

## Covid-19: Crossroads for Globalization

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| Article Information                     |          |          | Abstract                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
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| Received:                               | October  | 15, 2024 | The process of global integration has hard hit in recent years with the recent rise of hyper nationalism. There has been an elaborative debate going on whether globalization remains intact in years to come. Even though, the determinant fallout in either case is yet to be classified, still the events like outbreak of Covid-19 has posed serious structural questions on the issues like globalization, internationalism, and nationalism. For both the academicians and the practitioners of global politics; understanding the genesis of Covid-19 is as necessary as is its underlying political impact to foresee and to prompt the suggestable political adjustments that states have to make for sustainable socio-economic well-being. Therefore, this study expounds into the details of the nature of political mayhem that has been resultant. As it remains quite evident, that initial response of globally integrated countries was more marked on blame game and score settling, instead of coordination and cooperation to effectively mitigate the immediate impacts. So far, this remains a central concern of this research that how and why certain countries have shaped and implemented effective policy to contain, and curb spread of Covid-19, and why the other countries have failed to do so. In this regard the comparative study of countries like, Italy, UK, US, Brazil, and India are conducted with that of China, Singapore, Canada, Germany, and South Korea. The centrist tendency of the countries in effective managerial tier pose as serious questions to the future of globalization as is the democratic legislative countries who failed to make the mark due to their political indecisiveness. So far, this study explores the underlying cause to the leadership level, as well as state and societal level, in an order to make prognosis of the said pandemic. The theoretical construct delves into the points of neo-liberalism, in an order to evaluate the prospects and limitations of states to intervene and to regulate the political landscape of post Covid-19's world. In the end, this study encapsulates the lessons that could be learnt and adjustments that are deemed to be made for making an integrated stride on behalf of states in years to come forth. |
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| <i>Centrist Political Manifestation</i> |          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |

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# 1 Introduction

The evolutionary war of homo sapiens against pandemics is infinite, the battle against microorganisms and bugs is endless. Novel strains of influenza remained consistent which subsequently mutate to exploit their unprotected host. (Cornish P. &, 2017) Last century has witnessed four major influenza pandemics with widespread and unprecedented mortality rate, illness and global disruption. In the absence of any diagnosis facilities, medication and information about the nature of the plague, non-pharmaceutical interventions (NPIs) were the only answer to counter the pandemic at that time. The same non-pharmaceutical interventions have been executed globally as the novel COVID-19 circle the globe. Global response in the wake of COVID-19 mirrored that of the Spanish flu, empty streets, closed educational institutions, deserted restaurants and shopping malls, suspended global connectedness and economic fallout. However, on the economic front the situation in 1918 was far less intense than today. The age of hyper globalization and unprecedented advancement in health sector, the world had everything to contain the spread of the virus which included warnings from scientists, diagnosis facilities, advanced medical equipment, and revolutionized pharmaceutical sector and examples of global pandemics in the past. But when the virus crossed the borders of China, a complete chaos and shock was observed in most of the countries.

The failure to prepare was followed by failure to contain. Scientists had predicted the world's defenselessness on this front, but they were ignored and overshadowed by profit mongers. Noam Chomsky stated that, "virus is here because of colossal market failure, it has roots in the essence of markets aggravated by the brutal neoliberal intensification of profound socio-economic problems" (Polychroniou, 2020). The shared nature of this crisis has put global community in recession than any other event since the Great Depression. (Reinhart, 2020) The reason behind this aggravated intensification is indecisiveness, denial and incompetence which was ostensible in such countries where populists were at war with science and logic. At first, the populist leaders embraced denialism and then, the moment situation worsened, they tied their fortunes to this pandemic. The response in Europe, U.S and Brazil was extremely disappointing, it thwarted all the hopes and efforts of advocates of internationalism. The virus has elevated populists to unusual role, anti-intellectualism and anti-science populists relied on conspiracies, fake news and politics to satisfy the 'true people' they claim to represent. (Nadia, 2020) Along with the populist in power, the pandemic has also mobilized populists in opposition.

The surge in nationalist sentiments was evident in the West to such an extent that it posed serious questions about the future of globalization and state's position in post-pandemic world. After every major crisis, state is forced to leave the seat of night watchman, and it is equipped with enhanced powers and suppose to take revolutionary steps unthinkable in good times. This crisis allows states to regulate economy in post-pandemic settings. The study is investigating how this intervention works; if states let the market decide the rules; then how the global economy restarts on its own. The economic and financial structure of world's leading economies such as U.S, UK, France and Italy are on the verge of collapse (Mahar, 2020). Experts warned about unparalleled worsening of global economic conditions and damaged financial structures, as Kristalina Georgieva, Managing Director of International Monetary Fund (IMF), stated that, "a recession at least as bad as during the Global Financial Crisis or worse" (Mahar, 2020).

Humans of 21<sup>st</sup> century were living in deception of being victorious in war against viruses, this confidence was sponsored by scientific revolution and the success story is stretched over a century. However, COVID-19 has shed this deception and unveiled the vulnerability of nation-states living in the age of hyper-globalization. Francis Fukuyama stated that the initial phases of the crisis were brutal stress test only a handful countries passed. (Fukuyama, 2020). Many of the states such as China, Singapore, Canada, Germany, and South Korea effectively managed the crisis because their leadership demonstrated both the preparedness and sense of purpose. Each of the mentioned countries has different nature of government and regional settings yet performed well irrespective of political settings at

national or international level, while many of their neighboring countries collapsed. Some of the central powers including U.S and UK mismanaged the crisis, and these ex-patrons of liberalism masked their incompetence with anti-globalization sentiments. This paper examines the policy response of the countries which have masterfully tackle the pandemic and those which have collapsed when the virus traversed their borders. In this regard the comparative study of countries including Italy, UK, US, Brazil, and India has been made with that of China, Singapore, Canada, Germany, and South Korea. The study also explores the future of globalization in the presence of spike in centrist tendencies.

## 2 Literature Review

Alfredo Saad-Filho in “From COVID-19 to the end of neoliberalism”, has predicted the virus sponsored crisis to be the final nail in the coffin of neoliberalism. The writer blamed neoliberal approach for hampered state’s ability to act decisively and to mobilize the resources. The position of market in post-pandemic world is also in question and the writer suggests that international system will undergo drastic changes. The writer has blamed international system for the crisis; however, the study gives credit to the east for its better crisis management than the west. This mark the contradiction in study, as the country in east and west shared similar international system and their better crisis management is directed at preparedness and quality leadership rather than the nature of international system. The idea of drastic change is also not valid, as these kind of crisis accelerate the pace of change but does not bring change altogether. The change is based on internal governance and at this moment the governing elite has its interests attached to the globalized world, so it is unlikely to happen.

The paper “Reviewing the history of pandemic influenza: Understanding patterns of emergence and transmission”, excellently gives an overview of past pandemics, their spread, NPIs followed, and evolution of preparedness. The writer sheds light on the nationalist aspect of vaccine development and distribution which is consistent since the last century. The writer has highlighted a very interesting aspect that the technological advancement prompted deceptiveness as the humans assumed the victory in the battle against plagues and then three pandemics in 21<sup>st</sup> century unveiled the reality. The infectious diseases were relatively controllable so, it masked the ill-preparedness of the world against pandemic such as COVID-19. The study urged international response; the suggestions of the paper are for globalized world but 2016 marked the shift in global trends. So, the paper is good for reviewing past pandemics and locating a pattern of generalized states behavior during such times but lack farsightedness with regards to unprecedented crisis such as COVID-19.

The writer of “COVID-19: A socio-economic perspective” has looked into social and economic and political impacts of COVID-19. The writer has explained the psychological impacts of economic challenges faced by the people at local levels and explain the stigma attached to the patients of COVID-19 but the said psychological impacts are directed at the patients of COVID-19 and ignore the rest. The paper lacks the mechanism of how things will unfold in coming days. Similar approach is found in political impacts where the author explains that this crisis will encourage political awareness but gave a sweeping statement of regime change altogether without supporting evidence or established patterns.

In the article “A sociology of COVID-19”, explains states will not step back from the assumed enhanced position and power, state surveillance combined with AI to counter COVID-19 will curb the civil liberties in long run. Corporations will also join the race to solidify their power. The writer predicts shift in power from market and states to the commons by showcasing the positive side of the crisis where locals were mobilized generously to ease the severity of the crisis. While giving emphasis on cooperation and coordination at local level, the writer has ignored the selfish approach at international level. However, racial disparities during the crisis and gender question has been considered in fair way, by underling the disrupted economy of women and their services during this pandemic. The writer concludes that nationalism is not the answer to this global crisis without providing a proper pattern or evidence that how nationalism is hindering global cooperation and what is the sociology of COVID-19 at international level.

### 3 Response of Major Powers in Wake of COVID-19

Almost all the nations around the world have tried to contain the spread of virus by taking the recommended non-pharmaceutical measures by World Health Organization (WHO). However, there are variations in the approaches of governments to adopt measures and the timing of these measures differ substantially. Three of the major powers where coronavirus cases had increased at an alarming rate have a lot of differences but one thing in common and that is populist leadership. Their assault on nonpartisan experts has undermined the fight against virus (Goldberg, 2020). The leaders according to Steven Levitsky, “claim to have a kind of common-sense wisdom, that the experts lack” (Leonhardt, 2020).

That is why all three leaders ignored precautionary measures and guidelines suggested by WHO. In U.S, Trump’s response varied on daily basis and has diluted by the federalist system, which has empowered the governors to take decisions (Leonhardt, 2020). President Jair Bolsonaro also sent a message to the world that a good healthcare system is useless if the management is incompetent. Few countries such as Italy realized the gravity of the situation but after the virus was successfully penetrated the national borders. Other countries such as India where the lockdown was imposed frantically generated domestic migration crisis. The populist leader there wanted to send a message to the world that India is doing great however, the hurried imposition cost the country many precious lives. Few countries such as South Korea, Singapore, Germany and Canada had successfully mitigated the upheaval. They made necessary preparations when the virus was in China and learnt lessons to contain the spread from Beijing and by following guidelines set by WHO. The countries owned the responsibility and acted according to the need of the hour rather than engaging in bucket passing.

The following table demonstrates the comparative analysis of the above-mentioned countries by exhibiting the presence or absence of the necessary ingredients of successful crisis management.

**Table 1**  
*IMF, Policy response to Covid-19*

| Countries      | Preparedness | Income GDP Ratio Devoted for Health Sector | Compliance with WHO guidelines | Centre's Economic Relief                                                                                        | Share in Bucket Passing |
|----------------|--------------|--------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------------|-------------------------|
| United States  | ×            | 16.9%                                      | ×                              | US\$2.3 trillion (around 11% of GDP)                                                                            | ✓                       |
| Brazil         | ×            | 9.2%                                       | ×                              | Fiscal measures adding up to 11.8 percent of GDP, about 1% of GDP in credit lines to SMEs and micro-businesses. | ✓                       |
| United Kingdom | ×            | 9.8%                                       | ×                              | £330bn, 15% of the GDP                                                                                          | ✓                       |
| Italy          | ×            | 8.8%                                       | ×                              | €25 billion (1.6 percent of GDP), further €25 billion (1.6 percent of GDP) in July 2020.                        | ✓                       |
| India          | ×            | 2.0%                                       | ×                              | \$266bn, equivalent to 10% of GDP                                                                               | ✓                       |
| Singapore      | ✓            | 4.4%                                       | ✓                              | 5 packages worth \$92.9 billion (19.7 percent of GDP)                                                           | ×                       |

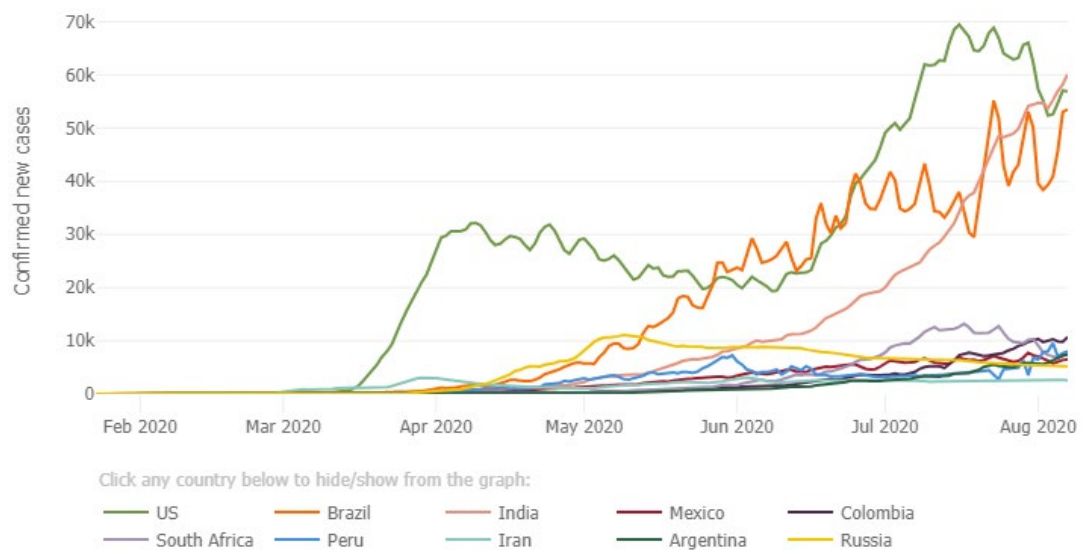
|                    |   |       |   |                                                                                         |   |
|--------------------|---|-------|---|-----------------------------------------------------------------------------------------|---|
| <b>South Korea</b> | ✓ | 8.1%  | ✓ | Three stimulus equivalent to 14% of GDP                                                 | × |
| <b>China</b>       | ✓ | 6.6%  | ✓ | RMB 4.6 trillion (or 4.5 percent of GDP)                                                | ✓ |
| <b>Germany</b>     | ✓ | 11.2% | ✓ | €156 billion (4.9 percent of GDP) in March and €130 billion (4 percent of GDP) in June. | × |
| <b>Canada</b>      | ✓ | 11.6% | ✓ | \$317 billion CAD (15 percent of GDP)                                                   | × |

Source: <https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#T>.

The considerable amount of stimulus packages demonstrates state's enhanced role to regulate economy. Historically, it is evident that globalization could not survive without the support of state, economy is running in a labyrinth, and which always ends on states. The neoliberal project was under scrutiny after Global Financial Crisis and then neofascist bang took the stage to give it final the blow, now this pandemic with lethal economic insecurity, global recession and globalization-sponsored virus plausibly represent a break with neoliberalism (Doherty, 2020).

The world expected U.S to act as global leader during the crisis but hosting a populist leader in office, it turned out to be a massive disappointment. Nationally, an astonishing display of denial, distraction and delay was evident which allowed the virus to overwhelm the country and the health system (Jones, 2020). Internationally, resistance to international health organizations was apparent and U.S threatened to leave WHO (Jones, 2020). National Security Council's global health security office was also dissolved by Trump, the office was supposed to prepare country (Beth, 2020). When United States started taking the pandemic seriously, the virus had already become an American catastrophe (Madrigal, 2020). United States certainly has little to offer for inattention, because, despite its considerable advantages; scientific expertise, vast resources and biomedical might, it floundered (Yong, 2020). United States devoted 16.9% of GDP for healthcare sector in 2018 (OECD, 2019). Vulnerable health system and racial disparities and reliance on thin supply chains just for the sake of profit and inadequate testing flooded the hospitals which did not have even masks to offer, and they ran out of ventilators. Obama administration started preparations to combat the coming pandemics and ordered ventilators to be made at home. However, neoliberals once again strike in, the order was given to some small company, it was aimed at high-quality and low-cost products but Covidien shelved the project and successfully removed the expected potential competitor to its high-cost ventilators (Polychroniou, 2020). Now the state has issued an estimated US\$2.3 trillion (around 11% of GDP) under the Act of Coronavirus Aid, Relief and Economic Security to bring the economy on track (IMF, 2020). U.S, UK and Brazil had considerable time to prepare for the pandemic as the surge was experienced in these countries after March, they had four months to prepare but they willfully wasted that precious time. Following illustration from Coronavirus resource center of John Hopkins university indicates the avoidable spike in cases in United States, Brazil and India (Center, Johns Hopkins Coronavirus Resource, 2020).

**Figure 1**  
New cases of Covid-19 in world countries.



Source: <https://coronavirus.jhu.edu/data/newcases>.

Situation was even grim in Brazil where the populist leader Bolsonaro criticized and rejected all the NPIs and WHO guidelines. He encouraged fake news and greeted the pandemic by attempting to disarm SUS, Universal public health system of Brazil (Osborn, 2020). SUS has performed well in past pandemics such as HIV and Zika virus, the system had the potential to imitate the success, but Bolsonaro let the virus to sweep into Brazil. The appointment of military officials in the top ranks of the Ministry of health, underfunded health system and the low quality of management and Bolsonaro's denialism ripe Brazil to be an epicenter of Coronavirus (Osborn, 2020).

Only 9.2% of the GDP was devoted in 2017 for National healthcare, it was the lowest since 2011 (Agency, IBGE News, 2019). Brazilian health system was celebrated for its cooperation and coordination that was regional and even international in scope (Gayard, 2019). But Bolsonaro has damaged Brazil's international stature. All the populists have one thing in common, battering the existing institutes established by the former leaders irrespective of their effectiveness and lashing out at the international organizations. Bolsonaro also threatened to leave WHO (Osborn, 2020). However, some Brazilians have sought out a map to set on the counter road to defeat the Coronavirus including health professionals, NGOs and former politicians who engaged in public health diplomacy (Osborn, 2020). Civil society has tried its best to mobilize the underfunded public health community, that brings hope for the sleeping deep Brazil, nevertheless, public authorities will justly translate these efforts. The government has offered a bailout package of worth up to 11.8% of GDP, about 1% of GDP in credit lines to SMEs and micro-businesses (IMF, Policy response to COVID-19, 2020).

Similar trends were observed in UK, where the signals sent by Chinese and Italian scientists were ignored deliberately and the government lost the valuable time to prepare in order to avert the calamity. The country led by a populist was living in deception of pandemic readiness because of the most hailed yet underfunded and understaffed National Health Service. Healthcare expenditure of United Kingdom makes only 9.8% of the gross domestic product; lowest among developed world (Felter, 2020). The slogan 'stay home and protect NHS' exhibits that the healthcare system was not ready to accommodate a flood of patients. Caricature of imperial nostalgia, populism and general lack of seriousness and foreseeing impending catastrophe accompanied by inept leadership and conveyed by bungling decisions

based on inept advice backed by worse evidence and supplied by poorer testing, with inevitable consequences; UK failed in preparation, diagnosis and treatment (McTague, 2020). Later, bailout package of worth £330bn which makes almost 15% of the GDP was announced by the government to heal the damage (Chu, 2020).

UK had seen consequences of delayed response to the pandemic in neighboring countries still it imposed lockdown after one week in Italy and the rest. Even in Italy, the lockdown was overdue, the deferral overwhelmed hospitals within few weeks demonstrated the importance of decisive and quick response which was entirely absent from all the adversely hit countries. Northern Italy, renowned for having world's best healthcare system collapsed when it was called off, particularly because of lack of preparedness. Dependence on thin supply chains for medical equipment, chronic lack of ventilators, overburdened ICU capacity and vulnerable aging population backed catastrophe. Only, 8.8% of its GDP of Italy goes to healthcare sector (OECD, OECD Health Statistics 2015. , 2015). The beggar-thy-neighbor approach was apparent among EU countries when Italy was denied in response to the request for help. It was deemed as the blow to the essence of globalization as the region is considered beacon of hope for globalized world. In order to compensate, EU leaders have announced recovery package, and Italy will get the bigger slice for being the hardest hit by virus, 28% or €209 billion are directed towards Italy (DW. Com, 2020). Nationally, the government has announced emergency package of €25 billion (1.6 percent of GDP (IMF, Policy response to COVID-19, 2020).

The failure of developed states such as Italy, UK and U.S with theoretically stretched, well-prepared and well-equipped health system brought nightmare of the magnitude, intensity and severity of the crisis for the developing states. In order to avoid the likely future, developing countries rushed to adopt NPIs but some did it without considering the local sensitives. Indian government wanted to exhibit its sham preparedness, it turned out to be a debacle. Hosting some of the world's densely populated cities with the poorest people in the world where social distancing and physical isolation are privileges available only to a minority, the virus spread quickly (Komireddi, 2020). The country had only 618 confirmed cases when the lockdown imposed, now 2 million, the rise in cases from 100 to 100,000 took 64 days (Bal, 2020). The stringent and hurried lockdown generated the worst domestic migration crisis in India since 1947 which also worsened the situation (Infante, 2020).

The country has one of the most vulnerable healthcare system in the world and dependent on exports. India: the second most populous country, yet only, 2.0% of GDP is devoted to health sector (WHO, 2019). The draconian lockdown left 140m workers vulnerable as their earnings collapsed (Kazmin, 2020). The government has announced \$266bn stimulus package equivalent for 10% of GDP to mitigate post-pandemic economic recession (BBC, 2020).

India did not have to look far-off for successful model to contain the contagion. Its neighbor: Singapore is a success story. Despite having geographical proximity with China, the country has successfully contained the virus at first place. Singapore was the most affected country during 2003 SARS pandemic so, it established outbreak preparedness, including developing a national pandemic preparedness plan based on risk assessment and calibration of response measures that are proportionate to the risk (Vernon J Lee, 2020). The country had enhanced operational capacity and coordination to counter the crisis. Efficient public administration, particularly in health sector and high levels of governing and policy capacity are the result of a cumulative process of capacity-building efforts over time (Woo, 2020). Almost all the hardest hit countries reduced their healthcare expenditures in pre-pandemic timeframe while, Singapore has increased its health care budget from \$2.2b to \$10.2b during FY2007-FY2018 (Budget, Singapore, 2020). Health expenditures makes 4.4% of the GDP of Singapore (World Health Organization, n.d.). Singapore also faced economic fall out, however, it possesses a large national reserves for emergency situation, these were mobilized at various points during the COVID-19 crisis (Woo, 2020). The country has announced 5 packages of measures worth \$92.9 billion (19.7 percent of GDP) since February 2020 (IMF, Policy response to COVID-19, 2020).

Singapore is not the only country to learn the lessons from previous pandemics, South Korea is also in the list. The lessons from MERS in 2015 made the Korean government to invest heavily in emergency

preparedness, designated the Ministry of the Interior and Safety as the main coordinator in health crises rather than the prime minister or the president (Felter, Comparing Six Health-Care Systems in a Pandemic, 2020). When the virus entered in South Korea, KCDC actively performed contact tracing, quarantined the contacted persons, and diagnosed and isolated the infected as soon as possible (Choi, 2020). The government complied with WHO guidelines and developed test kits domestically which facilitated testing for millions (Felter, Comparing Six Health-Care Systems in a Pandemic, 2020). The drive-through screening was a success, it was quick and safe (Jeong, 2020). South Korea devoted its 8.1% of GDP to health sector out of which 2.9% went to preventive care, 0.3% more than the ideal share (OECD, 2020). Despite managing the pandemic decisively, the country has to face financial crisis the worst one since 1998 Asian financial crisis (Kim, 2020). To mitigate the post-pandemic effects the country has announced, \$28.8 billion supplementary budget, the third one this year, equivalent to about 14% of gross domestic product (Kim, 2020).

China (genesis of the virus) had also adopted post-SARS strategies to address the health emergency. However, delayed response was also evident and when the government realized the situation, the hospitals were overwhelmed. Chinese government's ruthless and draconian lockdown helped the country to flatten the curve within few months. The Chinese authorities met the international standards, shared information with the world about the virus, isolated the infected and their contacts and developed massive diagnosis and treatment procedures within no time (The Lancet, 2020). The level of coordination and cooperation among Chinese institutions which backed the fight against outbreak, was missing in most affected countries. The authorities built dozens of temporary hospitals in a matter of days to accommodate COVID-19 patients (Williams, 2020). The country is the most populous country, yet the healthcare share makes only 6.6% of the GDP (Fang, 2020). Despite having meager share in GDP for health sector, the country demonstrated the potential to address the possible outbreak (Williams, 2020). The country was accused of slow response and the officials have accepted the vulnerability of healthcare system and the government was already set on the road to reform the health sector, XI's "Healthy China 2030" demonstrates this ambition. From 2003 to 2014, total health spending of China increased fourteen-fold (World Health Organization, 2016). The stimulus package of RMB 4.6 trillion (or 4.5 percent of GDP) has a large share for increased spending on epidemic prevention and control and production of medical equipment (IMF, 2020).

Historically, virus has a route from Asia to Europe, in Europe Germany is one of the countries to meet the pandemic with full preparation. Following the Asia's track and trace model and to confine the infected and their contacts avoided massive hospitalization. The country, host to world's prominent pharmaceutical companies and best healthcare system and developed its testing kit in the early month of January 2020 (Eddy, 2020). Besides massive testing, the German healthcare system received drastic measures, such as increasing intensive care capacities or postponing non-urgent clinic visits in order to prevent an overload of health care providers (Paffenholz, 2020). Germany has twice as many intensive care units per capita as France and almost four times as many as Italy or Spain (DW. Com, 2020). The country has the highest level of preparedness in terms of medical facilities so does its healthcare budget which makes 11.2% of GDP (OECD, 2019). The federal government adopted two supplementary budgets to meet the post-pandemic crisis, these worth of €156 billion (4.9 percent of GDP) in March and €130 billion (4 percent of GDP) in June (IMF, 2020).

The necessary tools in the war against the virus were implied in almost all the successful countries irrespective of the region, the same tools inferred the spread of virus in Canada. The country has learnt and translated its lessons from SARS, the most important and effective one was to reduce all avoidable hospitalizations ahead of the outbreak, and treat patients at home as much as possible (Webster, 2020). The government imitate the lesson and successfully avert the disaster by substantial testing and other NPIs, the government was also well-coordinated at all levels unlike SARS pandemic (Webster, 2020). The country devotes 11.6% of the GDP to health sector (Canadian Institute for Health Information, n.d.). The adverse effects on Canadian economy sponsored by sharp decline in global oil prices was evident, so the government has announced relief package of worth \$317 billion CAD (15 percent of GDP) (IMF, 2020).

It is clear from the above-mentioned debate that the countries which fought the battle successfully were well-prepared, well-equipped, well-coordinated with well-funded healthcare system and have considerable human resource to fight. The GDP share of healthcare sector of these countries has witnessed increase since the last decade. They utilized national potential to produce testing kits and other medical equipment. The well-prepared countries had excessive intensive care beds and ventilators, the other avoided hospitalization by keeping nationals indoor. Other countries which delayed their response such as China, later on, poured all the resources and power to confront the virus and turned the upheaval into a success story.

The governments which were failed in managing the crisis successfully, engaged in bucket passing and deceptive preparedness. Their overconfidence was based on nothing but underfunded, ill-prepared and understaffed healthcare system. So, when the virus exposed vulnerabilities of the healthcare system globalization and stretched supply chains were targeted by these leaders. In reality, cuts in healthcare sector financing is evident in these countries, preparations in the wake of previous pandemics was absent, ignored warnings by the scientists and deceptive approach cost lives and caused prolonged lockdowns that invited recession.

#### **4 Future of Globalization in Age of Hyper-nationalism**

The scale and magnitude of the intensity of the virus has left unprecedented footprints on global economic system. It has marked the sharpest and deepest contraction in the history of capitalism (Saad-Filho, 2020). The international trends of self-help, scapegoating and beggar-thy-neighbor was far apparent in the states who raised the flag of internationalism and cooperation than any other part of the world. The virus made room for the nationalist leaders to exploit the moment and at this moment, hyper-globalization may seem the real culprit because it was hyper connectivity that spread the virus globally. The moment is a stress test for globalization, but the nationalists also do not have any answer to such nontraditional security threats. After the pandemic, the impending economic and social crisis will force the people to look for competent leaders at national level nationalists will be out of options soon. Nationalist policies are good when the effects do not spill over the national borders and in 21<sup>st</sup> century, there are rare matters which require nationalist solutions. The said pandemic and coming ones along with other nontraditional security threats are global in nature, isolation and nationalism is not the answer but deeper connection and cooperation.

There is so much talk about the suspended supply chains and bringing chains back at home, if states will bring the supply chains at home, it will not be a smooth road, the governments will have to foresee the immediate advantages and long-range disadvantages of market protectionism. If for the time being a cyclic economic pattern is practiced, how can one guarantee economic self-sufficiency? How the raw material and industrial supply lines work? Value added products are just one piece of puzzle to be understood. Local thinking and short-termism will also bar innovation and economic development (Saad-Filho, 2020).

Nationalistic rhetoric has lessons to learn from this pandemic because the pretext of nationalism is two-edged swords. This current pandemic is not the last of this century, rapid deforestation and has increased wildlife to human interaction which will invite many viruses to pass on to humans, so in the age of hyper nationalism, it will become impossible to contain these viruses singlehandedly. The shadow of nationalism on vaccine development and distribution also asks for attention, what if development of vaccine or effective therapeutic treatment overshadowed by the pretext of nationalism, how it will serve the purpose?

#### **5 Conclusion and Recommendations**

Doctors and scientists around the world showcased that what a true global community could look like, they reached out each other, pool their talent and sources to find solution as possible and their efforts have translated into vaccine development in the early few months of the pandemic. The global response should value the significance of research and development in virulent diseases, the health profiles of

the travellers should be scrutinized and shared in collaborative manners, existing protocols of chemicals and biological weapons should be rectified and internalized. The governments are responsible to avert the catastrophe by implementing effective policies and ensure the safety of their citizens, however, the capitalist mindset had hampered states ability to comprehend and foresee the impending crisis. The effects of the current crisis go beyond those felt by healthcare systems; they stretch across virtually every sector of society-from food systems to education-and have debilitated economies.

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