BACK TO SUMMARY

COVID-19 And the Military

Q&A with Tanisha Fazal, Associate Professor of Political Science, University of Minnesota

There are constant comparisons to war time mobilization for the current fight against COVID-19. Is this the correct way to think about this? Why/why not?

My read is that the comparisons to wartime mobilization have to do with the fact that the COVID-19 pandemic requires a whole-of-society approach, and we (in the US at least) have few analogies to work with aside from war. But, I see at least three big issues with the wartime analogy. The first is that there is a strategic enemy in war; a virus does not strategize in the same way groups of people do. Using the wartime analogy suggests an enemy, which in this case has led to attacks against Asians (including, in the US, Asian-Americans) and heightened tension with China. In this sense, the wartime analogy can be counterproductive. Second, as Danielle Lupton and Jessica Blankshain argue, the language of war eases invocation of certain domestic rules and procedures that may be difficult to roll back. The third issue with the wartime analogy, at least in the US case, is that the US has not had to mobilize as a society for war since World War II. Our military is comprised of volunteers, and is significantly smaller (as a share of the population) than during the World Wars. By invoking the wartime analogy, therefore, it's not clear what we're invoking. Relatively few Americans today have any recollection of what civilian life was like during World War II. From a comparative perspective, it would be interesting to think through the aptness (or not) of the wartime metaphor for those countries that have experienced civil war. Aisha Ahmad's essay in the Chronicle suggests some interesting connections. But there are still important differences, especially along the lines of who has what kind of control over levels of exposure.

There has been extensive critique of the militarization of pandemic response.

Would you be able to describe any efforts that you have seen that are only made possible by military organizations?

I think of the response more in terms of the securitization of health than of militarization. The military has an advantage in terms of its logistics capabilities, but not necessarily its medical capacity. What remains to be seen is whether the securitization of health will lead to more or less international cooperation, infringement on individual rights, and what the effect on democracy will be globally.

How have militaries' role in medical and scientific innovation contributed to the role that they are playing during the COVID-19 pandemic?

I don't know that we're seeing too much – yet – in terms of military contribution to the science around COVID-19, although there have certainly been efforts along these lines. But there are many precedents for military innovations under stress. War is a crucible for medicine. Advancements in war include everything from Henri Dunant's founding of the Red Cross to the use of whole blood for transfusions to the United States' Joint Trauma System.

How is the pandemic likely to affects militaries and military medicine in the US and elsewhere?

Militaries of advanced industrial countries have been increasingly attentive to medicine over time. As a result, we no longer see death by disease in the military outstripping battle deaths (at least in war time). In the US, there have been a number of efforts to decrease funding for military medicine. I wouldn't be surprised if these are rolled back. We're also seeing China becoming more involved in health diplomacy as a result of the pandemic. Some portion of Chinese health diplomacy over the past number of years has been carried out by the PLA, and I expect that the US military medical community will ramp up its efforts to engage in similar levels of health diplomacy. •