India’s Vaccine Diplomacy: Able Internationalism or Abscondence of Responsibility?

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India announced a programme called ‘Vaccine Maitri’ or Vaccine Friendship on the 20th of January, 2021. The launch was followed by an emphatic pronouncement by India’s Prime Minister Narendra Modi of the resounding success India had had with the management of the coronavirus crisis at the World Economic Forum in Davos. He emphasized that the “proactive approach with public participation” (WFE 2021) that India instituted in its management of the crisis, where along with strengthening “covid specific health infrastructure,” (WFE 2021) pandemic management training of human resources as well as effective use of technology in the management of the crisis, India’s successes in the fight against the pandemic “saved humanity from a big disaster” (WFE 2021) and this success would in turn “help in the success of the world” (WFE 2021). The trajectory sketched in the speech was impressive indeed – the impressive growth of India’s capability in the
production of PPE and test kits, its impressive outreach to countries across the world in terms of delivery of essential medical supplies, launching the largest vaccination drive in the world, culminating in the proposed plan of vaccine delivery across the globe as a fulfillment of India’s “global responsibility.” Vaccine diplomacy therefore was not only a function of India’s historical “internationalism” (MEA 2021) but also an expression of its “humanism.”

On 17th March, the External Affairs Minister appraised the Upper House of the Indian Parliament on the status of India’s ‘Vaccine Maitri’ emphasizing that not only was India “internationalist by virtue” of its “culture, traditions, heritage and history,” more importantly, Indian policymakers have “never seen a contradiction between this internationalism and the nationalism” (MEA 2021). This consonance between its international vaccine diplomacy and domestic drive of vaccination was further bolstered by invoking the Indian freedom struggle, its support of the decolonization of former colonies, its historical support of the principles of “international cooperation and solidarity.” The thrust on the interconnectedness of fates of the world and India’s obligation as the “pharmacy of the world” to extend support were underlined in the speech. According to the data by the Ministry of External Affairs, India supplied vaccines to 95 countries across the globe. Significantly, the last shipments were to Syria and Albania on the 16th of April. On this date, there were 1.5 million active coronavirus cases in the country. The “success of India” had faltered as the second wave of the pandemic hit the country hard. India had already halted exports to other countries by the end of March, and Serum Institute of India, the largest producer of coronavirus vaccine backtracked on its commitments to the COVAX programme.

This paper attempts to understand India’s vaccine diplomacy in three phases. First, it charts India’s efforts in providing pandemic aid. Second, it explains the domestic factors that interrupted this cooperation. Finally, it attempts to understand how to reconcile the necessity of global cooperation for the management of the pandemic crisis along with domestic responsibilities of states to their own populace.
India’s Vaccine Diplomacy: Rationale behind Policy Choices

Since the onset of the global pandemic, several speeches by the Indian Prime Minister, Narendra Modi have referred to India as the “pharmacy” of the world – the idea that India’s well developed pharmaceutical manufacturing capacity would have a role to play in the pandemic was hardly a stretch. India’s vaccine diplomacy, or ‘Vaccine Maitri’ is the most recent and the most visible arm of its pandemic aid policies.

As early as May 2020, there was a shift in Indian foreign policy, in that Prime Minister Modi “intervened” and reactivated organizations such as the Non-Aligned Movement (NAM) as well as the developments that have continued to take place within the neighborhood, especially Indian attempts to revive the often contentious regional organization, the South Asian Association of States (SAARC). The goal was to emphasize the need for a more humane international order, that went beyond the pursuit of individual economic interests of a few and focused instead of the collective interests of humanity, the reemphasis on the need for international cooperation and most importantly, the morality of India, with its humanist traditions that could be backed by material capabilities in the revamped international order. India as “pharmacy to the world” has remained a predominant point much before the efforts at vaccine diplomacy began. Indian aid in supplying essential medicines and medical supplies to over 150 countries during the pandemic - especially medications such as hydroxychloroquine and paracetamol, shipped across the world even during pandemic induced lockdowns.

The economic growth of the Indian pharma and health industry during the pandemic is another success story enforcing the idea that India has the goods to back the kind of humanitarian, collective goods system it is proposing the international system should morally morph into. Indian production of PPE, ventilators, testing kits itself is a remarkable success story, where domestic capacity grew by leaps and bounds to fulfill domestic demand and eventually, even developed export capacity. Coupled with this, were the relief operations carried out by ‘Vande Bharat Missions’ where stranded non-citizens were also evacuated.
“Vaccine diplomacy” is very much a deliberate policy option therefore and not some random epithet being bandied about. Indian commitment to provide vaccines globally, whether it is the bilateral initiatives it has undertaken, the cooperation agreement with the WHO or the more recent Quad-US vaccine partnership have all been announced on various multilateral fora, with assurances by the Indian Prime Ministers of India’s support to help all humanity fight this crisis. The goal is to “make a difference” “enforce India’s reputation as the Pharmacy of the World” and bolster faith in “Make in India” (MEA, 2021). As Jaishanker put it recently, “more than our vaccines, our policies and conduct have emerged as a source of strength for the stressed and vulnerable nations of the world. They can see that there is at least one major nation that truly believes in making vaccines accessible and affordable to others in dire need” (MEA 2021).

These promises of support have also served to add heft to India’s demands for reformation of the international system - for example, at the United Nations General Assembly N GA, Prime Minister Modi exhorted “Till when do we have to wait? Till when will India be kept away from the UN’s decision-making process?” (UN GA, 2020)

The presentation of the pandemic aid, or as our External Affairs minister put it, making “Indian goodwill meaningful in practical initiatives and activities” (MEA, 2021), is a part of India’s civilization congruity between nationalism and internationalism, as well as its contribution in relief efforts in humanitarian crisis, commitment to global norms like climate change as well as leadership and development of initiatives such as the International Solar Alliance. The internationalist, humanitarian India, therefore, has a moral right to be at the decision-making table - this is what underlies the “human-centric global outreach” (MEA, 2021) of India’s Vaccine Maitri.

What have been the matrix of India’s vaccine diplomacy? Before it halted exports, India supplied Indian-manufactured vaccines to 95 countries across the globe - these have either been delivered as grants, commercially or as part of the COVAX programme. While the first few partners were countries in the neighborhood, especially Bhutan which has had immense success in its vaccination effort, several countries of Latin America and the Caribbean also feature in the list – primarily
Brazil, Barbados, Dominica, Mexico, Dominican Republic, El Salvador, Argentina, Antigua, Suriname, St Lucia, St Kitts & Nevis, Guatemala, Nicaragua, Guyana, Jamaica, Belize, Bahamas, Bolivia, Paraguay. It is very interesting to note how many Caribbean islands have made the list. According to a recent study carried out by GIGA, the Caribbean nations have made good use of their voting powers in the UN to negotiate lucrative deals for themselves with both India and China, especially given how even small consignments of vaccines have great power to aid the recovery process in island nations of smaller populations (Hoffmann, 2021).

The geopolitics of vaccine sharing and the consequences they might have on international fora are being interpreted in other ways too. For example, recently, the foreign minister of Taiwan claimed that the Indian consignment of vaccines to Paraguay was an attempt to safeguard the status of recognition of Taiwan by the state and prevent China from arm twisting in the region in the name of aid. This has been strenuously denied by Indian MEA.

The fact remains, that this competition between India and China and their respective vaccine diplomacies has been instituted in the media – several news reports seem to track this competition between ‘Vaccine Maitri’ and Health Silk Road. With the change in the fortunes of India’s vaccine diplomacy, the contours of this competition have also been challenged. What were the reasons behind this change in fortune? The next section attempts to delineate the trajectory of the same.

**India’s Vaccine Diplomacy and the Dissonance between Nationalism and Internationalism**

It was the domestic electoral cycle that may said to have disrupted India’s pandemic fortunes. The various domestic crises during the first wave of the pandemic, like the migrant exodus after the imposition of a national lockdown and the ensuing calamitous economic and human costs had been brushed under the management of Covid deaths. The toll was expected to be much higher than it was in 2020 and India’s pandemic aid efforts further added to its good pandemic governance status as developed countries like the USA suffered egregious human costs. In comparison, India seemed to have exceeded expectations,
especially its own. The pandemic aid refurbished its international image as a country that was able to exert at least some control over the situation, further supported by announcements of aid and a new policy vision of a self-reliant India. As vaccine diplomacy picked up speed, the imminent state legislative assembly elections, especially in the state of West Bengal saw massive electoral rallies organized by the ruling and opposition parties. As cases surged in several states across the country, shortages of vaccine began to be reported. The central governments vaccine diplomacy became the target of criticism by opposition leaders as India was caught in the grips of the second wave of the pandemic. Free reign given to massive election rallies and enthusiastic participation by the Prime Minister himself in these rallies, the heavily attended Kumbh festival and the blatant flouting of social distancing norms found public censure. Soon, massive oxygen and lifesaving drug shortages were being reported across the country with the Indian people struggling to access hospital beds, with heartbreaking scenes of death and despair common across the country. The pandemic death toll continues to rise. The Indian government was forced to relinquish its vaccine diplomacy and turn attention inwards. On May 1st, vaccination drive for the 18-45 age group was announced with some conflict between the centre and states. The inequity of access to technology, the widescale black marketing of drugs, oxygen concentrators, the collapse of the health infrastructure in the face of acute shortages burst the bubble of Indian “success” at pandemic management. Several international media reports condemned the management of the pandemic by the Indian government and the Bhartiya Janta Party (BJP) registered an electoral defeat in the state of West Bengal.

The international community has rallied in support of India in its time of crisis. The UK was among the first countries to send aid to India, where India accepted aid from international donors for the first time in 16 years (Roche, 2021). The US White House Fact Sheet (2021) laid out an array of aid directed towards India by the Biden-Harris administration, where President Biden acknowledge India’s aid to the US in 2020 when the country had been in a “bind” during early pandemic. Aid has continued to flow in from all quarters of the world and the foreign ministry has pointed to statements like Biden’s as a proof of the goodwill that India has generated internationally through its aid efforts. Critics have called this a spin that attempts to deny
accountability for the state of affairs in the country, with even the courts of the land decrying the role the Election Commission of India played in exacerbating the Covid crisis in the country.

Another interesting aspect of this cooperation has been in terms of India’s alleged rivalry with China. India has procured and bought several necessary supplies from China (Roy, 2021), effectively undercutting the competition between the two countries in terms of aid diplomacy. There is an understanding that Indian production capabilities cannot shirk their international commitments overlong and that the country must resume the commitments it made internationally. For now, attention must remain inward.

**Wither Cooperation?**

This dichotomy between securing the interests of its own people over the much criticised efforts at international cooperation, especially in light of the shortages in infrastructure and capacity building exposed by the second wave of the pandemic raise another important point. Can the states of the global South condemn the stockpiling by the global North if the criticism against the Indian policy makers stands?

It makes sense if the lens is widened to include the politics and policies of the Indian government followed domestically in light of securing its political interests rather than presupposing a national-international binary. Shortages in availability of oxygen have raised concerns why sufficient efforts were not made towards building capacity when the second wave had been predicted by scientific experts? Why were crowded rallies and religious festivals allowed to proceed unchecked during a pandemic? Why were the existing inequalities of access not considered whether it was the sparse rural health infrastructure or even the inaccessibility of information for many in the country? The technology driven vaccination drives with subsidizing of vaccine costs left up to individual states only exacerbates this divide.

The pandemic is global and as rightfully said, collective efforts are the only possible solution. However, in the inequality that exists in the international system, it is imperative that states and domestic governments prioritize the most vulnerable. The crisis in India, is not due
to India’s efforts at vaccine diplomacy or its pursuit of its historic and consistent foreign policy goals of international status through principles of cooperation and solidarity, the issue seems to be the electoral politics within the country and the populist measures to maintain and preserve political power.

REFERENCES


