## **ZOOM OUT**

## The question:

## COVID-19 and multilateral governance at the United Nations between risk-prevention, procedural adaptation and feeble response

Introduced by Enrico Milano and Giulio Bartolini\*

The social, human, economic and political impact of the COVID-19 pandemic can be hardly overestimated. As we write, the virus has infected more than 8 million people worldwide, causing the death of over 400,000. That accounts, in just a few months, to more than double the number of people killed in terrorist attacks in the past decade.¹ Economies have been driven to the ground, while social inequalities have been magnified both globally and domestically. In political terms, the sudden awareness of a new threat that knows no borders has called for more concerted action and international cooperation in response and risk-prevention. Conversely, it has shown the fragility of the system of multilateral governance formed by 193 sovereign States, often inclined to follow their own short-term national strategies.

Needless to say, the United Nations has been uniquely positioned to address such a complex crisis. This Organization enjoys universal membership, a multi-dimensional mandate, including cooperation on health matters led by a specialised agency, the WHO, as well as a number of concrete and operational tools for effective international cooperation in facing the global pandemic. The United Nations, from the very beginning, was the principal forum where to converge multilateral efforts to address this unprecedented and unpredicted global threat. And yet it has faced considerable challenges.

Firstly, the United Nations itself, as an international organization entrusted with a mandate and with specific powers and responsibilities

<sup>\*</sup> Of the Board of the Editors. The views expressed by Prof Milano are in his individual capacity.

<sup>&</sup>lt;sup>1</sup> <a href="https://ourworldindata.org/terrorism#all-charts-preview">https://ourworldindata.org/terrorism#all-charts-preview>.

attributed to its different organs and bodies, was faced with an internal challenge, namely how to ensure 'business continuity' despite the closure of in-person meetings at its Headquarters in New York City (one of the hot spots of contagion between March and May). Its main political organs, namely the Security Council, the General Assembly and the Economic and Social Council had to deal with a profound disruption of ordinary working methods and procedural rules, which, from the very onset of the lockdown, required efforts of adaptation to ensure business continuity. The Security Council has since developed the practice of meeting virtually through a UN-developed video conferencing system and has established an unprecedented practice of voting in written form.<sup>2</sup> Both the General Assembly and the Economic and Social Council have established a 72-hour silence procedure, which allows consensual decisions and resolutions to be adopted. The above procedure also applies to the General Assembly's subsidiary bodies, including committees. Efforts to adopt a system of electronic voting on a UN platform for the General Assembly have, instead, proven fruitless at the time of writing. This alternative would have, at least in part, mirrored the voting procedure of ordinary, in-person meetings. Despite having a wealth of technical means at the GA's disposal, consensus on 'e-voting' has been hampered by the disparate 'visions' of what it should achieve: whether a full return to 'normalcy' with the possibility of voting on all resolutions and decisions (a position held by a small group of countries led by Liechtenstein, Mexico and Switzerland) or simply ensure 'business continuity' by 'e-voting' only on select, essential organizational and financial decisions (a view held by a majority of delegations); adding to that, the positions of Cuba and the Russian Federation that opposed the system of 'e-voting' as they consider it to be inherently incompatible with the Rules of Procedure of the General Assembly.

These procedural difficulties have been accompanied by no less important substantive challenges that reveal the current crisis of multilateral governance centred on the UN. And this especially holds true with regard to the adoption of concrete measures to counter the devastating human,

<sup>&</sup>lt;sup>2</sup> See in this issue G Nesi, 'The United Nations Main Bodies and the Universal Pandemic: How to Meet, Negotiate and Deliberate under "New, Extraordinary and Exceptional Circumstances"?'.



social and health-related consequences of the COVID-19 pandemic. Unlike in 2014, when the Security Council unanimously took the bold and unprecedented step to determine that the Ebola pandemic in Africa constituted a threat to international peace and security,<sup>3</sup> the Security Council has been unable to adopt a single resolution due to the heated controversy between China and the United States over the role of the WHO in this crisis. In the General Assembly – a setting in which only consensual decisions have been possible - the two COVID-related resolutions adopted have not gone much farther than being statements of joint, good intentions.4 The Mexican-initiated resolution, while more specific than resolution 74/270 on the issue of access to vaccines, medicines and medical equipment for COVID-19, does not contain any call or recommendation for Member States to engage in international cooperation, including on the implementation of measures and regulations adopted by the WHO. 5 The animosity between and among leading actors in the system has prevailed over the need to ensure institutional effectiveness and facilitate a coordinated and common response to a global threat that knows no borders. Unsurprisingly the debate over these failures has seen the reemergence of calls to reform the system and focus for the time being on global actions through 'coalitions of the willing'.6

Additionally, while paying great attention to the WHO and the capacity for the 2005 International Health Regulations to adequately deal with Covid-19, we should not dismiss further analysing the current pandemic with a view to possibly adopting policy and legal instruments pertaining to disaster scenarios. In this regard, within the UN system and the activities of UNISDR, a point of reference is provided by the Sendai Framework for Disaster Risk Reduction 2015-2030, finally endorsed by the UN General Assembly in 2015.<sup>7</sup> This instrument acts as a blueprint against which to test the capacities of States to address systemic risks –

 $<sup>^3</sup>$  Cf UNSC Res 2176 (15 September 2014); UNSC Res 2177 (18 September 2014). The two resolutions were co-sponsored by over 130 States.

<sup>&</sup>lt;sup>4</sup> UNGA Res 74/270 (2 April 2020); UNGA Res 74/274 (20 April 2020).

<sup>&</sup>lt;sup>5</sup> See in this issue R Treves, 'The Health of International Cooperation and UNGA Resolution 74/274'.

<sup>&</sup>lt;sup>6</sup> See eg the Joint Declaration of the French and German-led 'Alliance for Multilateralism' initiative at <www.diplomatie.gouv.fr/fr/politique-etrangere-de-la-france/la-france-et-les-nations-unies/l-alliance-pour-le-multilateralisme/actualites-liees-a-l-alliance-pour-le-multilateralisme/article/alliance-pour-le-multilateralisme-nous-avons-besoin-d-une-cooperation-et-d-une>.

<sup>&</sup>lt;sup>7</sup> Cf UNGA Res A/RES/69/283 (23 June 2015).

including biological hazards – and integrate such issues into their national disaster risk reduction strategies. The Sendai Framework, through its multifaceted perspective, further aims to overcome the silos approach normally pursued by relevant stakeholders. It, instead, aims to create systematic synergies that would allow involved sectors to finally see how biological hazards cannot be assessed in isolation and without paying attention to other relevant issues, such as the capacities, exposures and vulnerabilities of potentially affected communities. The Sendai Framework policy approach can thus provide an additional contribution to current debates and further integrate existing normative inputs, as those provided by the International Health Regulations. Articles 5 and 13 of the Regulations requested States to develop a series of core capacities to face potential public health emergencies, through a series of preparedness measures. These have been, unfortunately, largely undermined by States during implementation of this instrument.

We have called Giuseppe Nesi, Raymundo Treves and Marco Toscano-Rivalta to comment on the above three specific aspects. Their articles shed light on the preparedness, adaptation and response of the UN system to the current COVID-19 crisis and provide us with a number of indicators as to the temperature and symptoms concerning the state of health of the system of multilateral governance based on the United Nations. Further contributions on the legal issues at stake are expected. On the basis of the analyses so far provided, the prognosis cannot but be guarded.

<sup>&</sup>lt;sup>8</sup> See in this issue M Toscano-Rivalta, 'Disaster Risk Reduction in Light of the COVID-19 Crisis. Policy and Legal Considerations'.

