

Still a Pragmatic Tool to Address Specific Problems? South American Regionalism and the Response to COVID-19

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Abstract: Regionalism in South America was once described to the author by a senior Brazilian Diplomat as a ‘pragmatic tool to address specific problems’. Yet, in response to the COVID-19 pandemic in South America – the worst-hit region in the world – regionalism has been conspicuous by its absence as such a tool, despite the fact that international organizations and other actors have pointed to the urgent need for regional cooperation on the subject. What explains this lack of regional cooperation? Utilizing the conceptual frameworks of Complexity and Human Systems Dynamics, this article argues that regionalism in South America actually suffers from a lack of coherence. As such, some suggestions will be made throughout the article as to how to address this incoherence in response to COVID-19 and, as such, be able to address some of the specific challenges brought about by the pandemic. It is argued that the policy-focus should be very narrow, and that the focus should be on the economic impact and vaccines. Furthermore, the article suggests that regional cooperation should happen below the level of national governments. Some suggestions are made as to how this can be achieved. It is shown throughout the article that such narrow, and often sub-national focus can restore some coherence, which will allow for a more effective regional response to the worst pandemic experienced in 100 years.

Key words: COVID-19; South America; regionalism; complexity; Human System Dynamics (HSD).

Introduction

During an interview for a research project in 2013 a senior Brazilian diplomat, at the time responsible for the coordination of regional initiatives in the Brazilian Foreign Ministry, described South American regionalism as a ‘pragmatic tool to address specific problems’ (Interview Senior Brazilian Diplomat, Brasilia, 2013).

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Yet, the regional response to the COVID-19 pandemic has been sporadic, at the very best, and there has been no new impulse towards regional cooperation – not to mention integration – in South America, despite the fact that not only has every country in the region faced the same and severe problem, in addition to the fact that the region as a whole has been one of the worst affected by the pandemic in the world (WHO 2021), be it in terms of the number of cases, or of deaths. This is conspicuous even though public health used to be one of the areas in which regional cooperation was considered as the most advanced.

With this in mind, the present paper will seek to answer three interrelated questions, namely: What explains the lack of regional cooperation in response to COVID-19 in Latin America? What does this lack of cooperation *mean*, in practical terms for the response to COVID-19? What can be done to reanimate pragmatic regional cooperation in South America to overcome the severe public health, social and economic crises brought about by COVID-19?

Utilizing the conceptual framework of Human Systems Dynamics (HSD), as developed by Eoyang and Holladay (2013), it will be argued that South American regionalism has fallen back into an old pattern of intra-regional fragmentation spurred by internal political instability and ideological chasms which current political leaders are unable and unwilling to overcome, despite the evident failures of the responses offered at the national level.

The article will make some tentative suggestions as to how to begin to address these chasms and return the region to a place of pragmatic cooperation in the face of a crisis which threatens to severely damage the social fabric of the region, already strained by years of economic and political crisis.

Context: the explosion of COVID-19 in South America and national responses

South America was one of the last world regions to be hit by the COVID-19 pandemic. However, when the pandemic arrived, it hit it hard, making it the worst-affected region in the world in terms of cases and deaths (Enriquez, Cabal and Centeno 2020).

In response, South American states have invested heavily in trying to mitigate its impact, be it in terms of the impact on public health, the economy or the social fabric, and cohesion as a whole. It would be beyond the scope of the present paper to go into details about all that has been done so far (see, for instance, OECD 2020), but it is worth looking at some initiatives which can help us determine some generalizable trends and identify possible actions.

At a national level, most, albeit not all, South American governments reacted ‘swiftly and pre-emptively to protect their citizens and contain the spread of COVID-19 in the region and its impact on the economy’ (OECD 2020: 1). Most governments imposed mask and social distancing mandates. Apart from that, many of them moved to increase their capacity within national health systems, for instance by – often considerably – increasing

the number of ICU beds. As an example, in April 2020, Colombia increased its ICU bed capacity by 300%. Other governments launched rapid test and trace systems, such as in Chile, built field hospitals or launched recruitment drives for additional health care personnel (OECD 2020; UNDP 2021).

With stay-at-home orders also being implemented, economic- and financial support was essential in a region in which tens of millions of people work informally and therefore have no social protection against a sudden loss of income (ILO 2021). Most countries in the region provided such support, albeit to varying degrees. For instance, in Brazil the government provided a monthly payment of BR\$600 to informal workers and those who lost or could not exercise their jobs due to stay-at-home orders, which was later reduced to BR\$300 (Globo 2020). Similar programs were created in most South American countries (IDB 2020), though values, length of support, and eligibility varied (for an overview, see UNDP 2021). Furthermore, borders were closed and travel was generally restricted (Reliefweb 2021).

While focusing many of their actions on the low paid and informal workers, governments implicitly recognized the structural problems inherent to the region, above all deep economic inequality, which makes Latin America the most unequal region in the world in terms of the distribution of wealth, which only worsened further during, and in consequence of, the pandemic (United Nations/CEPAL 2021). These inequalities were shown up glaringly during the pandemic, which has made tackling it even more difficult.

In a practical sense, one of the most evident difficulties was the actual task of bringing the cash benefits promised by governments to those in need. Many, if not most, of the people working informally (which, in Peru, to give just one example, accounts for 70% of the working age population (IOL 2021)) in Latin America do not have bank accounts. As such, cash benefits were handed out in person, causing super-spreader events amongst the poorer segments of the population which, in turn, disseminated the virus in the slums of the region (G1 2021).

Those infected subsequently had to make use of public health systems, which soon buckled under the pressure and, in some cases – such as in some areas of Ecuador – de facto collapsed (France 24 2021). Meanwhile, the respective country's elites had access to private, and better, healthcare, leading to a vast disparity in the way the virus impacted groups across the social, as well as racial, divide (United Nations 2020), though these disparities severely varied from country to country.

There were also significant differences between governments in South America in terms of how seriously COVID-19 was taken and the priorities set in responding to it. Most (in)famously, Brazil's President Jair Bolsonaro, for a long time, played down the severity of the virus, describing it as 'a little flu', even as death rates in Brazil surged, making the outbreak in the country one of the deadliest in the world (Soares 2021). Bolsonaro justified his posture by pointing to the economic damage done by enforcing lock-downs, arguing that the risk to life by catching the virus do not outweigh the economic risks of a lock-down (DiCunto and Murakawa 2020).

In spite of these efforts, the region was soon the global epicenter of the COVID-19 outbreak. As such, analysts and international organizations urged regional cooperation in order to address these issues in the quickest possible way. Yet, this never happened in any meaningful sense, as detailed by authors such as Esteves (2020) or Azevedo (2021). When cooperation was observed, it was sporadic and in ad-hoc actions (OPAS 2021a). The main question is, thus, what stopped such cooperation in its tracks. As will be shown below, a combination of structural and particular factors led to, and also sustained, an almost complete standstill in regional cooperation, even as it represented a very specific and urgent problem which desperately required as many tools as possible in order to confront it, including regional cooperation.

The lack of regional response to COVID-19: a cocktail of specific and strategic factors

In terms of the *specific* conditions, commentators have identified various such conditions in order to explain this lack of cooperation. Firstly, the pandemic hit at a time of enormous political polarization in South America. At the time, UNASUL had collapsed, as part of a broader trend of disintegrating regional cooperation (Nolte and Weiffen 2020). There was virtually no political cooperation between Brazil – led by Far-Right President Jair Bolsonaro – and Argentina, the region's two most important countries, rendering any chance of a broader regional response almost impossible, especially since the two countries took quite contrasting political approaches to the arrival of the pandemic in the region. Whereas, as briefly outlined above, Brazil's President took on a negationist position, Argentina adopted strict measures of social distancing early on, to name but one example (UNDP 2021). From the very start onwards, then, there were virtually unbridgeable divisions between the regions' two most important countries.

Also important to note in this respect was the fact that both between and within countries, the pandemic had a variable impact, in terms of both infections and deaths. In some cases, such as Colombia or Ecuador, the impact was devastatingly quick, albeit quite localized, leading to the collapse of some essential services, such as health and funerals (Cabrera and Kurmanaev 2020). This being the case, it led to quite different national, and indeed local, public policy responses. In some countries, lock-downs were quickly imposed, with Uruguay and Paraguay being widely praised for their initial response to the pandemic (Goñi and Costa 2020). In other countries, as in Brazil, there were significant local variations. Linked to these differences, one could witness often intense disputes between national- and sub-national governments about what the 'right' policy to adopt should be, as well as who had the responsibility to act. In the case of Brazil, for instance, disputes about policies and actions between, in particular, the Federal government and some state governments rose to a level in which they were to be solved in Supreme Court (Pompeu and Carneiro 2020).

With disagreements on these health policies and many other issues, a coordinated regional response from South American countries on the subject would already have been

hard to achieve. Yet, these particularities occurred within a context of, still, unresolved strategic issues which have plagued South American regionalism for many decades.

Regionalism – understood as a concept whereby ‘state and non-state actors cooperate and coordinate strategy within a given region’ (Fawcett 2005: 24) – has a long history in Latin America but has always been full of controversies around three questions. The first of these questions was the *form* regionalism should take and what purpose it should serve, particularly in relation to the United States. Whilst, for instance, South American countries mainly pursued a strategy of ‘closed’ regionalism in terms of economic development – for instance through import substitution (Cheibub *et al.* 2011) – there were profound political disagreements with regards to the Cold War and the relationship of Latin American countries with the United States. For some of its Southern neighbors, regionalism was an instrument to shield Latin America from the influence of the US, seeing it as one way of rescuing or recovering some of its own autonomy. For others, regionalism was a way of ensuring American influence, anchoring the participant countries to the American block and enjoying security in return. Often, these competing visions led to severe tension both between and within South American countries (Lehmann 2017a).

Disagreement about this question played into debates about a second key tension amongst South American government over time, regarding, mainly, their conception of sovereignty and what this meant for any notion of regional cooperation. There has been a long-standing perception that regional cooperation should not, in any way, impede the sovereignty of the individual states, least it be perceived as an interference in internal affairs, a trend which intensified with the onset of the economic crisis in 2009. As summarized by Malamud (2012), ‘sovereignty is back, integration out.’ Critically, for most of the time, this has meant that South American countries solve their own problems, until and unless there is a specific request for regional assistance. Regionalism was a tool precisely to *protect* sovereignty (Lehmann 2017b). Thus, it has acquired a *negative* connotation, as something to be done to protect oneself *against* someone else.

This factor has gained in importance during recent years as a result of persistent political and social instability within the countries of the region. Crucially, this applies not only to countries with a recent history of such instability – such as Venezuela or Brasil – but also to countries that until recently were seen as relatively stable in a macro-political sense, such as Chile, where protests have led to the convocation of a constituent assembly to write a new constitution (Sánchez-Anochea 2021). Taken together, it is not hard to see why regionalism in South America is used a pragmatic tool to address specific problems, and not a *process* of integration instead.

Yet, in response to the current pandemic – which is clearly a problem impacting the entire region and which requires a response from every country – this tool has been noticeable only by its absence. This is observed despite the fact that there has been a chorus of voices, both in the political and the academic sphere, urging countries to work together since, in the words of the United Nations, when it comes to COVID-19 ‘no one is safe until everyone is safe’, and pointing out the wide differences in policies and outcomes with

regards to COVID-19 in South America have a detrimental impact on the possibility of the region returning to 'normal' any time soon (UNHCR 2021).

In what follows, it will be argued that the failure to cooperate on what is a serious problem requiring a pragmatic and quick response can best be understood as a Complex Adaptive System requiring 'Adaptive Action.' As will be shown, the aim is to address the *incoherence* currently characterizing South American regional cooperation by specifically addressing those conditions which sustain this incoherence across time and space. Some suggestions will be made as to how cooperation can be achieved.

The regional response to COVID-19 as a Complex Adaptive System

What the brief review above of the response to COVID-19 in South America shows is that it was, in many ways, quite chaotic. This may be unsurprising when one keeps in mind that the COVID-19 virus was literally unprecedented and definitely a new case. It was also all-encompassing, having an impact on public health, the economy, employment and every other aspect of every-day life (WHO 2021).

Therefore, it should not come as a surprise that policy-responses to an unprecedented crisis should be, at least to some extent, chaotic. It is also, in historical terms, not unusual that the response to such crises should be, above all, national (Lehmann 2011). Yet, the tragic fact is that, in South America, national policy responses have, on the whole, been a failure. The region has had the worst death rates in the world relative to population and has been one of the worst hit by COVID effects in terms of the economy (UN/CEPAL 2021). As a result, poverty and food insecurity have increased, reversing years of progress in the region (Moreno 2021). This, in turn, has exacerbated social and political tensions, be it in Chile, in Colombia or in Bolivia, to name but three examples. The pandemic has also exposed crisis response systems which are ineffective and inflexible, unable to adapt to rapidly changing, and unprecedented, situations. At a regional level, such systems have been shown to be essentially in-existent, *despite* the fact that South America usually has a good track record when it comes to responding regionally to health emergencies, particularly through the UNASUL Health Council (Herrero and Tussie 2019).

What needs to occur for the multiple problems exposed to be properly addressed, then, is two-fold. On the one hand, a new way of defining and addressing such complex problems as those thrown up by COVID-19 should emerge. On the other, there needs to be action to allow for regional cooperation in response to such complex crisis, since national responses have shown themselves to be inadequate. Clearly, as described above, the COVID-19 pandemic is an issue with the following characteristics:

- The presence within the system of a large number of elements;
- The interaction of these elements in a rich manner – that is, with any element in the system influenced by, and influencing, a large number of other elements;
- Interactions that are frequently non-linear;
- Feedback loops in the interaction;
- The openness of the system and its elements to their environment;

- The operation of the system in a state far from equilibrium;
- The existence of a system history;
- Elements of the system are ignorant of the behaviour of the system as a whole (adapted from Geyer and Rihani 2010).

Eoyang (2010: 466) has defined such systems as complex adaptive, 'a collection of semi-autonomous agents with the freedom to act in unpredictable ways and whose interactions over time and space generate system-wide patterns.' In such systems, the elements and agents 'are constantly changing, as are the relationships between and amongst them.' As a consequence, 'uncertainty becomes the rule' (Eoyang and Holladay 2013: 17).

Nevertheless, this uncertainty does not mean permanent instability. In fact, in most cases, changes in the relationships between agents take place within a framework of fundamental systemic stability. Interactions 'simply change the conditions and relationships among the parts and the whole, they do not change the system in any fundamental way.' The interaction between the parts and the whole often sustains existing patterns, as 'parts interact to generate emergent patterns while the patterns influence parts and their interactions' (Eoyang and Holladay 2013: 17-18). The result is a self-generating, self-organizing reality of human systems dynamics which is based on the interdependence between the parts and the whole of the system. Self-organisation here is defined as a process by which the internal interactions between the agents and conditions of a system generate system-wide patterns (Eoyang 2001).

Change, then, is the result of multiple forces acting in unpredictable ways and generating surprising outcomes which are at best partially predictable and are characterised by 'tipping points', at which the dynamics of the system change profoundly to settle into a new pattern. However, it is impossible to know when and in what form the tipping point will arise (Gladwell 2000). Even if an action could be executed exactly as planned, it would not guarantee the 'right' result. Because the elements of a complex adaptive system are multiple and interdependent, one can never do only one thing: one action will have multiple impacts, meaning that unintended consequences abound, as Jervis (1997) demonstrated.

If one accepts these premises, one has to necessarily accept that the future remains unknowable. This being the case, any action taken cannot have as its principal objective the definitive resolution of a particular problem since the self-organisation of a complex adaptive system does not stop at a particular – less so at an externally predetermined – point. Instead, 'the best you can hope to do is to build adaptive capacity to coevolve with the system as it changes over time' (Eoyang and Holladay 2013: 25).

As such, actions have to be constantly evaluated and adjusted depending on particular local circumstances. Decision-making processes and the actions they produce need to be flexible, adjustable, and decentralised. They must be able to respond to the unforeseen changes and circumstances that arise as agents of the system respond and adapt to any given policy. They have to be able to respond to change in a system with a high number of variables.

To enable such an approach and take effective action in such a system of high unpredictability and uncertain outcomes, Eoyang and Holladay (2013: 30) propose 'Adaptive

Action' – a 'method for engaging in dynamical change in an ever-emerging, always self-organizing world. They argue that it is necessary to approach any given problem by exploring the current state of self-organisation, as defined above, so as to allow for targeted intervention that can change this pattern of self-organisation, which has given rise to, and is sustaining, the problem to be tackled. This process is based on the following three simple questions:

What?

The 'what' question tries to identify the current state of the process of self-organisation, which is dependent on three conditions: the elements which hold the system together (such as shared objectives, geographical locations, social class, etc.), differences between the agents of the system which generate tensions that allow for change (such as different interpretations of a particular issue, class, resources, location, etc.), and the channels through which these differences can be expressed (media, assemblies and meetings, etc.). Eoyang (2001) defines these conditions as 'containers', 'differences', and 'exchanges' (or 'connections') (CDE). She also shows that they are interdependent across time and space. As such, they can serve different functions within different contexts.

Questions that might be asked to reveal the current state of self-organisation include: What do we see? What containers are the most relevant? What differences exist and what impact do they have? What exchanges are the strongest and what are the weakest? What has changed and what has stayed the same? What do we want these patterns to look like in the future? What did these patterns look like in the past?

So, what (does it mean)?

The 'so, what' question tries to make sense of what has been observed. What do the patterns we observe mean for any possible action? Such a question is critical in that it generates options for action but also allows for the adaptation of action to different circumstances across time and space. In other words, the 'so what' question is crucial to making actions adaptable to the particular circumstances within which they have to be applied. Questions might include: So, what does the current state of affairs mean to you, to me, and to others? So, what does that mean for our ability to act? So, what does that mean for the future development of the system? So, what options do we have for action?

Now what (do we do)?

The 'now what' question, finally, allows us to take action, having considered the current state of self-organisation and its implications. Crucially, this question allows for the consideration of different actions and different types of action across time and space. Questions may include the following: Now what will I/you/we/they do? Now what will be communicated to others? Now what will the results and the consequences be? Now what will be done in response to these results?

These three questions allow for the identification of the conditions and patterns which sustain a particular problem across time and space. They allow us to exercise ‘[c]onscious influence over self-organizing patterns [as they permit] seeing, understanding, and influencing the conditions that shape change in complex adaptive systems’ (Eoyang and Holladay 2013: 30). In this particular case, they allow for the identification of the conditions and patterns that give rise to, and sustain, violence. As such, it is useful to define more precisely what we mean by conditions and patterns.

Conditions

Conditions are the elements of the social system which, individually and in interaction with one another, determine the speed, direction, and path of a social system as it evolves (i.e., self-organises) into the future. As stated above, there are three conditions which determine self-organisation: containers, differences, and exchanges (or connections).

Patterns

As these different conditions interact, they form patterns, here understood as the similarities, differences and connections that have meaning across time and space. In other words, patterns are the expression of the interaction between the three different conditions just outlined above (Eoyang and Holladay 2013: 30).

These terms have critical implications for action. They indicate that social problems are in fact the expression of a pattern of interdependent conditions across time and space. This being the case, what needs to change are the conditions which form the pattern that sustains a particular problem.

With these considerations made, we can now ask key questions in relation to COVID-19 and the lack of regional response to it: What type of challenge does COVID-19 represent? What does this mean for acting in response to the virus? What conditions currently impede a regional response to the problems identified? Which of these conditions can be influenced, how and by whom? Finally, what can be done to change the problems and patterns identified?

Responses to COVID-19 in South America: national policies undermining the chances of regional success?

Addressing COVID-19 in South America is a complex issue full of interdependencies, which has led to different governments to focus on different issues. It is worth showing this visually, according to the conditions outlined above.

The remarkable observation of the response to COVID-19 in South America was the almost complete absence of a container across the region as a whole. Certainly, at the start of the pandemic there were those – as mentioned above – who did not take the situation seriously or actively dismissed it as nothing specific to worry about.

Yet, even where the very top of government did not engage with the issue to a significant extent, other actors within the same country *did*. In many cases, local authorities or

state authorities were often much quicker to take the pandemic seriously and at least *tried* to act to counter it. This was the case in Colombia, in Ecuador and in Brazil, amongst other countries, where local health system, local funeral systems and the local economy collapsed or came close to collapse (WHO 2021; OECD 2020).

Table 1: CDE model–Conditions of the response to COVID-19 in South America.

| Conditions for Self-organisation | COVID-19 |
|-----------------------------------|---|
| Container | None |
| Difference | Seriousness of problem Perception within government and society of seriousness of problem Focus of policy response Capacity to act Number of policy actors involved Different responses at different levels of government Structure of political system |
| Exchanges/ Connections | Media Demonstrations Policy-statements Press conferences Government information campaigns 'Fake news' etc. |
| Emergent Behaviour | Incoherent. Virtually no containers; too many significant differences; exchanges insufficient to release tension. System not resilient enough. |

Source: Elaborated by author.

Critically, however, even within countries, what began to show up were glaring differences in the capacity to deal with the pandemic, so that recognition of the seriousness of the situation did *not* necessarily translate to concerted and coherent action. This could be seen at local level in Colombia, in Ecuador, in Brazil, but also in parts of all other South American countries where regional disparities in terms of case- and death rates soon became evident, as also did disparities between different social classes. Similar issues could be observed in terms of travel restrictions. Whilst some countries imposed quick, and strict, travel restrictions, others were much looser towards it. At the same time, once again, capacity (and/or willingness) to enforce these varied widely (WHO 2021; OECD 2020; Sánchez-Anchea 2021; Enriquez, Cabal and Centeno 2020).

These issues also became critical in terms of communication. Whilst in some countries the central government played a critical role in communicating a consistent message to the population in terms of what to do in response to the pandemic, in others, again with Brazil at the forefront, the central government and media began to actively take on two different directions, with the former being at the forefront of publicly downplaying the pandemic, and the latter trying to communicate the seriousness of the situation (Lotta 2020).

Interestingly, in countries such as Colombia or Chile, to name but two examples, the response of the government to the pandemic contributed to a general state of dissatisfaction and indeed ignited large-scale social protests, underlining once again that one can never do only one thing (Jervis 1997).

The consequence of this was a pattern of conditions marked by almost complete incoherence – both between and, critically, within – governments and levels of government. The results were devastating, turning South America into one of the regions worst affected by the pandemic, both in relation to case numbers and deaths relative to cases and population. Such incoherence, literally, killed.

As such, coordination between countries would have been critical in order to bring about a more coherent policy response. This, however, did not occur, which can be explained by looking at the CDE for regionalism in South America.

Table 2: CDE model-Conditions of regionalism in South America.

| Conditions for Self-organisation | COVID-19 |
|-----------------------------------|---|
| Container | Regionalism as Pragmatic instrument |
| Difference | Ideology Perceptions and definitions of sovereignty Perceptions of other countries in the region Policy priorities |
| Exchanges/ Connections | Meetings (infrequent) Media |
| Emergent Behaviour | Incoherent: Too many significant differences; exchanges insufficient to release tension. System not resilient enough. |

Source: Elaborated by author.

The unresolved strategic challenges of South American regionalism was already briefly discussed above. As such, the definition of regionalism as a ‘pragmatic instrument to address specific problems’ was, in many ways, what was *possible* in terms of regional cooperation. However, with increasing ideological polarization, and increasing, and persistent, domestic political instability in an increasing number of countries, even that use of regionalism has proven to be illusive.

Critically, as regionalism has slipped down the list of possible political instruments to address common problems, so the exchanges (or connections) which used to exist at regional level have weakened or in fact been discontinued (Merke, Stuenkel and Feldmann 2021). This, in turn, is a consequence of, but also reinforces, a profound lack of trust, as well as personal chemistry, between the leaders. Lack of personal contact –reinforced by the pandemic itself – means that there has been no chance of building personal relationships between the leaders, something which was so important during the period between the end of the Cold War and the economic crisis of 2008 onwards which marked the ‘high point’ of modern South American regionalism (Malamud 2012). Of course, with very different perceptions of what the key issue in relation to the virus actually is, any type of cooperation is almost impossible to occur in any case.

Taken together, the pattern of conditions which presents itself is one of almost complete incoherence. There are virtually no points of convergence in terms of the policy response at regional level. As such, the lack of regional response to COVID-19 is a logical consequence of a process of regional drift together with particular circumstances which had been observed for some time.

Generating options for action

With the panorama sketched out above, it is clear that the options for actions at the regional level in response to COVID-19 are currently extremely limited, a fact underscored by the need for speed in responding to the pandemic and the extreme incoherence which characterises the response across the region up to this point.

Yet, more recent developments in relation to the pandemic have opened up *some* very practical options for actions that could, in essence, be taken immediately. The most critical of these is the development of vaccines. Here, as Ventura has pointed out, Brazil has a world-renowned vaccine program which, if used to its full capacity, would have had, and still would have, the ability to supply the needed vaccines not only for itself but for its neighbours as well, some of which have struggled badly to acquire and distribute vaccines (Valery 2021). There is, therefore, a need for regional action which can be justified pragmatically.

To enable such a program of vaccination, however, would also require an enormous logistic effort at regional level. As mentioned above, there are enormous disparities in the region in terms of capacity, but there are countries – as well as companies – with the logistical know-how and capacity to enable a program of vaccine distribution which could attend a far greater percentage of people than some exclusively national efforts would be able to accomplish.

Such limited, but highly practical, actions, which could – for example – use the logistical and institutional structures which previously underpinned UNASUR Health, can also serve as an important first step to change the pattern which has underpinned the political crisis in South America over the last decade or so: a deep mistrust between South American countries but also between governments and the populations they are meant to serve (Arias 2011).

In this respect it is, in fact, interesting to observe that, throughout the region, there has been recognition, albeit perhaps only in the short term, of the importance of the state, and their governments, in, at the very least, avoiding an even greater catastrophe as a consequence of the pandemic, be it in terms of human life or in terms of economics and the provision of an, albeit basic, social safety net, as already touched upon above (Mendoza 2021). Such recognition has extended across the political and ideological spectrum. This, in turn, *may* allow for the definition of some common objectives in terms of addressing the worst consequences of the pandemic across the region as a whole. It is, for example, in nobody's interest in a practical sense, to allow for the development of wildly different economic and social recoveries from one country to another as this will, almost inevitably, lead to further refugee movements, creating added social, economic and political problems in the region, as has already occurred over recent years (Nolte and Weiffen 2020).

Overall, what all of these elements amount to is an attempt to restore *coherence* to both the region as a whole and between its political and economic leaders in particular so that the immediate, and gravest, consequences of the pandemic can be addressed. In visual form, 'a pragmatic response to a specific problem' at regional level in relation to COVID-19 may look something like this:

Table 3: CDE model–A pragmatic response to COVID–19 at regional level in South America

| Conditions for Self-organisation | COVID-19 |
|----------------------------------|--|
| Container | Deal with the here and now: Vaccine distribution and economic recovery Decentralized action |
| Difference | Capacity to contribute Resources Different needs across time and space |
| Exchanges/Connections | Media Local authorities NGOs, local residence associations etc. |
| Emergent Behaviour | More coherent: Few and clear containers/objectives; locally manageable differences; locally engaged, and responsive, exchanges/connections |

Source: Elaborated by author.

As mentioned above, such an approach is, in many ways, quite limited in scope and ambition. It accepts the serious structural, historic and contemporary limits within which any regional cooperation has to occur. It also takes into account two key ‘rules’ according to which much of South American politics works: that it is largely *reactive* to situations, rather than proactive in trying to prevent crises from occurring and that it is largely focused on what is happening *right now* rather than what will happen in the future or in structural terms (Lehmann 2017a). It also takes into account the key variable of sovereignty when it comes to regionalism in South America in that actions would not in any practical sense *impede* on the sovereignty of other countries but simply offer countries assistance in addressing its own crisis in relation to COVID-19. Equally, by focusing on local actors – and non-governmental actors, where appropriate – the approach outlined above would at least begin to mitigate the structural issue of a lack of trust between the state and its citizens.

The question, then, becomes how to ‘get’ to a point where such actions might be able to be implemented. This is what we shall turn to now.

What now? Achieving a coherent and pragmatic regional response to COVID-19

Malamud (2011) identified three pre-conditions for any kind of regionalism to occur: Leadership, followers and institutional structure (or inertia, as he terms it). As shown above, none of these conditions is currently readily apparent, so what can be done? It is here that the tightly constrained objectives can help.

With regards to leadership, the existence of vaccines – which point to a relatively clear route out of the immediate pandemic and crisis – has opened up the field of possible leaders, as well as the levels at which interaction can occur. The immediate responsibility

of reacting to the crisis often falls on local, rather than national, officials. Yet, these local officials have often shown considerable will to assume leadership roles, for a number of reasons. So, oftentimes, it has been they, together with regional UN-representations, for instance, who have negotiated with vaccine producers and the countries within which they are located (OPAS 2021b). As such, different poles of leadership have emerged across time and space which, nevertheless, have often been critical in addressing urgent needs at specific times, as was the case when the health system in the Brazilian state of Amazonas acquired critical oxygen supplies from neighboring Venezuela or when states in Brazil or Colombia began to acquire their own supplies of vaccines.

The accumulative impact of these localized poles of leadership has been a shift in broader public opinion about the utility of vaccines, to name but one example. For instance, in Brazil, where the President has consistently questioned the effectiveness of vaccines, and where, therefore, states have been at the forefront of the vaccination program, the percentage of people who have declared that they will definitively take the vaccine has increased and this is now consistent amongst the highest in the region. At the same time, in the region as a whole, willingness to get vaccinated has also increased (Mendoza 2021).

Part of this development – the consistent increase in ‘followers’ when it comes to vaccination – has been very consistent messaging from large parts of the media and non-governmental actors. The dimension of the COVID crisis has had the inevitable consequence of wall-to-wall coverage in all media platforms. It is interesting in this respect that, whilst there has been a lot of focus on ‘fake news’ and attempts to downplay the seriousness of the pandemic and the effectiveness of the vaccine, there has also been a concerted counter effort – by the ‘established’ media, as well as the broader scientific community – to present facts about the pandemic and the actions taken to counter it.¹

In South America, if one looks at the willingness to vaccinate, this campaign seems to have been successful, albeit that the region is facing serious problems in getting the vaccine to the people who want to take it in sufficiently large numbers sufficiently quickly. Yet, as there is a willingness to get vaccinated, it should actually give an impulse to regional efforts to confront this logistical challenge. Here, as already mentioned above, vaccine producers, as well as international organizations such as the World Health Organization (WHO) have already offered help which, whilst often criticized for not being enough, could still give critical impulses at a critical time where speed of vaccination is one key variable for bringing the pandemic under control. Local governments should also be important players in such processes. There are some, particularly big city authorities which could pass on valuable experiences across the region to ‘scale’ the vaccine roll-out.

To accelerate this process – and therefore firm up and sustain public opinion on vaccinations – it is critical to create an institutional underpinning to such a process. As mentioned above, here the region is in a potentially advantageous place due to the positive experiences of responding to public health crises through the UNASUR Health Council and the South American Institute of Government in Health (ISAGS). Its institutional mechanisms should be urgently reactivated, be it temporarily and be it for consultation between

national- or local governments. Again, the broad idea here is to establish and maintain 'connections' which can accelerate the exchange of information across time and space.

Whilst none of these proposed actions represent a guarantee of success, they should, in their totality, lead to a significantly more coherent policy response across the region as a whole which, in turn, should help in addressing the issue that, in relation to COVID-19 'nobody is safe until everybody is safe.' To achieve this, the system as a whole needs to become more agile and responsive. This is why one of the key themes of the proposals made is the incorporation of sub-national governments and non-governmental actors into the policy process. They can offer both expertise as well as closer interaction with the population at 'ground level' and responding to local boundary conditions, while being guided by one clear objective, which is the reduction of the impact of COVID-19 in terms of cases, lives and the economic and social fabric of the region as a whole.

Conclusion

COVID-19 has hit the South American region extremely hard, in terms of lives lost, the economy and the social fabric of the region as a whole. It has done so at a time when regional cooperation of any kind was at its lowest ebb in many decades, with political and ideological differences between governments weakening still further the political and institutional underpinnings of regional cooperation. This, as has been shown, has significantly hampered any possibility of developing a common approach to fighting the COVID-19 pandemic despite the evident need for such cooperation across the region and despite the fact that, in requiring a pragmatic response to a common problem, the pandemic meets the standards normally applied to decide upon joint regional action in South America.

In the present text it has been argued that, in order to understand and address this lack of regional cooperation, we need a different way of looking at it. Using the CDE model, it has been shown that the lack of cooperation is the result of a pattern of long-term and short-term conditions which show little sign of changing in the foreseeable future. At the same time, the current pandemic fits with some of the key 'rules' which govern South American politics, particularly the focus on what is happening at any given moment in time.

With that in mind, the text makes some suggestions on what could be done to foster regional cooperation in response to what is clearly a regional crisis of historic proportions. Critically, it is argued that action should focus on the immediate problem, in particular the distribution and application of vaccines. Furthermore, bearing in mind the divergent approaches by national governments, cooperation should be fostered at levels of the state below national governments, at state- or municipal level, where the types of problems confronted by decision-makers are often quite similar – albeit to differing degrees – and where the focus is much more clearly and uniformly on the here and now, and the immediate crisis. To be able to act effectively at this level, the incorporation of non-state actors –such as NGOs, medical experts and private enterprises- is very important as a way

of creating a critical mass of actors pursuing coherent policies as close as possible to the population most impacted upon by the pandemic. In other words, regionalism in South America, in response to the pandemic, needs to move away from the ‘Presidentialism’ which used to define it and be as practical as possible, with decision-making processes which are as quick as possible.

To achieve this, clear leadership is necessary, even if it does come from sub-national and non-political actors. Public opinion has quite decisively shifted, for instance, in favor of vaccinations, with the population not particularly concerned about *who* provides it. It requires practical cooperation to address a specific challenge.

Pursuing such a strategy may have a longer-term impact on regionalism in South America. It may, finally, begin to address the issue of legitimacy of regional cooperation in South America by showing clear, practical, and short-term benefits of regional cooperation. It may, also, therefore begin to address the trust deficit which exists between South American governments and their population.

None of what is suggested here is a guarantee for success. Yet, it does provide a possible blueprint for an approach to a regional problem which requires a regional response and which requires urgent attention. Time is of the essence.

Notes

- 1 See, for instance, the campaign ‘Fato ou Fake’ by Brazil’s largest media organization, Globo, at <https://g1.globo.com/fato-ou-fake/>.

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Ainda uma ferramenta pragmática para resolver problemas específicos? O regionalismo sul-americano e a resposta ao COVID-19

Resumo: O regionalismo na América do Sul já foi descrito ao autor por um diplomata brasileiro sênior como uma “ferramenta pragmática para resolver problemas específicos”. No entanto, em resposta à pandemia de COVID-19 na América do Sul, – a região mais atingida do mundo pela doença – o regionalismo tem se destacado por sua ausência como tal ferramenta, apesar do fato de organizações internacionais e outros atores apontarem para a necessidade urgente de cooperação regional acerca do tema. Isso pode explicar a falta de cooperação regional no assunto? Utilizando os marcos conceituais da Complexidade e da Dinâmica de Sistemas Humanos, este artigo argumenta que o regionalismo na América do Sul sofre de falta de coerência. Dessa forma, serão feitas algumas sugestões sobre como abordar esta incoerência na resposta ao COVID-19 e, para tal, conseguir dar resposta a alguns dos desafios específicos trazidos pela pandemia. O artigo argumenta que o foco da política deve ser muito estreito e deve focar no impacto econômico e nas vacinas. Além disso, a cooperação regional deve acontecer abaixo do nível dos governos nacionais. Algumas sugestões sobre como isso pode ser alcançado são feitas ao longo do artigo. Mostra-se que esse foco estreito e, muitas vezes, subnacional, pode restaurar alguma coerência, que permitirá uma resposta regional mais eficaz à pior pandemia vista em 100 anos.

Palavras-Chave: COVID-19; América do Sul; regionalismo; complexidade; Dinâmica do Sistema Humano (HSD).

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