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Virtual Mobility Pathways: Medical Cooperation and Science Diplomacy during Pandemics

Introduction

In 2020 and 2021, around 4 billion people, or half the world's population, have been asked by their governments to stay home to prevent the spread of the deadly COVID-19 virus.¹ As we all know, this physical immobility has increased virtual connections and enhanced collaboration in the sciences, particularly in the medical ones. The pan-

demic has indeed revealed the value of networks in dealing with crises.² For the purpose of this issue of Voices of Mexico, these multiplying networks could be referred to as the "web" of international medical cooperation, visible in topics of common interest such as vaccine diplomacy.

In general, the history of world pandemics has shown paradoxical effects, with privileged actors and positive learning processes that come out of terrible circumstances, contrasting with the number of dead, sick, and unemployed. The great lockdown of 2020 and 2021 has also exacerbated existing inequalities on both national and international levels. It has led to increasingly precarious conditions for manual workers and to the dangerous exposure of already vulnerable minorities, such as poor people, migrants,³ and women.

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While it doesn't ignore this situation, our article tries to point to the opportunities, political changes and lessons derived from the pandemic. No wonder: most of the scientific literature quoted in this piece was written in 2020, a year of thriving scientific discoveries.

Physical immobility has intensified virtual cooperation on a global level, making use of digital technologies in certain scientific, technological, engineering, and mathematics (STEM) occupations. Above all, medicine has become more intertwined, internationalized, and globalized. A previous article in Voices of Mexico described medicine as one of the most internationalized professions.⁴ The pandemic has reinforced this through the exchange of medical knowledge, worldwide validation of vaccines, and telemedicine, among other means. It has caused a boom in telehealth, in which information technologies are used in providing health consults from a distance.⁵ This was a good way to minimize the spread of the virus, provide healthcare in developing countries, effectively utilize healthcare professionals' time, and alleviate mental health issues, according to Muhammad Abdul Kadir.⁶

This article deals with the upsurge of science diplomacy in international negotiations, its metamorphosis into vaccine diplomacy and, in general, its applications for the evolution of diplomacy as a complex system. The discussion is structured as follows: *a*) immobility: a gateway to virtual cooperation during the pandemic; *b*) the virtues of science diplomacy; and, *c*) vaccine diplomacy: evidence from Mexico.

Immobility: A Gateway to Virtual Cooperation during the Pandemic

The "stay-at-home" strategy has been analyzed by some authors as a device for controlling the population, in which the social dimension of isolated people is denied.⁷ Following this logic, social interactions are perceived as possible dangers and people live in fear. Rodrigo Bulamah also speaks of the "times and metaphors" of pandemics as the "end of autonomy to move and get things going."⁸

However, if we take a step back in time, we recall that most people in the world do not travel much and tend to live in their place of origin. A work by Schewel invites us to look at the "stayers,"⁹ people who remain in their birthplaces or within the borders of the countries where they The great lockdown of 2020 and 2021 has also exacerbated existing inequalities and led to the dangerous exposure of already vulnerable minorities, such as poor people, migrants, and women.

were born. Studying immobility today has indeed become more relevant as a self-reflection exercise during the pandemic. What have we done with our immobility? Just reinforcing the fact that most human beings are social, many of us have acquired a virtual life.

Schewel defines immobility as a spatial continuity in an individual's center of gravity over a period of time.¹⁰ His study teaches us to distinguish between planned immobility –the desire to stay– and imposed immobility –when people who want to move are forced to stay. In his view, some of the positive aspects of immobility are stimulating the local economy and creating community life.¹¹ During the pandemic, Schewel's observation may be adapted to "family life" as a social micro-environment where people can interact with each other, apart from the virtual sphere.

On the Virtues of Science Diplomacy

Underlying our research is the idea that immobility during the pandemic has changed diplomatic relations, science diplomacy, and medical cooperation. Previous literature on science diplomacy has pointed to its endless possibilities as a cross-cultural way of developing relations where politics fail. Griset describes how science diplomacy is often seen as a diplomatic channel for maintaining relations in times of tension.¹² It can also be seen as a factor of peace that brings people closer together. This vision, says Griset, is connected to the ideal of "pure" science, elevated above the contingencies of the world, and it has long since been deconstructed to implement a more realistic vision of what science and scientists must be as the foundations of society.

Another work, by Olga Krasnyak, positions science diplomacy at the intersection of three fields.¹³ First, there is diplomacy for science that serves the interests of international research institutions from multiple countries.

Second, science diplomacy addresses concerns about global issues and assists in bilateral and multilateral relations. Third, science for diplomacy or science diplomacy refers to the power of science to build bridges between nations when political relationships are strained or limited.

The medical diplomacy of the COVID-19 pandemic is a type of science in diplomatic cooperation, with the World Health Organization (WHO) and national scientific bodies at the core of the global fight against the virus. As opposed to the questions raised about multilateral diplomacy, especially the performance of the WHO, non-official or alternative diplomacy networks have reemerged and increased during COVID-19, opening up new cooperation possibilities at a local level. Science diplomacy was also used to tackle the disinformation crisis and conspiracy theories that accompany the pandemic,¹⁴ polarizing and spreading racism and distrust:

From a communication perspective, this had two important consequences. First, it meant that the health messages that authorities were trying to convey to the public became increasingly contested. Second, it made it difficult for public authorities to debunk and challenge the premises of the conspiracies without risking to further amplify their message. Conspiracy theories are embraced by the public not for their factual value but for their ability to provide a (false) sense of reassurance in times of great uncertainty. Fact-based debunking thus risks elevating their visibility without necessarily undermining their appeal.¹⁵

Scientific evidence was also used to argue against the numerous speculations about the origin of the coronavirus and its being a biological weapon. Therefore, the pandemic has raised the profile of global health issues and increased discussions about the international mechanisms for regulating biological security, as Baklitskiy and Shakirov show.¹⁶

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Vaccine Diplomacy: Evidence from Mexico

Innovation diplomacy emerged as a related concept to science diplomacy and a cardinal value of modern society, being used as a means of soft power, the promotion of trade, and a way to build "the alliances necessary to transcend antagonisms or cultural differences to deal globally with issues such as the environment, health, or migration."¹⁷ Vaccine diplomacy is an application of this broader concept of innovation diplomacy.

The pandemic in Mexico has also increased medical cooperation and emphasized the role of telemedicine. In autumn 2020, with most vaccines in the third phase of trials, the country has (re)discovered international medical cooperation as a way out of the crisis. Besides the agreements and scientific assessment needed to import the vaccine, there were talks of trilateral cooperation among Mexico, Argentina, and the United Kingdom. More specifically, official messages announced that the Liomont (Mexico) and mAbxience (Argentina) laboratories were in a position to produce the vaccine to generate self-sufficiency in their countries, applying technology from Astra Zeneca and the University of Oxford.¹⁸ This is a hybrid type of cooperation involving at least three countries, public universities, and private actors in a complex approach to solve a humanitarian crisis of this type.

Other messages by Mexico's Ministry of Foreign Affairs highlighted several international cooperation efforts to combat the COVID-19 pandemic. An official document offers details on some joint programs that indirectly reaffirm the hypothesis of the importance of science in diplomacy:

With Russia, based on the exchange of technical information between health authorities and Mexico's offer to participate with 1 000 people in phase III clinical trials. With Italy, through the Lazzaro Spallanzani National Institute of Infectious Diseases to participate in clinical studies of the GRAd-cov2 vaccine.

Also, a German government mission of experts was carried out to exchange experiences and knowledge about the pandemic, in addition to the donation of 100 000 PCR tests to our country. The Republic of Korea donated six PCR test kits and approximately 48 000 ready-to-use tests. A dialogue was held with the minister of foreign affairs of Norway, Eriksen Søreide, on Science diplomacy was also used to tackle the disinformation crisis and conspiracy theories that accompany the pandemic, polarizing and spreading racism and distrust.

the Coalition for Epidemic Preparedness Innovations (CEPI) and common proposals in the United Nations. $^{\rm 19}$

It is not the purpose of this article to evaluate the efficiency of such networks and cooperation. However, we do want to emphasize the way that science –be it corporate or public– has been re-considered and re-situated as part of the basis of international cooperation for solving a complex humanitarian emergency like COVID-19. Only these types of hybrid cooperation can work in the real worldwide web of globalization.

To conclude, we should recall an article inspired by the pandemic written by Javier Solana,²⁰ a former secretary of NATO, in which he proposes the approach of "human diplomacy" to solve this and other ongoing crises such as climate change and food scarcity. Building on the history of diplomacy, which first centered on feudal lords (Middle Ages), then on empires (nineteenth century), and more recently on states and corporations (twentieth century), Solana thinks twenty-first century diplomacy should center on human beings. This should be done by involving local authorities and civil society and by acting regionally rather than globally on specific matters such as migration. According to Solana,

increasingly global, science-based, depoliticized international organizations should exist for the provision of global public goods and to prevent beggar-thyneighbor policies, which are present even amidst the current pandemic in the form of "vaccine nationalism." We need to make sure that channels for constructive diplomatic dialogue never cease to exist, and that multilateral organizations and fora are hefty, effective, and legitimate enough to offer adequate responses to global problems.²¹

Some studies have considered Solana a congregatortype leader,²² prone to solve differences and come up with creative solutions in diplomacy. Focusing diplomacy on human beings appears to be a crucial point for global and regional cooperation agendas in order to prevent future humanitarian crises. The use of science-based decisions for a more human diplomacy seems a rational approach for contributing to a brighter global future.

• Notes

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