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## Damaging effects of vaccine geopolitics and the EU's distorted soft power

Miloš PETROVIĆ, Zlatan JEREMIĆ<sup>1</sup>

**Abstract:** The authors deliberate that the EU's soft power leadership has been inadequate during certain periods of the pandemic, being additionally challenged by proactive campaigns of other international actors. According to the authors, such EU underperformance primarily lies in the damaging fact that the Union perceives and treats aspects like the inoculation process not solely as a health-humanitarian issue, but also as a geostrategic activity. The authors consider that EU logic has been largely shaped by the pre-existing geopolitical distaste for China and Russia, and hence also their subsequent COVID-19-related engagement in Europe. Apart from strategic rivalries, EU international status has been exacerbated by deteriorating relations with the UK. According to the authors, the aforementioned international actors have been applying various soft power instruments during the mass inoculation process against COVID-19 in Europe, which also resulted in consequences that are usually attributed to hard power. Antagonisms between the abovementioned stakeholders manifest in unfavorable phenomena such as “vaccine nationalism” and “jab geopolitics”. The authors argue that a less selective, and more flexible and pragmatic approach would have been more beneficial both for public health and the EU's impaired reputation in certain parts of CEE.

**Key words:** vaccine nationalism, EU, COVID-19, challenge, inoculation, power, Russia, China, reputation, CEE.

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<sup>1</sup> Dr Miloš Petrović is a Research Fellow at the Institute of International Politics and Economics, Belgrade and a Guest Lecturer at the Faculty of Political Science, University of Belgrade.

E-mails: [milos.petrovic@diplomacy.bg.ac.rs](mailto:milos.petrovic@diplomacy.bg.ac.rs); [milos.petrovic@fpn.bg.ac.rs](mailto:milos.petrovic@fpn.bg.ac.rs);  
<https://www.researchgate.net/profile/Milos-Petrovic-12>.

Dr Zlatan Jeremić is a Research Fellow at the Institute of International Politics and Economics, Belgrade.

E-mail: [zlatan@diplomacy.bg.ac.rs](mailto:zlatan@diplomacy.bg.ac.rs).

## Introduction

The authors address the question of how different activities in the domain of vaccine procurement process manifest in international relations in Europe in the context of the ongoing COVID-19 crisis. Research shows that under current pandemic conditions, vaccine acquisition, apart from being a public health element, also constitutes a geopolitical activity, which represents an unfavorable phenomenon in the context of overcoming that challenge not only in Europe, but also globally. The ongoing mass immunization process manifests in several adverse aspects. Firstly, some foreign actors use vaccine diplomacy as an instrument of soft power, attempting to improve their international status. Secondly, political conflicts have emerged, as observed in the context of the EU-UK vaccine row in 2021, but also pertaining to the internal cohesion of the European Union. Thirdly, disagreements regarding the vaccine approval process in Europe divert attention away from the need to urgently focus on overcoming the pandemic crisis on an international scale.

Having in mind the abovementioned, the authors aim to show that the EU approach towards the vaccination process and some other aspects has been prolonged and inadequate, as well as responsive and reactive rather than proactive, being motivated by the dynamic campaigns carried out by China, Russia, and the UK. Such a logic of EU institutions originates in the pre-existing geostrategic disinclination towards the presence of China and Russia in Europe, which has continued or even worsened during the pandemic. The authors consider the geostrategic calculations damaging, having in mind that COVID-19 represents a global risk which currently affects the entire humanity, for which reason it requires more, rather than even less, cooperation and solidarity. The authors aim to show that, by denouncing the possibility to show more flexibility and a less selective approach, and opting to perceive the inoculation and other processes through geopolitical lenses, the EU has missed the opportunity to portray itself as one of the leaders in the international dialogue surrounding the COVID-19 crisis, therefore failing to contribute to overcoming this challenge globally. Instead, the EU engaged in unfavorable activities like vaccine nationalism, which has affected its soft power potential in international terms and further disrupted the perspectives for reducing tensions in cooperation with major actors like Russia, China and even the UK. The

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researched period largely refers to the first half of 2021, when the mass immunisation process against COVID-19 intensified in Europe.

Not long following the official inception of immunization in Europe with vaccines against COVID-19 (in further text also: “vaccines” or “jabs”) it became evident that the process is faulty, which may be illustrated through three interconnected phenomena: (1) the absence of solidarity within the EU (the intergovernmental aspect overriding the supranational, as part of the broader occurrence of “vaccine nationalism”); (2) the shortage of empathy of the EU towards the partner regions, such as the Western Balkans, and (3) the greater presence of rival actors and geostrategic influences (“vaccine/jab geopolitics”). The authors interpret these manifestations through the perspective of intertwining between the soft power and the hard power on the European continent in the specific context of the pandemic, thus shaping the thematic focus of this paper.

Namely, various actors have been using the humanitarian aspect not solely in an attempt to reverse the unfavorable course of the pandemic, but also to advance national interests and improve their external political image. According to certain soft power indicators in the domains of international relations and foreign reputation, Russia and China have been downgraded during the COVID-19 pandemic, which they aspired to compensate through various activities, ranging from the classic humanitarian diplomacy (donations of medical equipment, healthcare workers exchange programmes, financial aid, etc.) to international promotion and distribution of vaccines produced by their domestic manufacturers (Brand Finance 2021, 33-34; Lee 2021a, 2). Nevertheless, the pandemic crisis also affected the reputation of the USA and European countries which are traditionally high-ranking in the domains of soft power (Trapara 2021, 48; Brand Finance 2021, 4-7). As a consequence of decisions to limit the export of vaccines and medical equipment, these actors not only faced the erosion of their international reputation, but also failed to contribute to improving the unfavorable course of the pandemic in partner countries, including those in the Western Balkans (Požgan, Bojinović Fenko and Kočan 2020, 1134). Moreover, the European Union sidelined its liberal practices by becoming the first major trading power to impose overt export controls on COVID-19 jabs (Evenett 2021, 398-399). Through such protectionist activities, the EU institutions actually intended to rectify their earlier mistakes when even influential member states like Italy and Spain voiced their skepticism and disappointment regarding the inadequate functioning of supranational bodies, but also with how their fellow-members reacted to it (Luxner 2020). Specifically, during the Europe’s first major COVID-19 outbreak in Italy, the crisis led to that highly-developed nation’s devolution into a user of humanitarian aid. The responsibility for the inadequate and delayed response to the pandemic,

including the domain of vaccine procurement, has been growingly attributed to the EU complex bureaucracy and inertia, the lack of empathy among member states, as well as inadequate actions by “western” vaccine manufacturers, against which legal process has been announced (Reuters 2021a). Apart from numerous organizational and political hurdles, medical challenges have also aggravated the process, raising additional concerns over the efficacy of jabs, their side effects, mutations and so on (Gstrein 2021, 372). However, medical aspects will not be considered in this research, having in mind its academic focus on the international relations domain.

The lack of available vaccines against COVID-19 recorded during the first half of 2021, combined with the “inherited” political issues, have also contributed to the growingly geostrategic character of the ongoing battle against the pandemic. These aspects led to damaging manifestations as countries which had privileged ties with the vaccine manufacturers (such as the USA or the UK, as pioneers in the process) practically marginalized other countries and regions, including those that urgently required assistance in reducing the tragic toll of the pandemic. The decision of Hungarian authorities during the most fatal wave of COVID-19 to bilaterally secure the imports of the jabs produced by the Chinese Sinopharm and Russia’s Gamaleya Institute (in further text also: “eastern vaccines”) should be interpreted also bearing in mind the public health emergency situation. The authors will analyze this instance in further segments of this paper.

Nevertheless, the aforementioned bilateral activities, in the context of the global epidemiological crisis, cause ethical, epidemiological and security dilemmas, especially through comparing the highly developed nations and regions with beneficial access to vaccines to the economically-less developed or less influential countries, which rely on multilateral platforms. That brings us to the notion of “vaccine nationalism”. According to Zhou (2021, 2), vaccine nationalism is understood as (...) “the mindset and act of gaining preferential access to newly developed COVID-19 vaccines by individual countries”, especially those within higher-income ranks. While analyzing the European Commission’s 2021 temporary ban on vaccine exports in the context of vaccine nationalism, Evenett (2021, 399; while also referring to Ujal Bhatia, Caroline Freund and Christine McDaniel’s 2020 COVID-19-related research), illustrates that international phenomena through (...) concerns that governments may seek national advantage during the procurement, production, and distribution of COVID-19 vaccines, taking steps that frustrate or delay the equitable and efficient global distribution of such vaccines”.

Whereas the European Commission had negotiated deliveries with the “western” vaccine manufacturers on behalf of all member states, problems emerged surrounding the distribution of vaccines, especially those contracted

through multilateral frameworks, causing international discontent and tensions during the first two quarters of 2021. Contrastingly, countries like the USA, UK, Israel and also Serbia, which obtained the vaccines through bilateral agreements rather than multilateral frameworks, emerged as leading nations in the process of inoculation against COVID-19 during the first quarter of 2021. Multilateral arrangements at the EU level, as well as the CoVax initiative, designed to secure greater access to the vaccines for underprivileged countries or regions, initially failed, while bilateral shipments in the case of several Western nations functioned well (Petrović 2021, 97; Santos Rutschman 2021, 12). Multilateral efforts have been significantly challenged by such examples of “contractual bilateralism”, which manifested in nationalistic activities in domains of vaccine acquisition and distribution (Santos Rutschman 2021, 12-13). Apart from these unfavorable “nationalistic” tendencies, countries like the USA and the UK also enforced temporary limitations in domain of vaccine exports in order to prioritize their own population, which in the case of Britain deepened the already damaged relations with the EU, which will be analyzed further in the text.

The application of the “eastern vaccines” in Europe further incited the political phenomena of vaccine nationalism and inoculation geopolitics, which have been manifesting globally since the inception of the crisis (Fidler 2020, 749). Even the commercial name of the Gamaleya Institute vaccine – Sputnik V – which attempts to establish analogies with Moscow’s strategic triumph during the “cosmic race”, adds to the geopolitical impression. To the dislike of the geo-strategically awakened European Commission, the stronger presence of these actors has been recorded since the outbreak of the epidemiological crisis, especially across the continent’s eastern periphery (European Commission 2021b). The EU entry into the pandemic occurred at a sensitive political stage, during the strategic dispute with Russia (ongoing since the Ukrainian crisis), in parallel with the proclaimed “systemic rivalry” against China, and in the final stage of the multiannual exhausting process of UK withdrawal from the European Union membership (European Parliament 2020). The entanglement of rivalries and worsened relations with the abovementioned nations deepened during the pandemic, especially during the mass inoculation process, which surpassed the health domain and obtained geostrategic traits, which will be discussed in further segments of this paper as the main focus point.

Since the first quarter of 2020, the EU has experienced several negative aspects. Firstly, the political unity has been challenged. In April 2020, the Spanish PM, Pedro Sanchez, appealed for solidarity among member states in order to preserve the cohesion of the Union, whereas the German Chancellor, Angela Merkel, qualified the challenge as the most serious crisis since the establishment of the EU (Busse,

Loss, Puglierin and Zerka 2020). The absence of empathy was also recorded in neighboring regions like the Western Balkans (WB), which was subjected to limitations pertaining to the import of urgent medical equipment despite being included in the EU enlargement agenda (Von Der Burchard and Gray 2020). The EU's inadequate reaction also reflected on some later actions of member states like Hungary, which will be elaborated in closer detail. The Union's credibility also eroded internationally, while the unfavorable strategic phenomena, as well as a lack of political willingness, further inhibited the possibility to limit or reduce transnational rivalries, at least during the course of the pandemic. The entropic combination of the abovementioned elements, apart from turning the crisis into a geopolitical one, also diverted attention from the necessity to limit as much as possible the consequences of the global epidemic. Even when faced with an unprecedented modern health challenge, these negative political manifestations have either remained or intensified, which portrays a rather pessimistic image of the current state of international affairs in Europe.

In order to understand current international phenomena surrounding the COVID-19 inoculation process, the authors divide the article into three sections (apart from the introductory part and conclusion remarks). The first section is focused on theoretical considerations of various manifestations of soft and hard power which emerged during the pandemic in the EU context. The second part follows up through an analysis of the phenomena of "vaccine geopolitics" and "jab nationalism" in Central Europe. The third unit builds upon the previous sections by providing examples of the EU's diminished soft power in Central and Eastern Europe (CEE).

### **Theoretical approach: vaccine procurement and the EU's instruments of power**

According to Joseph Nye, the concept of power can generally be understood as the ability to conduct certain activities, exert influence, and navigate steps towards preferred outcomes (Nye 2011, 6). That notion is inseparable from the context of a specific activity (and its desired outcomes), from the stakeholders, as well as from the area where power is being projected (Nye 2011, 6-7). Hard power correlates with certain aspects of pressure or force, manifesting in international affairs through conditionality in security, economic, political and other areas, for example through sanctions, rewards, etc. (Gray 2011, V-VIII). Between the spheres of hard power and soft power stretches an entire spectrum of behavior within the

power dynamic, from those belonging to the “imperative” pole (coercion, threats, sanctions) to those on the co-optive side (embedding, persuading, attracting); Nye illustrates this gradation through a dichotomy of “pressuring” as opposed to “attracting” (Nye 2011, 20-21). The fundamental argument underlying soft power is that institutions have the ability to indirectly influence the functioning of other institutions, such as through cultural patterns, value systems, persuasion, or requests (Dowding 2012, 130). Hans Morgenthau (1962, 301-309) points out the complex nature of humanitarian aid, which might be interpreted by some as a particular sort of moral duty of the authorities of privileged nations towards the underprivileged ones. In addition, Greenough, Blume and Holmberg (2017, 7) argue that scientists from various disciplines have been correlating aspects like emerging diseases, international health and new manifestations of great-power interests, while recognizing that the global health area legitimizes the authority of multilateral initiatives and organizations. Having in mind the abovementioned, the authors intend to clarify that different COVID-19-related activities (such as the mass inoculation process during the first half of 2021) can also be interpreted through soft power aspects, with certain consequences that border on hard power effects, having in mind the specific context of the pandemic as a global challenge.

The European Union, as one of the most influential actors in the field of soft power, bases its logic on the respect of norms, institutions and acts, on persuasive acts and attraction rather than coercion, putting a specific focus on the procedures and the process, with expectations that these ultimately lead to the realization of some intended outcomes (Kagan 2004, 5-6). Having in mind the methods and instruments used, power in an EU context is frequently understood as normative power (Forsberg 2013, 27). However, under the pandemic circumstances, the spotlight of EU institutions on international negotiations, norms, diplomacy and multilateralism did not convey expected results during the initial stages of the mass inoculation process, which formally started in late December 2020. The EU’s entrenchment within its normative framework has again proven to be geostrategically inadequate, as it has been for some time now (Kovačević 2020, 219). Through the sophisticated advance purchase treaties, the European Commission previously negotiated deliveries of 1,3 billion jabs produced by the manufacturers BioNTech/Pfizer, Moderna, AstraZeneca and Johnson & Johnson, noticeably more than its overall population numbering less than 450 million people (EEAS 2021). However, despite what had been negotiated, it turned out that this sort of demand was very ambitious in terms of deadlines for deliveries. By the end of January, Spain had become the first EU country to temporarily stop vaccinations due to a lack of doses; similar events ensued across the European Union (Steviš-Gridneff and Pronczuk 2021). While the EU was faced with delayed shipments of

vaccines, its Western counterparts like the USA, UK and Israel continued inoculating their populations seemingly ordinary, causing the feeling of marginalization of the EU, to which the European Commissioner for Health Stella Kyriakides responded that “the logic of first-come first-served...may work at the butcher...but not in our advanced purchase agreements” (Steviš-Gridneff and Pronczuk 2021). However, despite the EU’s insistence to secure deliveries of the agreed doses, the actual effect of its soft power here was limited by the vaccine shortages in the vaccine manufacturers’ facilities, a result of their own miscalculations.

Apart from the abovementioned, and the complicating fact regarding the enormous global demands, certain nations like the USA did secure reliable vaccine deliveries early on; some experts attribute that to a proactive approach of the American Government which financed and aided the acceleration of the vaccine production all along, whereas the EU acted passively, as a customer which solely relied on the bureaucratic and legal aspect (Apuzzo, Gebrekidan and Pronczuk 2021). Under such circumstances, the EU attempted to regain its soft power influence by “pressuring” individual vaccine producers, which had a delayed and largely limited effect. By the end of March 2021 the EU had only inoculated 10% of its population with a single dose (compared to around 40% in the UK); that can also be attributed to the prolonged negotiations with the vaccine manufacturers, a selective and deliberative approach to approving some vaccines and administrative hurdles at the local level (Apuzzo, Gebrekidan and Pronczuk 2021). The conditionality principle, one of the EU’s basic instruments in the soft power domain, showed its limitations in this extraordinary crisis situation.

Whereas hard power manifests through direct attempts to influence through pressures, soft power materializes through gaining others’ trust for one’s own political or other logic, for example through cultural, medical or other channels of diplomacy (Lee 2021a, 2). The two types of power also diverge when it comes to their preferred resources. Hard power largely correlates with the use of physical or other force, as well as financial incentives or sanctions, whereas soft power primarily manifests in intangible aspects (values, institutions, cultural patterns), which doesn’t exclude a crossing of results (Nye 2011, 21). For instance, activities in the soft power sphere can result in some security-related consequences, and economic sanctions can produce an outcome in institutional or normative alterations. Interinstitutional cooperation in the area of humanitarian diplomacy can therefore primarily be considered within the soft power category, as an instrument through which countries intend to acquire greater influence. Countries like China and Russia use both bilateral and multilateral channels to improve their international positions, for example through regional initiatives such as the “Belt and Road” project (Stanojević 2020, 6-7; Zakić and Šekarić 2021, 7-38). Such



activities are consistent with some Chinese expert stances that the subjects of soft power could be both nations and entire regions (Suzuki 2010, 199-200).

During the past two years, humanitarian efforts have significantly focused on attempts to reduce the devastating consequences of the COVID-19 pandemic. Having in mind the sudden escalation and spread of this epidemiological risk, resources are required across the world. Vaccines can be considered as instruments of soft power, as they currently represent a very valuable resource in humanitarian and health sectors. Also, some international actors use the inoculation aspect in order to improve their reputation. However, having in mind the global scale of this comprehensive challenge, the authors also consider that the aspect of vaccine procurement and distribution has repercussions which are usually more associated with hard power, like the need to preserve as many lives as feasible. As mentioned earlier, hard power typically correlates with the notions of force or financial aspects; for example, nations are sometimes being conditioned to revise their behavior under economic, political or military coercion, or else be prepared to face grave consequences (Wilson 2008, 114-115). However, under the specific pandemic circumstances, where a dangerous virus constitutes an overall risk, hard power can manifest in various domains, not only in health, but also in economics, politics, etc. Symbolically speaking, vaccines against COVID-19 represent a “weapon” in the epidemiological battle that is being fought against humanity. All countries and regions are included in that struggle. By accumulating more doses, international actors aim to improve their public health perspectives, which would allow them to stabilize and focus on other issues and thus advance their transnational position. Vaccine procurement and the inoculation process have been exposed to hard power logic. That represents a continuation of the trend of weaponizing the soft power instruments, recorded during the previous years in domains of technology and trade by EU rivals like Russia and China, as part of their mutual rivalry (Laidi 2019, 2). In other words, attempts to obtain an advantage during the pandemic through greater access to health/humanitarian resources are also geo-strategically driven.

There is also an additional perspective: unlike soft power, which attempts to soften or shape behaviors towards the co-optive pole, hard power results in non-voluntary action; such coercive measures are not necessarily sustainable and might lead to further challenges (Gallarotti 2011, 29-31). An example of hard power pressuring by the EU was recorded during the 2021 vaccine dispute, during which the British side was pressured and coerced to compromise. Such a lack of international solidarity ensued as an intention of EU institutions to compensate for what the Bavarian PM Marcus Söder described as their delayed, selective and overly bureaucratic approach during the vaccine procurement negotiations, whereby the Union completely misinterpreted the essential meaning of the

situation (Lee 2021b). Namely, the dispute regarded the deliveries of the Oxford/AstraZeneca COVID-19 vaccines to the EU, whereby the European Commission considered that the British side unjustifiably halted and delayed the shipments in an attempt to accelerate the inoculation of UK citizens. As a response, EU institutions supported the temporary suspension of exporting the EU-produced-vaccines, which consequently manifested at the Irish-UK border. The crisis reached its climax when the European Commission temporarily paused the inoculation with the Oxford/AstraZeneca jabs due to allegations regarding their damaging health effects, as the process within the EU almost came to a halt (Hockley 2021). The political outcome of this winter dispute was such that the head of the European Commission, Ursula Von Den Leyen, declared that larger shipments of vaccines into the EU were secured (Hockley 2021). As for the legal outcome, the two sides formally ended their litigation before a court in Brussels in September 2021 (European Commission 2021a). Alleged concerns over health side-effects were used here as a tool in a political bargaining process, which negatively manifested on the credibility of the immunization strategy as such.

Moreover, these vaccine-nationalism-activities also widened the “empathy gap” and further complicated overall EU-UK relations, with potentially lasting consequences; Hockley (2021) even referred to it as the “Brexit vaccine war”, implying that some of the disagreements were also inherited. In this case, the EU influenced British institutions to alter their previously inadequate activities through instruments ranging from sanctioning (hard power domain) to persuasion and agreement regarding future shipments. Unfortunately, considering not only the bitter history surrounding the UK’s withdrawal from the EU, but also the ramifications of the vaccine dispute in the sector of public health, these disagreements might also lead to further confrontations. The quarrel perhaps marked the new low-point, as distrust between the two sides increased even further since the challenging Brexit process had ended. To make things worse, apart from the disrupted trust, the event also damaged the credibility of the inoculation process, as many citizens became apprehensive about the alleged side-effects which EU politicians and institutions had referred to (Smith 2021). The World Health Organization criticized (WHO) the EU’s vaccine export limitations, referring to them as a manifestation of “vaccine nationalism”, which would have damaging effects on the duration of the pandemic (Lee 2021).

Even though EU citizens’ expectations were initially not met, according to the World Bank, the European region has evolved into a privileged one by mid-summer 2021, ranking first globally when it comes to applied individual doses against COVID-19 (84 per 100 inhabitants), far ahead of Asia (54) and Africa (only 5) (World Bank 2021). These results have been achieved on the basis of intensified contacts

with the manufacturers, whereby the orders surpassed actual needs multifold, while numerous other world regions have been unable to secure deliveries as a consequence of excessive Western demand (World Bank 2021). Apart from the EU's pressures on manufacturers, there are allegations that its (postponed) global leadership was secured by virtue of inflated prices; according to the Global People's Vaccine Alliance, which advocates universal and equal access to the anti-COVID-19 jabs, the EU might have overpaid the delivered doses by an astounding 33 billion euros (Bray 2021). In case these vaccine nationalism claims turn out to be grounded, that non-ethical phenomena might also contain corruptive elements.

By disabling the export of medical equipment and vaccines outside the EU, the Union exhibited its own nationalist practice towards other countries and regions, including its close partners in the Western Balkans. Such appropriation and even hoarding of medical resources results in outcomes which resemble those in the hard power arena: damaging consequences for other regions' public health. Likewise, such activities also diverge from the Union's self-image as a normative power leader, its advocacy of liberal values and freedoms, justice, equality among people and so on (Müller 2021). Reflecting its own evolution as a peace project, the European Union rests on a specific set of principles and ideals in domains of power ethics (Kagan 2004, 11). However, in the pandemic crisis context, the EU institutions demonstrated faulty moral judgment and damaging practices.

### **“Vaccine geopolitics” in Central Europe**

Different power-related manifestations (ranging from coercion and pressuring to the attraction aspect) appear within the European Union's inoculation process against COVID-19. For instance, one EU member-state, Hungary, apart from the vaccines approved at the Union level, decided to also grant emergency use to the “eastern vaccines” (colloquially known and further referred to under the commercial names “Sinopharm” and “Sputnik V”). Such a course was in line with the European Commission's formal opinion that member-states were entitled to make such decisions on their own territories. As a consequence, before long, close to two million Hungarian citizens received these jabs (Vaski 2021). This occurred even though the vaccines were not formally approved by the European Medicines Agency (EMA), whereas the rest of the doses (produced by “western” manufacturers) were secured through the European Commission, which acted as a contact-point on behalf of its member states in that regard.

However, the actual recognition of the vaccination status of those inoculated with the “eastern jabs” during cross-border mobility has been challenged. The fact that Hungary is included in the Schengen area, which grants privileges of uninhibited mobility to citizens originating from their member-states, did not pose much value in the extraordinary pandemic context, when public health exceptions have been invoked across the EU, thus limiting cross-border mobility (De Bruycker 2021, 3). On one hand, the EU formally granted Hungarian citizens vaccinated with the “eastern doses” the right to have that status included in the cross-border digital certificate, as in the case of “western vaccines”. However, the Union institutions also formally backed their member-states to individually decide whether to actually grant international access to those vaccinated with Sinopharm or Sputnik V under the same conditions as to those who received, for example, Pfizer or Moderna doses. By delegating this matter to the member-states, EU bodies also avoided the possibility to be involved in indirectly recognizing the vaccines produced by its Chinese and Russian strategic rivals.

Hungarian authorities put an effort to overcome this challenge through bilateral agreements regarding the recognition of the vaccination status, mostly with the neighboring states; however, in other parts of the Union, citizens inoculated with the “eastern jabs” may be treated similarly to the unvaccinated ones (Vaski 2021). By permitting the possibility of sanctioning those EU citizens vaccinated with doses not endorsed by EMA, the Union’s institutions demonstrated hard power towards the Hungarian authorities’ decision to grant their use. The results are such that millions of Hungarian citizens are practically singled out compared to their compatriots vaccinated with the “western jabs”, or perhaps even discriminated against.

There are two motives why the European Union uses the instruments of soft and hard power towards its member-state Hungary in the mass inoculation pandemic context: the internal cause and the external argument.

From the internal perspective, it represents another instance of dispute between the supranational institutions and the Hungarian authorities, which are inclined towards sovereignty, bilateralism and inter-governmental cooperation. Hungarian institutions practised their right to decide independently, while other EU member states abstained from following suit. Whereas Slovakian PM Igor Matovič did initially try, he was pressured into resignation by the coalition partners and pro-EU groups due to non-transparent contracting of 200.000 Sputnik V doses. The inappropriateness of political pressure on Hungarian and Slovak authorities can be illustrated by the root cause of vaccine procurement: to limit the damaging effect on public health in those states. Namely, as of September 2021, Hungary and Slovakia were ranked first and fourth in terms of the incidence of COVID-19 deaths among thirty countries belonging to the European Economic Area (Conor

2021). These tragic indicators have motivated Hungarian and Slovakian authorities to seek additional solutions to counter the fatal effects of the disease. However, despite the extremely high COVID-19 death toll, these authorities were faced with political pressures to abandon such an approach. From the EU perspective, their intergovernmental behavior should have been more in line with the supranational approach towards fighting the pandemic, regardless of the fact that the situations in Hungary and Slovakia were more threatening in terms of the number of deceased persons than elsewhere in the EEA. Although the intergovernmental aspect prevailed in Hungary (which already applied millions of “eastern vaccines”), the fact that other member states suspended their decision until the final EMA stance points to the concealed supranational logic which has also been influenced by geopolitical considerations, rather than primarily health concerns.

This brings us to the external argument, the underlying background of geopolitical confrontation between the EU and Russia, in effect since the inception of the Ukrainian crisis (Petrović 2019). That dispute manifests in reduced political, economic, energy and other cooperation and alienation in numerous domains, as well as in mutual sanctioning in specifically targeted domains (Sanctions Map 2021). Embargo as a hard-power instrument is being used by both sides. Unfortunately, the downgraded relations also manifest in the pandemic context, for instance in limiting the freedom of movement of persons and also goods (including the medical equipment), non-recognition of vaccines against COVID-19, etc. Some consider that Russia has been using the pandemic crisis not solely to strengthen its impaired reputation in the EU, but also in order to attract political sympathies of certain member states and thus compromise the Union’s internal cohesion. Such opinions may be used to illustrate Russian intentions to extend its influence through the means of soft power, by persuading some member states to continue or extend cooperation bilaterally, regardless of the EU’s generally frigid stance towards Moscow.

For instance, the Italian campaign in spring 2020 named “From Russia, with love” is perceived by some analysts as an intention to highlight the EU’s political and other tardiness and incite Euro-skepticism among the founding member states (Togoh 2020). Such opinions generally reflect the deeply rooted lack of trust in relations between the EU and Russia, which continues even when faced with a global health threat. Namely, the lack of solidarity within the EU, which was demonstrated in the non-responding to appeals from Italy’s medical sector and state officials, considerably affected the Union’s reputation among European citizens. The lack of empathy during the early stage of the pandemic was so evident that the President of the European Commission subsequently issued an official apology to the Italian nation (Tidman 2020). Under such grim circumstances, the

Italian administration accepted Russian humanitarian aid, consisting of more than a hundred military doctors, personal protective equipment, disinfectants and respirators; while some estimated that 80% of the donated protective equipment was “unusable”, one NATO representative expressed his concern over the presence of Russian military staff in Italy (Giuffrida and Roth 2020). Such national security concerns, which correlate with the outbreak of COVID-19 in Europe, fall into a domain typically associated with hard power. That represents another instance of perceived weaponization of soft power (an example of Russian soft power being the humanitarian campaign). Nevertheless, Russian representatives responded to such allegations by saying that their engagement ensued at the request of the Italian government following the absence of reaction from EU member states (Giuffrida and Roth 2020). Be it as it may, in the absence of cooperation with the EU in the pandemic context, Russian soft power activities - such as those in area of humanitarian diplomacy – have been conducted bilaterally, with individual member states. The EU’s failure to counter these influences properly has made it appear passive and reactive rather than proactive.

The Hungarian-Russian bilateral cooperation in the process of vaccine procurement might also be illustrative. In early 2021, the two sides reached an agreement on delivery of a large quantity of Sputnik V jabs, thus bringing them to the market of an EU member state. This represented another example of sovereigntist decision-making in Hungary, whose leader Viktor Orbán is frequently portrayed as the EU’s *enfant terrible*, his Fidesz party being suspended from the European People’s Party over rule of law concerns and illiberal tendencies. However, despite the neo-conservative and isolationist trends in Hungary which counter and challenge common EU stances on migration, security and interpretation of values, the authors find it highly damaging to contaminate the global health emergency risk with political issues, including those regarding the EU’s international role. During the peak of the epidemiological crisis in February 2021, when stressing the urgent need for additional vaccines, PM Orbán stated that every day spent waiting for Brussels resulted in the loss of a hundred Hungarian lives (RFE/RL 2021). Accordingly, while considering and interpreting various international motives, one should bear in mind that the decisions of Hungarian authorities (regardless of their ideological and other peculiarities) were made in the context of an unprecedented state of health emergency in that country. Although the delivery and inoculation with Sputnik V jabs in Hungary was carried out without EMA backing, such a decision facilitated the efforts to limit the damaging consequences of COVID-19 on the medical wellbeing of Hungarians during the most fatal wave of the pandemic to that date.

During the first quarter of 2021, the EMA initiated the process of consideration of studies regarding the efficacy and safety of the Gam-Covid-Vac (commercially known as Sputnik V), which has still been ongoing as of the fourth quarter (EMA 2021). An earlier study published in one of the most prestigious medical journals - The Lancet – had positively evaluated both the safety and efficacy of that jab (Jones and Roy 2021, 642-643). It should also be noted that the WHO has been concluding its inspection visits to the Russian manufacturing facilities ahead of its own final decision on official approval for mass use (Nogrady, Bianca 2021, 339-340). Meanwhile, the vaccine has been approved for use in 70 countries, and its mass production has been announced or initiated in 14 countries, including Serbia (Sputnik V 2021). However, statements like those of the EU Commissioner Thierry Breton that the Union has “absolutely no need for Sputnik V” lead to the impression of geostrategic revanchism towards Russia (Nogrady, Bianca 2021, 339-340). Contrastingly, numerous other Central European member states, like Austria, Czechia and even some German federal states, expressed willingness to import or produce Sputnik V, albeit with a “disclaimer” that it first required an EMA approval (Bateson 2021).

Likewise, Hungarian authorities approved for emergency use another “eastern vaccine” as part of its mass inoculation process against COVID-19. The BIBP (Beijing Institute of Biological Products) vaccine, also referred to as “Sinopharm”, was approved in January 2021, backed by the positive experiences from neighboring Serbia, which previously began applying it. Namely, during the first months of 2021, Serbia recorded the second-fastest rate in terms of applied vaccines during the mass inoculation process in Europe, following a pragmatic approach towards procurement and approval of both “eastern” and “western”-produced jabs, which the authorities interpreted through an imperative to treat the vaccines as a health issue rather than a political one. In the case of Serbia, such individualistic course may be observed in the context of its neutral stances in certain aspects of international affairs, which is also present in some other Eastern European countries (Jović-Lazić, Kuvekalović-Stamatović 2020, 23-24). However, while Serbia, as a non-member-state, could not rely on direct supplies through the European Commission and was hence motivated to autonomously seek alternatives, Hungarian institutions opted to follow the Serbian example, dissatisfied with the remarkably slow and inefficient process of vaccine distribution on the supranational level. At that time, hospitals in that country marked tragic records regarding the numbers of COVID-19 patients, as well as deceased persons.

Apart from the danger to public health, Hungary’s decision can also be analyzed in the context of fruitful bilateral ties with Russia and China, which (as in the case of Serbia) represented a favorable platform for accelerating the negotiations and

shipments of the “eastern vaccines” during a very sensitive epidemiological period. As the first EU member state to join the “One Belt – One Road” initiative in the previous decade, and as a host to numerous Chinese projects, Hungarian authorities approached this process pragmatically in an attempt to improve the health crisis situation, with millions of Hungarians also receiving the “western” jabs (Orbán 2017). Meanwhile, the WHO called for wide recognition of the BIBP vaccine in order to curtail defragmentation and reduce pandemic-related gaps which are evident between different regions of the world (Cheng 2021). In addition, numerous member-states opted to bilaterally recognize the digital certificates of those inoculated with BIBP, including Croatia, Slovenia, Czechia and Austria (Schengenvisainfo 2021).

## **Overshadowed EU efforts in CEE**

Authors like Lee (2021a) interpret the Chinese “vaccine diplomacy” in a dualistic manner: as a continuation of efforts in domains like development aid and business ventures in underdeveloped regions since the 1990s, and also as an instrument to improve international reputation, which has been damaged since the escalation of COVID-19 in that very country. As regards classical humanitarian aid to the affected and less-developed regions, China already contracted over one billion vaccines, delivered over 390 million to roughly one-half of the international community (94 countries), and directly donated over 24 million vaccines (second after the USA which gave away close to 60 million, but significantly more than the EU which donated less than 8 million – a staggering 96% less than it initially planned to devote) (Deutsch and Furlong 2021). That represents a very convincing depiction of the inadequate role of the EU during the pandemic crisis, which is inconsistent with its regional leadership ambitions.

Apart from that, efforts have been made to improve the national image abroad. In pandemic-stricken Europe, China has been projecting its soft power via its eastern periphery. One of the platforms which facilitates such an approach is the comprehensive diplomatic project 17+1 (part of the “Belt and Road” initiative), which - with the sole exception of strategically-important Greece - assembles exclusively former socialist nations (Zweers, Shopov, Van der Putten, Petkova and Lemstra 2020, 7-9). Apart from the “new” member-states, the participation of Western Balkan (WB) candidates represents a favorable aspect for expanding cooperation with other EU(ropean) regions, for instance in connecting the Piraeus harbor (Chinese-owned) to Hungary, one of the primary partners in the EU (Zweers,



Shopov, Van der Putten, Petkova and Lemstra 2020, 7-9). China combines elements typical for cooperation with developing countries (infrastructural projects) and those envisaged within the 17+1 initiative, aiming to strengthen the connecting role of Western Balkans within its approach towards the EU (Zweers, Shopov, Van der Putten, Petkova and Lemstra 2020, 9-10). During the escalation of the pandemic, Chinese humanitarian assistance in the WB was greeted with great sympathies, following the sudden EU decision to suspend the export of urgent medical equipment. Large quantities of Chinese humanitarian aid were also delivered to EU member states like Estonia and Hungary, at a sensitive moment during the initial wave of COVID-19 in Europe, which was hailed by their authorities (Xinhua 2020). While the pandemic has turned numerous developed EU countries into users of humanitarian aid, contrastingly, actors like China and Russia have been using their large health and other resources to advance their impaired international reputation both multilaterally and bilaterally, largely in CEE.

A research conducted in 2021 by the European Council on Foreign Relations (ECFR) revealed that relative majority of Serbian examinees (38%) stated that their country could rely on China in the field of recuperating from the pandemic; Russia ranked second with 28%, whereas a mere 14% opted for the EU, despite Belgrade's EU membership talks taking place since 2014 (Hosa and Tcherneva 2021). Another poll also shows favorable trends for the application of soft power by non-western actors in Serbia: over 90% of respondents consider Russia and China as allies and partners, compared to 68% in the case of the European Union (out of which only 11% consider the EU an "ally", and a further 57% solely a "partner") (Hosa and Tcherneva 2021). These results show that the attractiveness of the EU as a strategic partner (and consequently also its soft power potential) in the pandemic context is being challenged by other international actors like China and Russia in Serbia, but perhaps also in broader terms. For instance, another ECFR study shows that around one half of Bulgarian and Hungarian respondents would choose the Sputnik V jab, which is beneficial for Russia's image in Europe (Dennison and Puglierin 2021, 11). Indeed, regardless of the fact that both China and Russia recorded a slight drop on the 2021 soft power ranking list, both countries scored significantly better compared to 2020 in the "education and science" domain, partially also due to the development of their own anti-COVID-19 vaccines and their subsequent export globally (Brand Finance 2021, 33-34; 112-113; Brand Finance 2020, 108-109).

## Conclusion

Results of this research are consistent with Joseph Nye's perception that the application of soft power instruments might also lead to effects in the hard power spectrum (Nye 2011, 21). This study considered different manifestations of hard power and soft power aspects, focusing on the first half of 2021, when the mass inoculation process was initiated in Europe. The authors conclude that the EU has been using the elements of soft and hard power to retain its privileged international status, during which time it was faced with both internal and external challenges. Despite its normative hegemony which manifests its ability to influence and shape the activities and processes in other regions (for instance WB), the EU hasn't lived up to the expectations of neither its partners nor its own member states. The lack of solidarity and cohesion that were recorded during the escalation of the pandemic also stretched into the mass inoculation process, which was plagued by negative phenomena like "vaccine nationalism" and geopolitical bidding. Faced with such occurrences, the EU institutions attempted to demonstrate their ability to conduct the mass inoculation process as swiftly and as advanced as possible. However, such an approach has led to the marginalization and lack of compassion towards its partners (like those in the WB), but also some member states like Hungary, which opted to approve the non-western vaccines during the most fatal wave of COVID-19 in winter 2021. Although the Sinopharm jab has been approved by the WHO and has been used in tens of countries, the EU decision to delegate the matter of recognition of the vaccination status to member states enabled the possibility of direct sanctioning of tens of thousands of Hungarians. Other instances of the EU's vaccine nationalism include those recorded during the damaging jab dispute with the UK.

The European Commission, which has been self-labeled as geopolitical, has been using the mass inoculation aspect to counter foreign influences within the EU, like those of its strategic rivals in China, Russia and even the UK. Apart from the coercing, sanctioning and persuading activities within the EU's hard-line approach towards the British side, other unfavorable situations in the domain of power asymmetry also occurred during the observed period. According to the WHO, close to 90% of all vaccines during the first half of 2021 have been allocated to the most developed countries, whereas less than 1% of the population of sub-Saharan Africa has been inoculated, which has been colloquially referred to as "vaccine apartheid", as a specific consequence of the nationalistic and geostrategic tendencies plaguing the inoculation process (Nazareth, Shawoo and Lager 2021). The "hoarding" of vast amounts of vaccines in the storages of economically developed countries and regions, including Europe, as a specific form of "me-first

nationalism”, represents a non-empathetic and damaging phenomenon, as it deprives other nations of access to the vaccines and other resources (Allen 2021, 204). Whereas as of fall 2021 the inoculation process has not even begun in many regions, some western countries have contracted vaccines in an amount which surpasses their population by up to five times. Such manifestations of jab nationalism - which also originate in Europe - are internationally inconsiderate and damaging to the perspective of extinguishing the pandemic.

The governments of numerous member states found themselves in a precarious position due to the lack of vaccines during the initial stage of the mass inoculation process in Europe. Their concerns were directed towards attempts to preserve as many lives as possible, which can be compared to situations when there is a threat related to the use of force (hard-power-consequences perception). During the first quarter of 2021, when Czechia was faced with thousands of COVID-19-related-casualties per month, its president Miloš Zeman stated that he had asked the Russian president Vladimir Putin for urgent delivery of Sputnik-V doses, which was overruled by the Czech government. Similar gaps between governmental and opposition parties, which were using the pandemic situations to discredit the response of authorities, were evident throughout the continent, regardless of the ideological orientation. Assigning the primary blame to politicians, especially when it comes to fatalities, has been recorded not only in Europe, but elsewhere as well (Aparicio and Grossbard 2021, 308). Having that in mind, pro-EU decisions of certain Central European governments which were faced with political opposition (as in Czechia and Slovakia) should be interpreted in a context of attempts to preserve their own legitimacy in the wake of the crisis. Although informally interested in ordering the Russian anti-COVID-19 vaccines, these governments later discarded such a possibility, as a result of political pressures aimed at securing a common EU approach in domain of mass inoculation process. Eventually Hungary remained a sole exception in that regard. Although the attempts to establish a common vaccination platform may represent a favorable aspect in terms of EU's internal cohesion, on the other hand, it also limits the access to vaccines to those citizens which are primarily or solely interested in non-western jabs, which by itself hampers the recovery from the pandemic “from below”. Apart from selective access to the vaccines, which is limited to western-produced jabs, the EU also indirectly supported the possibility of sanctioning the cross-border mobility of Hungarian citizens who opted to vaccinate with the doses unapproved by the European Medicines Agency.

Through its soft power instruments – its institutions, norms and processes – the EU not only aims to shape and “attract” its member states towards its own perception of the vaccination logic, but also supports the sanctioning of those who

diverge from the EMA opinion. The resignation of Slovakia's Prime Minister as a result of Sputnik-V dose orders served as a political wake-up call for those who chose to follow the Hungarian example, and was interpreted as an EU strategic victory (Higgins 2021). Through such an approach, the EU institutions convey a political message that the supranational EMA should prevail over national medicine bodies. Instead of focusing on curtailing the crisis which has already resulted in over one million deaths in Europe alone, the EU contaminates public health measures with geopolitics, attempting to retain power and counter its strategic rivals. Even the most influential multidisciplinary journal "Nature" refers to a potential bias towards the "Pfizer" conglomerate that has been manufacturing vaccines in partnership with the German company BioNTech, which may also have a certain influence on the prolonged approval of the Russian-produced "Sputnik V" (Nogrady 2021, 339-340). Formally, the lengthy process is argued by concerns regarding the side-effects oversight by that manufacturer (Nogrady 2021, 339-340). Regardless, it is discouraging that the decision-making process of competent European institutions in the public health domain is being influenced by the deteriorating relations with strategic rivals like Russia and China, especially having in mind the extraordinary epidemiological conditions which continue to take their fatal toll. Whereas the EU has been avoiding to upgrade cooperation with these actors, Russia and China have meanwhile agreed to extend their previously-existing strategic partnership agreement, which will also benefit their efforts to curtail the consequences of the pandemic (Lađevac 2015, 243; Reuters 2021b).

Whereas the US, China and Russia have been recognized as leaders in domains of science, education and humanitarian diplomacy, contrastingly, the EU has conducted its pandemic-related international activities in a belated and geopolitically-motivated manner, which negatively affected both its reputation and the cross-border health efforts. Several ECFR polls demonstrate an increased affinity of certain CEE countries towards Russia and China, which acted proactively and dynamically in the pandemic context, allowing them to exert greater (soft) influence in some regions in the time to come. The mass inoculation process constituted a part of the humanitarian diplomacy and soft power of all mentioned actors, although their results, which also manifested in phenomena like nationalism and vaccine geopolitics, might also yield hard power consequences, reflecting negatively on the preservation of lives. The mass inoculation process against COVID-19 is currently perceived by the WHO as the only possible option in attempts to curtail that global health risk. The Von Den Leyen "geopolitical European Commission" was faced with the pandemic crisis at a particularly unfavorable strategic moment, marked by the discord with Russia, systemic antagonisms with

China, having just concluded the debilitating process of Brexit with the United Kingdom. This entanglement of animosities complicated during the COVID-19 global epidemic, especially during the mass vaccination process, which eclipsed the health concerns and assumed geopolitical attributes. That sort of international behavior paints a gloomy picture of the prospects of closer international cooperation in combating the pandemic as a major European and global challenge.

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Miloš PETROVIĆ, Zlatan JEREMIĆ

**ŠTETNE POSLEDICE GEOPOLITIKE VAKCINA I POREMEĆENA MEKA  
MOĆ EVROPSKE UNIJE**

**Apstrakt:** Autori nastoji da pokaže da je predvodnička uloga Evropske unije u domenu meke moći bila neadekvatna i ispod očekivanja tokom pojedinih perioda pandemije, čemu su dodatno doprinele proaktivne kampanje drugih međunarodnih aktera u Evropi. Prema mišljenju autora, takvi nepovoljni rezultati mogu se prvenstveno povezati sa štetnom činjenicom da Unija percipira i tretira aspekte poput procesa masovne vakcinacije ne samo kao zdravstveno-humanitarno pitanje, već i kao geopolitičku aktivnost. Autori smatraju da je logika Evropske unije velikim delom oblikovana ranijim geopolitičkim neslaganjima spram Kine i Rusije, a posledično i njihovim angažmanom u Evropi u kontekstu pandemije. Pored toga, pogoršani odnosi sa Ujedinjenim Kraljevstvom dodatno su doprineli nepovoljnom međunarodnom okruženju. U radu se prepoznaje da su spomenuti međunarodni akteri koristili različite instrumente meke moći tokom procesa masovne vakcinacije stanovništva protiv KoVida-19 u Evropi, što je ishodovalo i posledicama koje uobičajeno spadaju u domen tvrde moći. Rivalstvo između gorespomenutih aktera ispoljava se u vidu nepovoljnih fenomena poput „vakcinalnog nacionalizma“ i „geopolitike cepiva“. Autori polemišu da bi za domen javnog zdravlja i narušenu reputaciju Unije u pojedinim delovima Srednje i Istočne Evrope bilo povoljnije da je tom domenu pristupljeno manje isključivo i selektivno, odnosno da je pokazano više fleksibilnosti i pragmatizma.

**Ključne reči:** nacionalizam vakcina, EU, vakcinacija, KOVID-19, izazov, moć, Rusija, Kina, reputacija, Srednja i Istočna Evropa.