia and China’s ‘vaccine diplomacy’ reflected the position of the US and their allies, of the necessity of countering the threat coming from the East. This is reflected in the EMA’s regulatory that approves solely ‘western’ vaccines, so citizens who have received ‘eastern’ jabs have been considered ‘non-vaccinated’.

Widening this gap reduces the chance of multilateral cooperation in the protection of public health, as well as the response to any other future global threat. Consequently, the geopoliticisation of the distribution of the vaccines has contributed to raising global insecurity and the destabilisation of states and economies on the periphery and semi-periphery.

**Conclusion**

Our existing knowledge on the geopolitics of public health and the coronavirus pandemic indicates that states, particularly the most powerful ones (the US, China, Russia), have use the current global crisis to strengthen their influence worldwide, in line with their geopolitical, economic, and military aspirations. In many aspects, geopoliticisation of public health and the coronavirus pandemic has been explored and described so far. However, the impact of geopolitical interests on recipient countries decisions concerning which vaccines to purchase has not been explored. To fill this gap, this article questioned whether the administration and distribution of the vaccines against COVID-19 has primarily been driven by geopolitical interests of the powerful states where the vaccines were manufactured.

Based on the empirical study of the media narratives, their content analysis and the statistical data on the vaccines’ distribution, this article has made two conclusions. First, COVID-19 vaccines have become an extension of foreign policy by other means. They have become a geopolitical tool just like gas and oil. The current political, economic, military, and geopolitical interests of the states in which the vaccines are produced have a major impact on the vaccines’ administration and/or destination of their distribution. The ‘battle of the vaccines’ mirrors the trends related to the building of a multipolar world and the
shift of power from West to East. The gap between two polarised geopolitical blocs, the Anglo-Saxon and the Eurasian one, has been widening.

Second, the geopoliticisation of vaccines distribution has contributed to an instrumentalisation of the pandemic, resulting in global insecurity, and particularly in the destabilisation of states and economies on the periphery and semi-periphery. Within this context, the chances for multilateral cooperation are on a downward trajectory. At the beginning of the global vaccination campaign, some European states showed openness for cooperation and partnership with Eastern countries in joining efforts to counter the mutual threat. However, they had to halt these initiatives under the pressure by the US, aimed at decreasing Russian and Chinese influence in Europe. The world has witnessed a new ‘Cold War’ of the ‘vaccine superpowers’ as a form of the ‘pandemopolitics’, while the ‘geopolitical lockdown’ and locking of different geopolitical spaces (‘Western’ and ‘Eastern’) have been the main geopolitical consequence of the COVID-19 pandemic.

Manufacturing countries have used their position to strengthen their influence in the global arena and solidify their dominance as political and economic leaders in their zones of interest. The countries on the semi-periphery and periphery, not wealthy enough to develop their own vaccines, have two options: to align themselves with one of the ‘vaccine blocs’ by meeting the expectations of their main (economic, political and/or military) allies, or to try and make agreements with as many vaccine-producing countries as possible, on both sides, just like Serbia did. The vaccines routes proved that both Beijing and Moscow consider Serbia and other Balkan countries attractive when it comes to their political and economic interests. On the other hand, the EU’s lack of readiness to provide emergency aid to these countries clearly shows the Union’s real attitude towards them. The findings of this article are in line with the observation by Florian Feyerabend, who noticed that this pandemic crisis was also a geopolitical litmus test for the EU and its Member States, with the Western Balkans representing an important arena.\textsuperscript{119} Serbia’s relationships with the global powers perfectly mirror its place in the tetragon of US-EU-Russia-China.

After the current period of ‘geopolitical lockdown’, the world could possibly enter a period of geopolitical unlocking and cooperation among different geopolitical blocs. The realisation of this optimistic scenario primarily depends on the extent to which the US will be engaged and moved to share its power with other states.

\textsuperscript{119} Feyerabend 2020.
References


