

An unhealthy combination: War, Covid-19 and the politics of metaphor

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At a time when multilateralism is collapsing and populism rising, Norah Niland highlights the new fragilities that Covid-19 has revealed in local and international systems of governance. If the pandemic is further complicating access to communities already affected by war, what should our duty of outrage be in the face of empty political declarations and actions that enable armed conflict and the slaughter of civilians?

War as metaphor quickly became a new *lingua franca* across the globe a few months ago as political leaders mapped out plans and lockdowns to deal with the Covid-19 pandemic. President Xi Jinping in Beijing, his counterpart Emmanuel Macron in Paris, the British monarch Queen Elizabeth and Donald Trump in Washington all drew on wartime references to underline the gravity of the situation. They also signalled the need to halt the march of this little-known virus that threatened death and devastation everywhere. The numerous appeals for a “unifying” nationalism have generally ignored the “borderless” nature of the pandemic and the need for solidarity – within and across borders – to address the global threat posed by Covid-19.

Reliance on the rhetoric of war is counter-productive. It tends to obscure the multifaceted nature of a problem that requires action from a health, socio-economic, cultural and political perspective. It ignores the fact that many wars end through negotiated settlements rather than military victories, while Covid-19 does not allow for compromise. War metaphors are oblivious to the reality of armed conflict that, invariably, is a deprived, dehumanising, and soul-destroying affair. War raises questions about what it is to be human and part of a shared humanity. In this pandemic nobody is safe until everyone is protected. It is no coincidence that in 1918, as Spanish Flu circled the world killing an estimated 50 million people – more than double the number of victims in World War I – those engaged in negotiations for the formation of the League of Nations concluded that “international health is a problem that demands international cooperation”¹.

¹ Alex de Waal “New Pathogen, Old Politics”, *Boston Review*, 3 April 2020 <https://bostonreview.net/science-nature/alex-de-waal-new-pathogen-old-politics>

Pre-pandemic politics

Talk of war in the time of coronavirus is often used to reassure and camouflage the lack of preparedness in terms of essential public health capabilities or a reluctance to prioritise the measures needed to safeguard those most at risk. Militarised narratives are a poor substitute for a sound understanding of the origins and drivers of the pandemic and the action needed to assist at-risk groups and those who are least able to cope with its consequences from a health, financial or political perspective.

At the time of writing, in early June 2020, there is still much to be learned about the pandemic. However, it is abundantly clear that the emergence of SARS-CoV-2, the official name of Covid-19, and its rapid evolution into a full-blown pandemic is largely the outcome of decisions by humans who have degraded the ecosystem, caused the climate crisis and altered the ecological balance essential for the sustainability of the natural environment.

This pandemic is first and foremost a health and livelihood crisis. It is largely due to political decisions that have prioritised profits for the wealthy over policies addressing the structural and social injustices that sustain extreme poverty, hunger and undignified living conditions². For example, in September 2019, the World Health Organization (WHO) indicated that most countries were “under-investing in primary health care” and the biggest gaps in health care system funding were “in the poorest countries and those affected by war”³.

Many high-income countries have been hit hard by the pandemic in contrast, for example, to Vietnam which shares a long border with China⁴. Italy introduced a series of lockdown measures in March as Lombardy, its richest region, became the scene of a catastrophic outbreak. A study shows that significant privatisation of Italy’s decentralised health care system – with cuts of 45 million US\$ between 2010 and 2019 – was a key factor in one of the world’s highest per capita death tolls⁵. Privatisation meant that increased investment in profit-making medical facilities took precedence over the training of specialists and hospitals specialising in infectious diseases⁶.

² Global Inequality, “Our world’s deepest pockets – ‘ultra high net worth individuals’ – hold an astoundingly disproportionate share of global wealth”, October 2019, <https://inequality.org/facts/global-inequality/>

³ “Countries must invest at least 1% more of GDP on primary health care to eliminate glaring coverage gaps”, *World Health Organization*, Geneva, 22 September 2019, <https://www.who.int/news-room/detail/22-09-2019-countries-must-invest-at-least-1-more-of-gdp-on-primary-health-care-to-eliminate-glaring-coverage-gaps>

⁴ Nectar Gan, “How Vietnam managed to keep its coronavirus death toll at zero”, *CNN*, 30 May 2020, <https://edition.cnn.com/2020/05/29/asia/coronavirus-vietnam-intl-hnk/index.html>

⁵ Benedetta Armocida et al., “The Italian health system and the COVID-19 challenge”, *The Lancet*, vol.5(5):e253, 1 May 2020, [https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(20\)30074-8/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(20)30074-8/fulltext)

⁶ Angela Giuffrida, “Why was Lombardy hit harder than Italy’s other regions?”, *The Guardian*, 29 May 2020, <https://www.theguardian.com/world/2020/may/29/why-was-lombardy-hit-harder-covid-19-than-italys-other-regions>

While investment in primary health care has been in decline, military spending has grown continuously in recent decades. Global military expenditure, amounted to a shocking 1.8 trillion US\$ in 2018, the highest since 1988⁷. Last year, Washington allocated “about 750 billion US\$ for national defence” and 8 billion US\$ to the Centre for Disease Control and Prevention (CDC)⁸. In 2018, the CDC was forced to slash its global disease prevention programme by 80%⁹.

The massive growth in war-making machinery is indicative of a geopolitical change towards a less stable world. Significant weakening of arms control processes and declining multilateralism are symptoms of a reduced investment in the use of diplomacy to resolve disputes. In this increasingly disordered, might-makes-right world, armed conflict persists without mercy. The human costs of war accumulate as Covid-19 exacerbates avoidable suffering¹⁰.

Ceaseless war in the age of coronavirus

The United Nations Security Council (UNSC) is fast becoming a relic of a bygone era. It routinely proves that it is little more than a dysfunctional instrument of the veto-wielding Permanent Five (P5) members. The P5 routinely thwart proposals geared towards facilitating a peaceful resolution of, or pause in, violent conflict. The inability of the UNSC to reach a consensus on a resolution backing the call of the UN Secretary General António Guterres on 23 March for “an immediate global ceasefire in all corners of the world” is illustrative of this¹¹. It is also deadly. The lack of will in the UNSC to “put armed conflict on lockdown” and “give peace a chance” means that the human and economic costs of the pandemic will increase as warfare persists¹².

While the UNSC was, effectively, “missing in action”, some non-state armed fighters in a number of countries did silence their weapons, if only temporarily. Such groups included the Southern Defense Force militia in Cameroon and the New People’s Army in the Philippines which has been active since 1969. Many groups indicated that they were open to talks with their government counterparts but to little avail¹³. The failure of ceasefire initiatives can

⁷ SIPRI, “World military expenditure grows to \$1.8 trillion in 2018” *Stockholm International Peace Research Institute*, 29 April 2019, <https://www.sipri.org/media/press-release/2019/world-military-expenditure-grows-18-trillion-2018>

⁸ Uri Friedman, “We Can’t Rely on Just the Military”, *The Atlantic*, 8 April 2020, <https://www.theatlantic.com/politics/archive/2020/04/us-military-failing-spending-budget/609673>

⁹ Chris Morris, “Trump administration budget cuts could become a major problem as coronavirus spreads”, *Fortune*, 26 February 2020, <https://fortune.com/2020/02/26/coronavirus-covid-19-cdc-budget-cuts-us-trump>

¹⁰ See, also in this issue, Michiel Hofman’s article: “Responding to Covid-19 in conflicts: difficult but necessary”,

¹¹ UN Secretary General, “The fury of the virus illustrates the folly of war”, United Nations, 23 March 2020, <https://www.un.org/en/un-coronavirus-communications-team/fury-virus-illustrates-folly-war>

¹² Norah Niland, “War and Covid-19: need for a new normal that rejects inhumanity?”, *United Against Inhumanity*, 19 May 2020, www.against-inhumanity.org/2020/05/19/war-and-covid-19-need-for-a-new-normal-that-rejects-inhumanity/

¹³ “How Covid-19 gave peace a chance, and nobody took it, Ceasefires are breaking down as America and China bicker at the UN”, *The Economist*, 5 May 2020, <https://www.economist.com/international/2020/05/05/how->

partly be attributed to the appetite of key stakeholders for war and its related profits, whatever the costs to humankind.

The P5 veto holders are literally making a killing with arms sales currently running 23% higher than a decade ago. The US is the world's largest arms supplier; together with Russia, France, China and Germany, they were responsible for 75% of the global arms trade during the 2014-2018 period¹⁴. Upward trends in the frequency and protracted nature of armed conflicts routinely result in staggering human and economic losses¹⁵. In 2016 alone, economic losses as a result of armed conflicts amounted to 1.04 trillion US\$ globally¹⁶. The combination of armed conflict and Covid-19 will, inevitably, increase the harm and suffering endured by civilians and impact negatively on their coping mechanisms. It will also raise questions about the value of humanitarian action that does not challenge orchestrated harm.

Non-metaphorical war

Most people – including those who are privileged to have no direct knowledge of armed hostilities – are aware that the virus is a threat that poses a danger to millions given its direct health and other consequences. In a recent analysis of epidemics and politics, Alex de Waal noted that the “associations between poverty, inequality and ill health, and exposure to epidemics, are well established”¹⁷.

It is too early to determine the overall impact of Covid-19 in war settings where inequities tend to be deeply entrenched. However, it is readily apparent that those who are already marginalised or struggling with the devastating consequences of armed conflict, will be among the hardest hit. According to Oxfam, there are up to “two billion people living in fragile and conflict-affected states”¹⁸. This includes large swathes of Africa where war rages from Libya to Cameroon, from Somalia to the Sahel. Elsewhere, protracted or sporadic warfare is wrecking lives in Afghanistan, Myanmar, Palestine, Syria and Yemen to name but a few examples.

[covid-19-gave-peace-a-chance-and-nobody-took-it](#)

¹⁴ SIPRI, “Global arms trade: USA increases dominance; arms flows to the Middle East surge”, *Stockholm Peace Research Institute*, 11 March 2019, <https://www.sipri.org/media/press-release/2019/global-arms-trade-usa-increases-dominance-arms-flows-middle-east-surge-says-sipri>

¹⁵ “Trends in Armed Conflict, 1946–2018”, *Peace Research Institute Oslo*, March 2019, <https://www.prio.org/utility/DownloadFile.ashx?id=1858&type=publicationfile>

¹⁶ Pauline Chetcuti et al., “Conflict in the time of coronavirus”, *Oxfam*, 12 May 2020, p.3 www.oxfam.org/en/research/conflict-time-coronavirus

¹⁷ Alex de Waal, “New Pathogen, Old Politics”, art. cit.

¹⁸ Pauline Chetcuti et al., “Conflict in the time...”, art. cit.

In South Sudan, fighting has long been a problem for health care programmes and has resulted in “staggering levels of malnutrition” due, in part, to “the deliberate use of starvation as a method of warfare”¹⁹. Deliberate and indiscriminate attacks on health care and other vital infrastructure are becoming increasingly “normal” in many war zones. This includes Yemen, where a Saudi-led military coalition intervened in 2015 to counter the advance of Houthi forces that had taken control of Sana’a. Since then, an estimated 100,000 people have lost their lives, partly due to air strikes that have destroyed health care and other vital infrastructure²⁰. It is now “one of the most poverty-stricken places on the planet” caught up in a factionalised war, prone to cholera outbreaks and with millions on the verge of starvation, Yemen is, perhaps, one of the countries least able to deal with Covid-19²¹.

According to the UN, Yemen is the world’s worst humanitarian crisis. Last year, Riyadh received fulsome praise from Mark Lowcock, head of humanitarian affairs at the UN, for its “generous contribution” of 500 million US\$²². On 2 June, Saudi Arabia and the UN co-hosted a fund-raising event for Yemen. The event raised 1.35 billion US\$ in pledges, falling far short of the requested 2.4 billion US\$. All told, the UN has only received 698 million US\$ in the first half of 2020 in contrast to some 4 billion US\$ for Yemen in 2019²³.

Saudi Arabia, one of the principal belligerents in Yemen, is one of the world’s top five spenders on military hardware²⁴. It is backed by its P5 arms merchant friends – France, the US and the United Kingdom – that supply it with munitions and battlefield intelligence²⁵. It has been repeatedly accused of war crimes²⁶. Unfortunately, Saudi Arabia and its allies are not unique in being belligerent donors, in the sense of funding humanitarian agencies while being directly or indirectly engaged in killing civilians, but Yemen sets new precedents. It illustrates the cruel and cynical depth of geostrategic politics that has condemned millions to a deadly cocktail of unrestrained violence. It raises questions about the sincerity of the

¹⁹ “A severe coronavirus outbreak across South Sudan would have disastrous consequences for millions of vulnerable civilians, UN experts note”, *UN Office of the High Commissioner for Human Rights*, 8 April 2020, <https://www.ohchr.org/en/NewsEvents/Pages/DisplayNews.aspx?NewsID=25781&LangID=E>

²⁰ Vivian Yee, “Coronavirus Slams Broken, Embattled Yemen”, *New York Times*, 30 May 2020, <https://www.nytimes.com/2020/05/30/world/middleeast/virus-yemen.html>

²¹ “A Coronavirus Ceasefire Offers a Way Out for War-torn Yemen” *International Crisis Group*, 27 March 2020, <https://www.crisisgroup.org/middle-east-north-africa/gulf-and-arabian-peninsula/yemen/coronavirus-ceasefire-offers-way-out-war-torn-yemen>

²² “Emergency Relief Coordinator Thanks Saudi Arabia for \$500 Million for UN Agencies in Yemen”, *(UN) Office for the Coordination of Humanitarian Affairs*, 25 September 2019, <https://reliefweb.int/report/yemen/emergency-relief-coordinator-thanks-saudi-arabia-500-million-united-nations-agencies>

²³ Patrick Wintour, “Saudi Arabia to co-host UN fundraising summit for Yemen”, *The Guardian*, 2 June 2020, <https://www.theguardian.com/world/2020/jun/02/saudi-arabia-to-co-host-un-fundraising-summit-for-yemen>

²⁴ “Trends in World Military Expenditure, 2019”, *Stockholm International Peace Research Institute*, April 2020, https://www.sipri.org/sites/default/files/2020-04/fs_2020_04_milex_0_0.pdf

²⁵ Harry Cockburn, “Britain ‘complicit’ in Yemen famine, Tory ex-cabinet minister warns amid calls to end arm sales” *The Independent*, 30 October 2018, <https://www.independent.co.uk/news/world/middle-east/yemen-civil-war-saudi-arabia-arms-sales-uk-famine-coalition-houthi-rebels-a8609516.html>

²⁶ Richard Hall, “New report alleges Saudi Arabia covered up war crimes in Yemen”, *The Independent*, 15 August 2019, <https://www.independent.co.uk/news/world/middle-east/saudi-arabia-yemen-airstrikes-war-crimes-cover-up-a9061061.html#gsc.tab=0>

various stakeholders who voice support for the UNSC “protection of civilians” (PoC) agenda while remaining indifferent to the duplicitous inhumanity that nonchalantly wipes out lives including in the midst of a pandemic.

Time for change?

The widespread use of war metaphors, including in the fields of medicine and humanitarian action, is ironic since the core ambition of such disciplines is to save lives. Working with war-affected communities to help people survive is increasingly difficult at a time of diminishing multilateralism, rising populism, “my country first” style nationalism, a thriving arms trade and growing contempt for a rule-based international order.

Between 1999 and 2019, the UNSC adopted “more than 100 thematic resolutions” related to its PoC agenda²⁷. On 23 May 2020, at a high level, open UNSC meeting, the United Nations Secretary General indicated that while “the normative framework has been strengthened, compliance (with international law) has deteriorated”²⁸. Peter Maurer, President of the International Committee of the Red Cross criticised the lack of UNSC action noting that it had, on occasion, “led to the perception of a ‘free ride’ for parties to a conflict to commit atrocities”²⁹. While the UNSC failed to find a way to back the Secretary General’s call for a global ceasefire, an additional 660,000 people were forced from their homes in conflict zones between 23 March and 15 May this year, leaving them more exposed to Covid-19 and the vagaries of war³⁰.

Covid-19 has revealed the fragility of local and international systems. At this time of great upheaval, many people who are concerned about global injustices, never-ending wars and actions at odds with humanitarian values, maintain that a return to the old normal is not the answer. Humanitarianism cannot be used as an alibi for failed health systems, rapacious politics and blood-stained commerce. Has the time come for concerned citizens everywhere to challenge the politics that sustain deep-rooted racism and discrimination, the arms trade, attacks on clinics and other war zone atrocities? At the very least, it is time to begin tracking, analysing and publicising the obvious disconnect between vacuous UNSC member statements and the actions of those same States (as well as others) that enable armed conflict, the slaughter of civilians, and other catastrophic crises.

²⁷ “COVID-19: A ‘new and deadly threat’ for civilians caught up in violence”, United Nations, 27 May 2020, <https://news.un.org/en/story/2020/05/1064942>

²⁸ “Protection of Civilians”, Security Council Report, 30 April 2020, <https://www.securitycouncilreport.org/monthly-forecast/2020-05/protection-of-civilians-2.php>

²⁹ *Ibid.*

³⁰ “Armed conflict displaces 660,000 since UN call for global ceasefire”, Norwegian Refugee Council, 22 May 2020, <https://www.nrc.no/news/2020/may/armed-conflict-displaces-660000-since-un-call-for-global-ceasefire/>

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