**Headline:** Could COVID-19 Bring Down the U.S. Empire?

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**[Article Body:]**

As U.S. COVID-19 cases double every few days and the death toll mounts, the U.S. seems to be caught in a “worst of both worlds” predicament: daily life and much of the U.S. economy is shut down, but no real progress has been achieved in its efforts to contain or eradicate the virus.

Meanwhile, the 11 million people of Wuhan in China, where the pandemic began, are starting to return to a [more normal life](https://www.ndtv.com/world-news/coronavirus-outbreak-fall-in-chinas-coronavirus-cases-for-4th-day-efforts-to-heal-economy-2203129), with the city’s subway system running again and businesses reopening. In the province of Hubei (Wuhan is the capital), at least [4.6 million people have returned to work](https://www.reuters.com/article/us-health-coronavirus-china-toll/china-sees-drop-in-new-coronavirus-cases-none-in-hubei-for-sixth-day-idUSKBN21H00T), while another 2.8 million have returned from quarantine in Hubei to jobs in other parts of China, a mass migration that seemed unthinkable a month ago.

But international trade and travel will be severely depressed until the world as a whole recovers from the pandemic, so no country can fully recover as long as others are still in its grip. Different countries are trying [different approaches](https://www.ctvnews.ca/health/coronavirus/reasons-for-optimism-how-humanity-is-turning-the-tide-on-covid-19-1.4857857) to the problem based on their own economic, political and health care systems. We can all learn from each other, and we will have to help each other get through this.

The World Health Organization (WHO) has stressed timely and systematic contact [tracing and testing](https://www.vox.com/2020/3/2/21161067/coronavirus-covid19-china) as the key to fighting COVID-19. This means quickly tracing the contacts of each infected patient and testing them, whether they show symptoms or not.

The [results of testing](https://futurism.com/neoscope/half-coronavirus-carriers-no-symptoms) in Iceland, which has tested more of its population than any other country, have shown that about half of all COVID-19 carriers show no symptoms at all, so testing only people with symptoms without efficient and comprehensive contact tracing will not stop the spread of the disease. Increasingly oppressive lockdowns are only a stopgap measure without systematic testing.

China eradicated the virus from Hubei province by deploying [40,000 medical staff](https://news.cgtn.com/news/2020-03-01/Sun-Chunlan-hails-the-medical-teams-from-other-provinces-OvFRTqzhYc/index.html) to the province and doing comprehensive contact tracing and testing, and this is the model other wealthy countries that have had limited success against COVID-19 have tried to follow. In Wuhan, tests were coming back in four to seven hours, providing the basis for efficient and effective isolation and contact tracing of each case. [Germany](https://inews.co.uk/news/health/coronavirus-germany-death-rate-confirmed-cases-2502388) has done better than other large countries in Europe, with more than [118,000](https://www.worldometers.info/coronavirus/country/germany/) cases but only 2,607 deaths as of April 9, and is now [treating](https://www.nytimes.com/2020/04/04/world/europe/germany-coronavirus-death-rate.html) patients airlifted from France, Italy and Spain.

[Other countries](https://en.wikipedia.org/wiki/COVID-19_testing) that tested at least 0.5 percent of their populations before getting overwhelmed have kept deaths even lower (deaths as of April 9): Australia (51); Austria (295); Bahrain (5); Canada (503); Estonia (24); Iceland (6); Latvia (3); Malta (2); Norway (108); Singapore (6); Slovenia (43); South Korea (204); Switzerland (948) and the UAE (14).

After a very late start, U.S. medical labs were quickly overwhelmed with COVID-19 testing. By April 1, results were taking [up to 10 days](https://amp.cnn.com/cnn/2020/04/01/politics/testing-backlog-coronavirus-quest-invs/index.html) to come back from labs, and Quest Diagnostics had a backlog of 160,000 unprocessed tests. This is forcing doctors and hospitals to treat every patient with symptoms as if they have the virus, putting even greater demands on medical staff and equipment. The U.S.’s deficient lab testing makes it impossible to set up a system of isolation and contact tracing that can identify asymptomatic carriers and stop the spread of the virus.

The U.S. and other wealthy countries that failed to respond to COVID-19 in its early stages don’t have enough protective gear, test kits and labs or ventilators to treat large numbers of patients and stop the spread of the virus, so how will poorer countries manage once they too are battling fast-spreading infections? High-tech equipment and labs will be in even greater shortage in low-tech countries, but some poorer countries are already finding strategies that work.

Vietnam, with limited resources and without access to large numbers of test kits, seems to have avoided widespread infection, despite a long border with China. By April 9, Vietnam had 255 confirmed COVID-19 cases, but no deaths. [So what has it done?](https://portside.org/2020-03-26/vietnam-covid-19-and-public-health)

Vietnam’s public health system provides comprehensive health care to 89 percent of its people, and it has doctors, nurses and other health workers in every community. Anyone arriving in Vietnam is checked for a fever and quarantined if they have one. Even those who don’t are under a strict stay-at-home order for 14 days. This is so strict that their names are published in local newspapers and the public is asked to tell the local health authorities if they see them outside. If a stranger appears in a community, a health care worker visits to check them out.

If there is a suspected COVID-19 case in a building, the whole building is quarantined for two weeks, but quarantine Vietnam-style includes three meals a day, delivered for a small charge. Large buildings have whole-body sanitizing stations, not just hand sanitizer, at every entrance. Vietnam is using empty hotels as quarantine sites, with house calls from a doctor as part of the service. Everybody in Vietnam wears a mask, and there have been no reports of price gouging, panic buying or hoarding.

Another of China’s neighbors, [Taiwan](https://www.cbc.ca/news/business/taiwan-covid-19-lessons-1.5505031), has taken a different approach to COVID-19, but it, too, has the benefit of a comprehensive public health system, with an emphasis on preventive care. With a huge number of daily flights between Taiwan and China, Taiwan began restricting flights into the country on December 31, 2019. Like South Korea, Taiwan began COVID-19 testing on January 20, with contact tracing and testing and isolation of confirmed cases. But Taiwan has avoided a national lockdown and has installed dividers between students’ desks instead of closing schools. It also rations its limited supply of masks, distributing a fixed number per week to each family. By April 9, Taiwan only had 380 confirmed cases, and only five people had died.

Venezuela was already in dire straits. As many as [100,000 people](https://www.codepink.org/venezuela_asks_global_court_to_condemn_us_sanctions) are believed to have died since 2017 as a result of brutal U.S. sanctions that prevent the import of medicines, food and other necessities. UN Secretary-General Antonio Guterres has called for the [lifting of sanctions](https://foreignpolicy.com/2020/03/24/un-coronavirus-cuba-iran-venezuela-north-korea-zimbabwe-sanctions-pandemic/) in this crisis, and many Americans support his call.

But as of April 9, [Venezuela](https://www.nytimes.com/interactive/2020/world/coronavirus-maps.html#countries) had confirmed only 171 cases and nine deaths. [China has sent 320,000 test kits](https://pi.pardot.com/emailTemplateDraft/read/id/29155), a team of health experts and tons of supplies. [Cuba](https://jacobinmag.com/2020/3/cuba-coronavirus-braemar-doctors-health-care) has sent 130 doctors and 10,000 doses of Interferon, a Cuban drug that China has used to treat COVID-19, and Russia has also sent medical equipment and supplies.

Like Vietnam, Taiwan and other countries, [Venezuela](https://www.commondreams.org/views/2020/03/25/venezuelas-coronavirus-response-might-surprise-you) has benefited from already having a comprehensive national health care system. After the first COVID-19 case was confirmed on March 13, 12.2 million people completed questionnaires about their health and 20,000 who reported symptoms received house calls from medical teams. Community groups make masks, and 12,000 medical students make house calls. Rent payments are suspended, and the government guarantees salaries and wages.

[Cuba](https://www.thenation.com/article/world/coronavirus-cuba-sanctions-aid/) had 515 cases as of April 9, with 15 deaths. The country’s borders have been closed to nonresidents, bringing the tourism-driven economy to a standstill and exacerbating the long-term effects of brutal U.S. sanctions. Cuba is not only controlling the spread of the virus internally, but [sending](https://www.cnn.com/2020/03/26/world/cuba-coronavirus-medical-help-intl/index.html) brigades of doctors and nurses to Italy, Venezuela, Nicaragua, Jamaica, Suriname and Grenada: a heroic example for the world.

**A World in Search of New Leadership**

This look at the [COVID-19 pandemic](https://coronavirus.jhu.edu/map.html) in a few countries around the world is only a snapshot. The numbers of cases and deaths are higher every day, and no country except China (and maybe South Korea) has the virus contained. But, as more poorer countries in Asia, Africa and Latin America become infected, few have the health care infrastructure of Vietnam or Cuba. So where are countries going to turn for help when large numbers of their people start falling sick and dying?

The United States is struggling to address its own problems with COVID-19. For many months to come, the U.S. will be scrambling to find or make enough ventilators, protective equipment, test kits and labs, medicines and medical staff to fight the pandemic here. It won’t have surplus to send to other countries.

The United States is also failing miserably to provide any model of how to successfully combat COVID-19. The U.S. already has more coronavirus deaths than China, a country with four times the U.S. population, and the future for Americans is terrifying, with the Trump administration talking about the death of 100,000 Americans as a “good scenario.” The terribly botched U.S. response to the pandemic is undermining [already weak](https://www.theguardian.com/us-news/2019/feb/28/global-confidence-us-russia-gallup-poll-report-tie) global confidence in U.S. leadership.

China, on the other hand, has largely eliminated the virus from its own population and is already lending its expertise and resources to others. Many of the goods the world depends on to fight this virus, from masks to medicines, were already produced in China, and the government has [mobilized](https://www.foreignaffairs.com/articles/china/2020-03-18/coronavirus-could-reshape-global-order) local companies to significantly crank up production and sell directly to the government to help fill global demand. On April 4, [China shipped](https://news.yahoo.com/gov-cuomo-says-chinese-government-172534529.html) 1,000 ventilators paid for by wealthy Chinese businesspeople to hospitals in New York.

China is also [sharing](https://www.foreignaffairs.com/articles/china/2020-03-18/coronavirus-could-reshape-global-order) information about the pandemic and lessons from its own experience with doctors and health officials around the world. Western views of China’s role in this crisis have shifted from blaming China for its initial denial of the outbreak and criticizing its restrictions of personal freedom in Wuhan to accepting its help and expertise as other countries and governments confront the same difficult choices. Doctors in hospitals in New York City are trying to learn all they can from doctors in China in their quest for effective treatments.

With the U.S. failing and China taking a leadership role in the international response to this crisis, could the COVID-19 crisis mark a turning point in the transition to a multipolar world in which China will be just as important as a world leader as the United States? And could this become an effective check on the destructive aspects and dangers of [U.S. imperial power](https://bit.ly/2UV8oES)?

For several decades, China has defined its place in the world according to Deng Xiaoping’s [“24-character”](https://www.globalsecurity.org/military/world/china/24-character.htm) strategy: “Observe calmly; secure our position; cope with affairs calmly; hide our capacities and bide our time; be good at maintaining a low profile; and never claim leadership.”

Since Xi Jinping came to power in China in 2012, he has implicitly been entrusted with guiding China into a new phase in its history, moving beyond the 24-character strategy to a position in which China may play an economic and diplomatic leadership role equal to that of the United States.

As [many analysts](https://www.scmp.com/news/china/article/1578761/deng-xiaopings-guiding-principles-are-still-play-today) have noted, and as the 24-character strategy recognized, China has to walk a fine line to assert its influence in the world without militarily provoking the United States or taking actions that other countries will see as aggressive or threatening. It has tried to exercise extreme caution in disputes over islands in the South China Sea and other potential military flash-points. China’s Belt and Road Initiative, a massive economic development project aimed at strengthening China’s connectivity with the world, has so far been the centerpiece of its gradually shifting strategy.

But the crisis the world will face over the next six months or a year cries out for competent leadership. The WHO is already playing a critical role, but it is dependent on major economic powers to provide the resources to fill its prescriptions. If China takes the lead in providing the equipment, the therapies and the expertise the world needs right now, it can do so in a context of respect and deference to the UN and the WHO. After decades of U.S. unilateralism, aggression and disdain for [international law](https://bit.ly/2UTyjfT) and institutions, most of the world would welcome this kind of internationalist leadership.

Unless China overplays its hand or makes serious mistakes, nobody but Donald Trump and the imperial hawks in Washington will begrudge China its role in helping to resolve the worst public health crisis in recent history. This is China’s chance to provide constructive international leadership in a way that will save many lives. And in the reshuffling of world power that this represents, we can only hope that the United States will also find a more constructive and legitimate place for itself in a multipolar world that will be more peaceful, just and sustainable.