Covid-19, structure and conjuncture, ideology and politics.

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The crisis caused by the COVID-19 pandemic has bewildered the public authorities of all countries. No wonder, in view of its enormity (global scale, seriousness of its effects) and the darkness around its etiology and its cure (medicine keeps investigating the origins of the viral mutation and desperately trying to create a vaccine). Whether it is admitted or not, the truth is that no one can be certain about the way out of the quagmire; and, if truth be told, nor is it known for certain how on earth we have plunged into it. Practically all economists are now brave enough to foretell that the resulting recession will be far worse than those of 2008 (subprime mortgage crisis) and 1973 (energy crisis).

Not only that; a great majority dare to predict that it will very probably equal the Great Depression of the 1930s, which is the worst crisis in the history of capitalism so far. Quite a few alarmed voices foresee that the recessive record of the 30s will be surpassed, seeing the stunning speed of the fall registered by almost all the macroeconomic variables (production, commerce, consumption, savings, investment, level of employment, wages, tax collection, credit, exports and imports, tourism, remittances, flow of transport, and so on). In its April report, which has been criticized for its excessive optimism, the IMF calculated a fall of the global GDP of almost 3%, which is not little. More realistic, the WHO has predicted a fall of almost 9%. At this rate, it is unlikely that the productive, commercial and financial paralysis will not derive in something like the Great Depression or even worse.

The following can serve as good examples: 1) in the USA, the largest economy in the planet, 33, 6 million people (almost 15% of the economically active population) have lost their jobs in less than two months; 2) in 2020, international traffic of goods and services could undergo a fall of more than 30%. Even if the historic levels of the Great Depression (25% unemployment in the USA and fall of the world commerce of 50% or worse) have not been reached, we are heading in that direction, and in a faster way than in the months following the 1929 crack.

As can be observed, no one knows very well how to save the capitalist economy from its own debacle. There are only conjectures. They seem to express an ideological and desiderative a priori rather than a realistic and rigorous analysis of the present state of affairs: neoliberals stubbornly demanding for more market and lesser state (as if there had not been enough thanatic doses of laissez faire), and neo Keynesians candidly demanding less market and more state (as if today’s late capitalism, hyper-globalized and hyper-concentrated, allowed just returning to the good old days of the welfare post-war Nation-State). The fact is that neither party escapes the framework that encloses them. Their analyses start and end within the capitalist logic, which they accept either with enthusiasm or with resignation.

* The authors thank AMO and FS for the translation of this text from the Spanish, and also Fernando Lizárraga for reading, making comments and suggestions.
The bewilderment is similar, in size, to that of the 1929 crack and the early 1930s. But there are three important qualitative differences worth pointing out. The first of these: in those days there existed an alternative to the capitalist ordering of the economy and the state. With all its defects, the USSR was a concrete reality (and the defects had not yet shown their worst side, as Stalinism was only getting on stage). The second is that capitalism was then expanding, the ecological limits of its “indefinite progress” had not become palpable yet, and the situation was not on the verge of the civilization catastrophe. The third is that there was nothing like the present pandemic, no sanitary emergency or panic or paranoid wave similar to what we are experiencing at present, at least on a planetary scale.

The crisis of the 1930s was essentially economic, the product of the intrinsic dynamics of capitalism: *grosso modo*, a mix of primary-industrial overproduction and financial bubble. There was no a priori certainty that the bourgeois order could overcome the crisis successfully. It was perfectly possible that the order would be overcome by a revolutionary wave and the Spanish spring of 1936 seemed to provide some credit to the optimism or pessimism (according to the point of view). But if, on the other hand, it succeeded in dominating the working class and politically controlling the situation, the capitalist system could eventually carry on with its growth. As we now know, this is what happened. Not only nazifascism but also Roosevelt’s New Deal and its respective relatives, managed to safeguard the bourgeois *status quo* combining in different proportions repression and cooptation.

That crisis indicated that the unlimited expansion of capital faced internal difficulties, so to speak. But there were no clear-cut external limits. The present ecologic crisis opens the debate about the problem of the external limits, the natural limits – rather than the social ones – of the unlimited accumulation of capital. However, there is nothing in present day capitalism that is properly external. Nature as an external limit of capital accumulation is a conception at the same time correct and one-sided. It is correct because the natural environment, though it is widely socialized, is something different from the more purely social dimensions of reality (such as the financial system). But it is one-sided because no social system can develop outside the natural environment, and because nature is increasingly being influenced by the anthropic factor, by economic, demographic, political and cultural processes (contamination, mining extractivism, agribusiness, overpopulation, consumerism, the omnipresent use of plastic materials, wars, nuclear accidents, migrations, and so on).

The aforementioned internal and external limits must be thus taken in a relative sense, *cum grano salis*. Nature and society are part of the same interconnected integrated reality, in which it is possible to make analytic distinctions but no clear-cut divisions, at least not at this stage of the course of human affairs. In the last decades, cultural ecology and environmental history have made decisive scientific contributions to the holistic approach. These make any old-fashioned segmented perspective pointless.

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Now then, how endogenous or exogenous should we consider the present pandemic? Is it a more natural than a social phenomenon or vice versa? Leaving aside conspiracy explanations - like those claiming that the virus was created in laboratories and accidentally or even deliberately spread by China (Trump was amongst the first to divulge this hypothesis), the dominant social representation in most countries and by mass media is that the emergence of COVID-19 is a natural phenomenon, an unforeseeable misfortune, an inevitable calamity. According to this point of view, authorities would not feel any retrospective guilt, no responsibility as to the origin of the pandemic. From now on they should only be evaluated by the efficiency or inefficiency of their sanitary response.

Both the conspiranoid Trump like approach and the fatalistic one of a natural misfortune, coincide in one key aspect: politics is what matters. Whether there is evil or irresponsibility of those who spread the virus, or even efficiency or neglect of governments on facing the problem, the center is on the subjective, on the agential. There are no fundamental objectives or structural factors; or, if any, they belong to the unchangeable: the life of the virus would be beyond human control and responsibility, except for the case of viruses created ex professo, in a Machiavellian way in a laboratory.

But it is precisely at this point where the capitalist ideological core of the representation is undoubtedly disclosed. It has been decades since the first alert of uncontrolled proliferation of old and new viruses caused by global warming, fast deforestation that leaves wild species with less and less room on the planet and forces them to unusual interactions; and of that modern Pandora’s box that are nowadays poultry and cattle in general. These animals are being raised, moreover, in terrible conditions of overcrowding, and survive only thanks to antibiotics and antivirals. Both big companies and governments are responsible for this situation, either by action or neglect. But this is still a taboo subject, with the exception of small minorities like vegans, ecofriendly and ecosocialist activism.

From the beginning of the long evolutionary process of Homo Sapiens, culture has been produced and reproduced, our existence has always had some kind of artificial contra natura action. But this tension, this conflict in capitalist modernity with the Industrial Revolution climbed to unsuspected levels. Not to mention the most contemporary decades of consumerism, globalization and extreme extractivism at large scale. Well into the twenty-first century, the relation nature-capital has reached such a degree of antagonism, of radical incompatibility, of destructiveness, that it seems only possible to describe using a warlike metaphor. This is what Mónica Cragnolini has done, for example, in an article, where the writer she retrieves the concept of ontology of war to analyze the phenomenon of biocapitalism.¹

If COVID-19 turns out to be, as it seems, a zoonosis (transmitted or not by bats), the time has come to deal seriously and urgently with the problem of industrial animal raising, not only for highly ethical reasons (fighting against animal abuse, rejection to anthropocentric violence towards other species), but also for basic public health reasons and, even with no dystopian or apocalyptic exaggeration, for strict survival reasons. Coronavirus is hardly the

first zoonotic pandemic or epidemic originated from some viral mutation related to intense market cattle-raising. It is just the last of a long list: mad cow disease, avian flu, swine flu. Even HIV-AIDS and Ebola could be zoonotic, and why not the Spanish flu that wreaked havoc back in 1918. In the twenty-first century the proliferation of lethal diseases of animal origin has become a chronic massacre. The different types of zoonoses are not, then, an external anomaly to the bourgeois economic order. We can, and should, consider them products typical of late capitalism and its irrationality.

However, this topic is seldom spoken of. Authorities and media, rulers of different walks of political thought and business people of all trends seem to coincide over something: what is past is past, past and gone. It so happens that both progressivists and neoliberals alike have supported, to equal extents and without great differences, the imperative for the permanent economic growth, for the unlimited expansion of the agrarian border to the detriment of biodiversity, and for a savage application of a factory regime to the cattle raising activity. They overlooked certain previous warnings such as the avian flu, the swine flu and other zoonoses, plus countless scientific studies and documents produced by native communities and organizations of ecologists. The productivist-consumerist show had to go on. And the truth is that there is now no ground to expect that COVID-19 will make them revise their perspective, even despite so much talk – relaxed or sensationalist – of the bat soup in Wuhan. They all hold firm to their belonging to capitalism. They avoid reflecting about the increasingly evident connection between zoonosis and capitalism, as if it were taboo.

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However, there is a real battle of narratives in which, on either side of the ideological spectrum, we find equally inconsistent explanations for the eventual sanitary success or failure at facing the pandemic crisis. The same measures, or very similar measures, are either enthusiastically praised when enforced by a government of a given political field, or rashly condemned when enforced by a government of the opposite field. Day after day, people are poisoned by news about the amount or the rate of infections and deaths, and by accusations and encomia to the authorities in charge. It looks as if the survival of the species depended exclusively on spur-of-the-moment decisions. And the embarrassing data are put to one side, because this is the moment to take fast action. Those in government today must feel either like Churchill in 1940, offering blood, toil, tears and sweat, while handling the massive attacks of the *Luftwaffe* in the middle of the Battle of England, or like president Whitmore (Bill Pullman) in the film *Independence Day*, facing an invasion from monstrous aliens coming from outer space.

But a careful analysis of the numbers of the pandemic does not provide grounds for such pessimism, as we have claimed in a previous article.\(^2\) If the WHO statistics are calmly scrutinized, Coronavirus appears far – very far, to be honest – from other causes of death,
such as cancer, heart disease, traffic and work accidents, illnesses related to poverty and peripheral regions (cholera, TB, malaria), crime, HIV/aids, and suicides.

On a global scale, COVID-19 reveals great geographic differences. The numbers suggest that long-standing geopolitical structural patterns, rather than the efficiency or the incapacity of circumstantial political decisions, account for the incidence of the pandemic. The death rates per million inhabitants vary almost incredibly from region to region. To the inside of within each region, by contrast, the results are often quite similar, even when the policies used for facing the pandemic had been profoundly different among states. True, it could be claimed that certain governments have been more efficient than others in controlling the pandemic, but seldom does the better or worse performance of a state in a certain region resemble the typical performance in another region. Regional differences are surprisingly marked.

Let us now look into the data. Africa and India, the two great hotspots of global poverty, show rates from nil to 15 deaths per million inhabitants. On the opposite side, Western Europe and North America (USA and Canada) have in almost all cases more than 150 deaths per million, with Belgium at the top of the scale (+800), and only a few countries below 100 cases per million. The nations of post-communist Eastern Europe are almost without exception uniformly between 5 and 72 deaths. Rates in Eastern Asia are between 0 and 9 deaths per million inhabitants. Latin America fluctuates, in general, between 1 and 189.

What happens to the inside these regions? Let us start in Eastern Asia. Despite the fact that the three states applied very different measures, the rates in South Korea are similar to those of China and Japan. In China, complete lockdown was enforced (but only in the most affected provinces); in Korea, early detection based on massive testing; in Japan, partial lockdown together with strict hygienic measures.

Geographically close, the two largest and most developed countries in Oceania, Australia and New Zealand, have practically the same low death rates (approximately four victims per million inhabitants), disregarding the diverging strategies that their respective governments adopted (partial quarantine in Australia, complete lockdown in New Zealand). Notwithstanding their similar infection rates, and even with different sanitary policies, both countries successfully managed to avoid peaks of infection.

If the pandemic seemed to have been controlled in these countries, the same does not hold in Western Europe and North America. There, the deaths per million inhabitants are in hundreds, in almost all the states. Only some Nordic countries and Austria seem to be below these figures, and only partially so. The strict quarantine policies did not save Italy, Spain and France from ranking as the most affected countries, possibly because the measures were adopted too late (the question is, would late adoption of measures have helped at all, or just been the means to show that something was being done, and thus

Source: Our World in Data (University of Oxford): https://ourworldindata.org. All forthcoming data in this article are based on that source. Updated: June 1, 2020.
relieve conscience a bit?). Drastic lockdown seems to be able to make up for the great economic and social sacrifices that it demands only when it is implemented at an early stage, before the wave of infection is unleashed. Conversely, the almost absolute lack of isolation in Sweden and the Netherlands has not pushed them to the top of the ranking of affected countries: their mortality rates are significantly lower than those of the Italy and Spain. Despite the strictness of the measures adopted by Macron, and considering that both Sweden and the Netherlands have been much more permissive, the French are paradoxically not better off than the Swedish and are indeed in a worse situation than the Dutch.

The former socialist Eastern Europe presents quite another reality, a much less somber picture than that in Western Europe: its rate of deaths per million inhabitants fluctuates between 5 and 72. Again, this holds relatively independently of the measures adopted: for instance, a quite strict lockdown in the Ukraine and practically normal everyday life in Belarus both result in similar figures: 16 and 24 deaths per million, respectively. The same can be said of Poland and Russia. The Slavic neighbor of Germany, quarantined without delay in mid-March, has had 28 deaths per million, while the Eurasian power presided by Putin, quarantined with a certain delay in late March, paradoxically shows a similar rate: 31. The relative mildness of COVID-19 in the former communist Europe results from various structural elements: peripheral situation in the global traffic of people and goods, younger population pyramids, less demographic density and perhaps even a higher threshold of communal immunity in association with, so far, the BCG vaccine in the charts of universal and compulsory vaccination (various specialists are leading research on this hypothesis). In most developed Western European countries, and in other parts of the world, such sanitary policy was abandoned in the last third of the twentieth century, with TB ceasing to represent a serious sanitary problem.

Now for Latin America. Argentina and Brazil can be considered, more or less, like the world antitheses in the reaction to Coronavirus. Argentina decided on a stricter and earlier quarantine than anywhere else, in relative terms: complete lockdown before any communal circulation of the virus could take place. Brazil has had, together with the USA, the president who handled the pandemic the most irresponsibly, with a level of blindness and stubbornness verging on homicidal stupidity. This notwithstanding, Argentina – with 12 deaths per million inhabitants – surpasses India’s 4, or the even lower figures of many African nations; whereas Brazil, with 136 per million, is far from those of Spain, Italy, Great Britain, France and the USA (various hundreds). With a less strict isolation, Uruguay presents a lower death rate than Argentina, even with a larger population density.

Ecuador is by far the Latin-American country with the largest number of deaths per million inhabitants (189). Paraguay, by contrast, is one of the least affected in the entire region (it hardly has 2 deaths). It would be not intellectually earnest to ascribe the disparity to the degree of sanitary skill and social responsibility of their respective governments. It should be said in passing that these two governments implemented the quarantine within the same few days. It is clear that the explanation must be looked for somewhere else. Ecuador is the country with the greatest population density in all South America, while Paraguay is one of the least densely populated. Ecuador, with its port Guayaquil (where the pandemic caused
the greatest havoc) is part of the Pacific international maritime circuit. On account of its Mediterranean and peripheral location, Paraguay is one of the most isolated nations of the continent.

In Asia, the number of deaths per million inhabitants is very low. Much has been said about China, as it is the original focus of the pandemic, and also about South Korea and Japan, for their presumably risky nearness to the oriental colossus. But, at the end of the day, it was just *Much ado about nothing*. In Japan and South Korea, deaths have been scarce, both in relative and in absolute terms. In China, it is true, more than 4600 people have died, but because it is the country with the largest population on the planet, the figure represents an extremely meager percentage (something that the Western media tend to overlook, erroneously preferring, in general, absolute numeric comparisons to relative ones). None of the three most important countries of Eastern Asia have more than 10 deaths per million inhabitants. The distance with the situation in Western Europe and North America is enormous. India, the second most populated country in Asia and in the world, has a rate of less than 4… The picture in the Asian Southeast, central Asia and Russian Siberia is similar. Also, in the Middle East, with only two very partial exceptions: Iran and Turkey (92 and 54 deceases per million inhabitants). These figures remain quite far from those in the Western countries that most seriously suffer the scourge of COVID-19.

Now about Africa. It is, beyond any doubt, the continent that suffers the least impact of the pandemic (not considering the Antarctic, of course). Many African nations have rates that are lower than 4 or 5. The only countries that rank over 10 are South Africa and Algeria, with only 11 and 15 fatal victims of Coronavirus per million inhabitants. Just like Asia, the African continent offers a very uniform aspect, without outstanding differences among its regions (Maghreb, South Saharan Africa, etc.).

But also in Asia and in Africa there are different kinds of sanitary restrictions and there are certainly no few draconian measures such as the quarantine. Measures that, given the vulnerability of the socioeconomic conditions in the majority of these countries, could cause a humanitarian catastrophe that could be much worse than COVID-19. In an article recently published by the *New Left Review*, N. R. Musahar has warned:

> The lockdown has transferred the burden of the coronavirus pandemic almost entirely onto the shoulders of the poor and marginalized. It is clear from the video clips on social media of ordinary people expressing their anger and helplessness that most see the lockdown as a calamity far greater than COVID-19 itself. This may be partly because the full force of the epidemic has yet to arrive, while state mitigation of the lockdown’s effects has been pathetically inadequate. But their arguments cannot be so easily dismissed. India’s young population and the heavily age-biased nature of this disease means that the fatality rates of the coronavirus could be somewhat lower than in the West, especially amongst poorer communities with generally lower life-expectancy. But brutally expressed, workers may starve to save the primarily middle-class from dying. And for anyone who doubts that the possibility of starvation is real, it’s worth noting that the Chief Minister of Kerala, widely
praised for his response to the pandemic, felt the need to explicitly reassure people that he
would not allow anyone in the state to starve to death as a consequence of the lockdown. 4

Musahar is right. Sometimes, as the saying goes, the cure may worse than the disease. This
applies not only to the Indostanic subcontinent, but also, in general, to Africa and to
numerous Asian and Latin American countries of the so-called Third World, with abundant
structural problems such as poverty and indigence, undernourishment, overcrowding,
unemployment, precariousness and informal employment.

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How are we to account for the regional disparities on a global level? Evidently, the key
variable is the number of people with pre-existing respiratory or lung diseases. This kind
of condition is the first cause of death in the poorest countries. And it is, by contrast, a very
much secondary cause of death in the richest countries. Crudely put: in the poorest
countries people who suffer from respiratory or lung diseases massively die as a
consequence of the combination of such diseases with nurturing problems, plus the scarcity
or lack of adequate medical treatments (vaccines, respiratory equipment, antibiotics, etc.).
As it enters these countries, COVID-19 finds few potential victims. The rich countries, by
contrast, have an enormous mass of inhabitants – in absolute and/or relative terms – with
respiratory or lung ailments, who survive with the aid of vaccines, regular medical
assistance and a state of permanent medication. When entering the most prosperous
countries, COVID-19 runs into a great quantity of potential victims: there are many people
who suffer from respiratory or lung conditions, and that unlike what happens with other
pneumopathies, the health systems do not know how to treat coronavirus because they lack
preventive vaccines. This circumstance is worsened by the fact that, because lung or
respiratory conditions are neither the most usual nor the most important, there is not much
practice in dealing with them (the Argentine virologist Pablo Goldsmith has provided a
good explanation for this)5.

The second decisive variable – pre-existing respiratory or lung conditions – is old age. However, as seems apparent according to the Japanese case (Japan’s death rates per million
are far from those in Europe and North America, though its population pyramid is even
more regressive than the Italian one) the quid of the matter is not so much the quantity of
aged adults but rather their health and housing conditions. So far, there is no precise
research, but it appears that Japan succeeds in reaching high levels of longevity – equal or
higher than those of Western Europe – depending less on the pharmacopoeia: their high life
expectancy looks like the result of a healthier life (at least in nutritional terms) rather than
of massive medical procedures. Patterns of co-habitation should be added to this: the largest
number of fatal victims of COVID-19 is in the homes for the old: half in Europe, almost
two thirds in Spain. Among the elderly who live with their families, the mortality rate is

4 “India’s Starvation Measures”, New Left Review, n° 122, March-April 2020, pp. 29-34. Musahar is
actually a nom de plume; it is likely that the author has used the word for a pseudonym, as “musahar”
translates as “rat-eater” and refers to the extreme destitution experienced by the Musahar caste in India, as
they are forced to eat rats in order to survive.

5 https://www.youtube.com/watch?v=CtoCNhlLsQk&feature=youtu.be.
lower. The massive concentration of people over 65 – the main risk-group – in private or communal homes is a major breeding ground for the coronavirus, but this phenomenon appears to be more widespread in the West than in the East.

*Insularity* and *relative isolation* from the great international traffic circuits are also important factors; so appears from the cases of Australia, New Zealand, Paraguay, Bolivia, Japan, Mongolia and Madagascar, among others. Less traffic of goods and people, fewer business or study trips, fewer tourists coming to visit or returning from abroad, frontiers that are easier to block and control, lack of neighboring countries or distance from them, and so on. On the opposite extreme we find the North of Italy, Spain, Paris, London, New York; great meccas of global tourism. Geography has an incidence too.

The importance of *sanitary resources* – material, human and technological – prior to the outbreak of the crisis cannot be overlooked: number of hospitals, beds, respiratory equipment, ambulances, laboratories, medical and nursing staff, test kits, equipment and tools in general, and so on. Those developed countries whose public health systems have suffered great reductions and privatizations became more vulnerable: Italy and the United States, for instance.

Other two elements to be taken into consideration are *demographic density* and *urban overcrowding*. For obvious reasons, any phenomenon of human concentration (great metropolis, precarious housing, jails, households, etc.) involves certain sanitary risk of COVID-19 and any other contagious illness. It is not surprising that New York, Sao Paulo, Montreal and Guayaquil are some of the American communities most affected by the pandemic. Nor is it strange that, within Argentina, it is Buenos Aires which is at the top of the morbidity and mortality rates.

The *climatic factor* could also have a certain indirect influence. Because COVID-19 affects people with lung or respiratory conditions in particular, winter is a more risky season than others. The great disparity between the Northern and the Southern hemispheres could be due, at least in part, to such circumstance.

The *cultural factor* should be added to the list: ways of greeting, hygienic habits, etc. In many Asian societies (like Japan), bodily distancing has been traditional. People in those countries are not used to greeting each other by kissing, hugging or shaking hands. People take their shoes off before going inside their houses or apartments, and they have long been used to wearing masks preventive at the slightest symptom of a cold, or a temperature. In Italy and Spain, on the contrary, such habits are completely absent.

And we should not dismiss questions of a *genetic* nature (greater or smaller predisposition to catch a disease according to DNA) or other hypotheses being researched such as the *massiveness* and *continuity of certain vaccination policies*. This, for instance, could eventually account for the low levels of infection and mortality in the so-called Third World, the communist and post-communist countries, Japan and South Korea, where the
BCG has remained in the compulsory vaccination charts up to the present day, or for longer than in the USA and Western Europe.

How important should we consider specific measures adopted by the authorities for the pandemic once it broke out? Contrary to the current common sense, we should conclude that they have relatively little importance: pre-existing structural conditions have shown a much greater influence. It has been the fastness of the response, rather than a specific form of the response, what seems to have had a certain positive influence in controlling the pandemic. And still the side effects of the most rigorous sanitary measures, which could be dramatic in some regions, are yet to be seen.

In any event, there are no general single-causal explanations for the pandemic, at least not empirically satisfactory ones. Here is presented a more complex, multi-causal model, in which some factors strengthen each other or counteract in a variable way. A multi-causal model that assumes the existence of a hierarchy or an order of importance – a not absolutely uniform but a rather general model – among the diverse intervening factors.

The measures adopted by the governments at the outbreak of the pandemic, not diminishing their importance or ignoring its usefulness – or harm – cannot alter those pre-existing objective conditions. Thence the relative interregional heterogeneity – and also intraregional homogeneity – that the coronavirus has shown in its expansive dynamics, with relative independence of the emergency policies adopted, more or less similar or different in time and fashion. Conjunctural actions can improve or worsen the state of affairs, but they are unable to erase the limits and the structural pressures.

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The pandemic differences between the Western world on the one hand and Eastern Asia on the other are being subjected to ideological interpretations in the old and negative sense of the word “ideology”: false consciousness with little attention to empirical evidence. Discourse points at a more collectivist and authoritarian culture, grounded on the Confucian tradition (China, Japan, South Korea, Taiwan, etc.), and opposed to a more individualistic and liberal culture (European West, USA and other Anglo-Saxon countries). Preferences may vary, but the contrast seems to be accepted as evidence both by detractors of the rise of Chinese police-digital authoritarianism (an almost dystopian variant of biopower), and by supporters of the firm communitarian health policies implemented by the strong and intervening states of the far Asian East.

As for the rest, the figures of Australasia are similar to those of Eastern Asia. Despite their enormous demographic, political and historic-cultural disparities, the countries of the Western Pacific celebrate together their success before the pandemic threat, plus the merit of having obtained a fast stranglehold in the very region where COVID-19 sprang up. Both the gigantic, authoritarian and Confucian China and the small, liberal and Anglo-Saxon New Zealand can boast of having defeated Coronavirus.
It is remarkable that, when it came to accounting for the disparity of the pandemic impact in Western Europe and Eastern Asia, Byung-Chul Han chose to recycle the clash of civilizations, when two “white” countries close to the Far East, Australia and New Zealand, assume a critical standpoint regarding his culturalist thesis. Not only that: Australia and New Zealand are states of British ancestry; that is, Western countries in which individualism and liberalism are more firmly rooted than in others where, for instance, the Latin culture has been predominant. These countries are, for example Italy, Spain, France and Portugal. The assumption of the Korean philosopher that the Mediterranean Europe ought to have had a better sanitary performance than the Anglo-Saxon Australasia is ostensibly false, even in the case of Portugal, the least unfavorable. Communal cohesion does not seem to be an aspect that fundamental. Within the Islamic world, how then to explain that the ultra-fundamentalist Iran’s mortality rate by coronavirus is twice that of Turkey and Bosnia-Herzegovina, the most westernized Muslim countries?

Other contrasting cases have been polemicized. The Argentine president Alberto Fernández recently made a comparison between the situations in Norway and Sweden, expecting that the result would support the appropriateness of his strict sanitary policy for the pandemic: the so-called ASPO (Aislamiento social, preventivo y obligatorio, in Spanish: social, preventive and compulsory isolation), a massive and total confinement adopted very early and that has been in force for almost two months now. Norway – with a relatively early quarantine – and Sweden – where even bars remain open – have mortality rates per million inhabitants that certainly show a great difference: 43 versus 325. These figures notwithstanding, what the comparison shows, or does not show, is doubtful, to say the least. After all, the average mortality proudly exhibited by the cautious and prudent Norway of Solberg is not dramatically distant from the one we see with a sense of scandal in Brazil, with its irresponsible and deranged president Bolsonaro. Meantime, the rates in the flexible Sweden are lower than those of Spain, Italy and Belgium, three countries that have opted for the strictest form of confinement. But besides, why should we agree that, with all evidence to the contrary so far, the death rates per million inhabitants in Latin America tend to be analogous to those of Western Europe? Up to now, in view of the overall picture, statistics show almost uniformly the contrary. Partial exceptions are good for bringing nuances to the fore, not for validating or refuting.

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7 The demographic density of Sweden is larger than that of Norway, 25 versus 18, and Sweden has a larger percentage of older adults. In Sweden, 20% of the total population are over 65; in Norway, the percentage is lower: 16% are older than 65 (Source: PopulationPyramid.net). Another important fact to be taken into consideration is the place of each in the global ranking of most frequently visited tour destinations: Sweden is in number 46; Norway is below that, in number 51 (Source UNTWO: World Tourism Organization). In a long interview with Infobae, a digital paper in Argentina, the Norwegian epidemiologist Camilla Stoltenberg, one of the major experts and state consultant in Solberg’s team, relativized, with varied and sound reasons, Sweden’s presumed sanitary failure. https://www.infobae.com/america/mundo/2020/05/23/camilla-stoltenberg-maxima-epidemiologa-de-noruega-nuestra-cuarentena-fue-muy-relajada-todos-podian-salir-a-caminar-y-las-tiendas-estaban-abiertas.
Nobody knows for certain how effective the measures adopted are. Rather, the so well-defined regional contrasts seem to show – as we have claimed – that the impact of the pandemic is determined by pre-existing structural conditions rather than by occasional decisions and urgent actions of those in government. The comparisons Argentina-Brazil and Norway-Sweden seem to reveal that the complete isolation measures can indeed significantly reduce the effects of the pandemic, but within clear and well distinguished regional parameters (and the worst Latin American results are not too different from the best Western European results). And the comparison between Japan and China, or Russia and Belarus add uncertainty about the effectiveness of strict lockdown in respect of other, more flexible but clever, control strategies.

On the other hand, it is a fact that isolation has social and economic consequences. Here, too, regional differences are marked. In India and the Philippines, for example, the quarantine has pushed millions of people to the verge of starvation. Calling off all economic activities is not the same in central, developed and rich countries - that are somehow capable of aiding their most deprived communities – as it is in underdeveloped and poor countries in the periphery: in the latter, pandemic can very well end up in famine. Neither is the impact of the economic paralysis on enterprises that have accumulated large fortunes comparable to the impact on the workers without any saving capacity. In the first case, profits are in danger; in the latter case, survival is.

The same can be said of other macroeconomic variables, such as the levels of unemployment, precarization and informal work, or the per capita GDP and the distribution of wealth. The Norway that Alberto Fernández refers to has a background that is unthinkable of in Argentina. Scandinavian societies, prosperous and not too unequal, can make material efforts for long periods, something that their Latin American counterparts – with enormous rates of unemployment, underemployment, poverty and marginality – have no chance of making; at least without an authentic revolution (the Argentine government went back on its bleak proposal to impose taxation of 1% on great fortunes and its later intention to reconsider does not look too firm or promising. At the same time, and in open contrast, a reduction of 25% on the wages of workers in paralyzed private sectors was covertly passed). The Argentina that resulted from the Macri administration, debt-ridden and in acute recession, has poverty and indigence rates, and informality figures, that are near 40% and are constantly going up as an effect of the pandemic crisis. The motto Stay at home is an impossible target, a suicidal one, for vast sections of Argentina and the rest of the so-called Third World.

At the same time, the dichotomy health-economy is quite fallacious. Whose health? Poor people’s health, which are already out of the system? Middle and high-class people, well integrated to consumerism and formal employment? What do we really mean by economy? The big companies’ profit or the poor people’s sustenance? The bourgeoisie, just like the media and the economists who support them, are only concerned about their profit. Their class selfishness is disgusting. But those, like Alberto Fernández’ government in Argentina, who raise a sanitarian talibanism disregarding the material conditions of existence of humble people, have also a share in the responsibility. They stand on the wrong premise –
implicit rather than explicit – that economy is synonymous with eagerness for profit and concentrated wealth.

Defending economy does not necessarily mean playing into the hands of the neoliberal right, as some progressivist sectors claim (sectors which, by the way, do very little in practical aspects, to impose more taxes on richer people in order to finance the present sanitary and social emergency). Economy can – and should – be defended as that which makes the vital reproduction of working classes and popular majorities possible. It is all very well to care more about public health than about private enrichment, general welfare than corporate greed. What is not right is to care more about the disastrous consequences of this long quarantine than about the work and sustenance of the more vulnerable sectors, for whom income stability and saving capacity are only fairy tales.

There is an enormous range of options between Trump’s and Bolsonaro’s doing nothing at the beginning of the pandemic and the draconian indefinite quarantine of the sanitary talibanism. Unfortunately, these options are not being publicly debated. It takes really narrow minds to mechanically associate caring about economy with defense of private profit. Caring about economy can well mean the establishment of a basic income per citizen, a progressive reform of the tax system or even expropriation of capital. On disclosing all this it becomes transparent that it is not exactly narrow-mindedness which leads to the association between economy and profit. What underlies is, actually, the substantial commitment to an economy based on private property over the means of production, the market and the capitalist accumulation: this is what blocks any thought of other types of alternative economies.

The contrast between health and economy, now massively assumed, has become a nightmare. Although it may sound implausible in the midst of the world panic caused by COVID-19, the main sanitary problems humanity faces are, by far, both famine and lack of drinking water. The fact that millions of children die every year of undernourishment (or even collateral diseases like diarrhea) does not cause any social distress in the international community, and nor is it reason enough for drastic social and economic measures. This, in fact, says a lot about the world we live in. But the panic unleashed by a pandemic that, so far, does not exceed 400000 deceases, on the other hand, does seem to be really frightening. This number may seem striking but it is not that much, really. In order to join the somber ranking of the ten most important causes of death at a global level (even in the tenth place), the virus should at least take a million and a half lives in 2020. Mortality in the next months should triple that of the first term of the year, something highly improbable, given the fact that in almost all countries the curve of infection tends to flatten.

In the modern society of show business, the logical and empirical rigorousness, the soberly measured analyses, the respectful comparisons of the principle of proportionality and the contextual examination, are considered trash. Absolute numbers are preferred over relative ones (almost nobody speaks of Belgium but China is constantly mentioned). Speculative, anecdotic arguments abound, and a priori approval or dismissal are better valued than data and evidence.
The great majority of governments, just as the bulk of public opinions intoxicated by mass media, seem to insist on believing that the pandemic is a terrible calamity that can be controlled by an adequate intervention by authorities. There is no doubt this is the subjective situation prevailing nowadays. However, hard objective data tell us another story. The death rate by COVID-19 is far below the one by cholera, AIDS, malnutrition, you name it. Even in countries most affected by the pandemic the figures are not catastrophic.

Italy has exceeded the 30000 deceases. The absolute amount is bewildering. Few people remember that in 2019 almost 650000 people died of different causes, about two thousand per day. Even in the improbable case that this number of deaths would not have occurred without the pandemic (that is, if we add 30000 more cases to the statistic of deceases) the general rate of mortality in Italy would climb to approximately 5% in relation to 2019. Outside of any exceptional event, fluctuations of ± 5% are usual in general death rates. In Spain, for instance, from 2013 to 2014 there was an increase of 7% in the number of deceases. This phenomenon did not trigger any public concern. And taking into account COVID-19, the cases in Italy and Spain are quite extreme, well above the world mean.

The comparison with the 1918 pandemic (so well-worn these days) actually refutes the paranoid alarmism we are living with. The incorrectly labeled Spanish flu caused from 20 to 50 million deaths over a world population of about 1.850 million inhabitants. Taking the lowest of these numbers, in order for COVID-19 to reach a comparable figure, it should cause no less than 80 million deceases. Such skeptic line of reasoning, based on compared statistics and the logical method of reductio ad absurdum, might well invoke arguments galore.

Why then, if the numbers of the present pandemic are not – either in relative or in absolute terms – so overwhelming, so exceptional, is humanity in such an unprecedented situation? One of us once tried a more exhaustive explanation. It should be enough to remember now that the key to the matter seems to be that the coronavirus has especially affected countries and social classes normally invulnerable to the great causes of death, worldwide and particularly invulnerable to frightening contagious diseases. The abysmal disparity of impact of these diseases on the countries with lower incomes (their very first cause of death) and those with higher incomes (a minor sanitary cause of death) explains both the powerful subjective effect of the current pandemic on high classes and rich nations (who encounter a very unusual risk) and its low factual incidence in Asia and Africa.

If the panic generated does not correspond with the objective numbers, nor does the efficiency of governmental measures agree with the official and officious narrative. Moreover, these figures do not seem to fit into the explanations circulating around, which are based on a supposed omnipotence of the emergency policies improvised by the

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authorities, or even on speculative interpretations inspired in something like a “clash of
civilizations”. There are no public health panaceas in extremis and the culturalist theses à-la
Toynbee or Huntington only darken the matter.

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Beyond the rhetorical fireworks, the ideological substratum of dominant interpretations of
the current pandemic crisis is what we might call the game of small differences and the
hyper-politicization of the long duration processes. Paradoxically, while the range of
political alternatives was narrowing in extremis after the fall of the Berlin Wall, the
politician explanations gained a new impulse. In response to M. Thatcher’s “there is no
alternative”, there appeared retorts like “there are many alternatives with minimal
differences amongst them”. The capitalist structure of production relations was considered
an unchangeable and irreversible fact both by the neoliberal orthodoxy and their
progressivist or populist slanderers. After the breakup of real socialism, those who,
implicitly or explicitly (willingly or unwillingly) assumed there was no more possible way
out beyond capitalism started to notice subtle differences within capitalism itself. Of
course, these differences already existed. But the possibility of seeing how enormous and
substantial they were was a consequence of the disappearance of communism from the
range of historical chances. In the face of a possible radical otherness of civilization, such
as the Soviet Union and its satellites, the differences between Yankee, Rhenish or Japanese
capitalism seemed mere nuances, scarcely relevant.

Nobody knows whether a new system alternative to capitalism might succeed in the future.
In any case, the socialist forces – or generically anticapitalist – are undoubtedly weak at
present. Thus, from the strict point of view of the situation analysis, the fact that there is no
available option outside the bourgeois society could not be intellectually questionable – a
pessimism of intelligence or reality – claimed Gramsci and Mariategui. However, the
elimination of an anticapitalist alternative form the horizon of the possible – or the
immediate – has led the ones assuming that possibility to flawed analyses and debatable
diagnoses. Obviously, those who are doubtful about a socialist alternative, an outdated
chimera of the short twentieth century, do not need to embellish specific forms of
capitalism, nor feel condemned to offer inconsistent explanations of the current processes.
However, this is quite usual in the contemporary intellectual panorama.

And yet, the deep contradictions of capitalism underlie all that has been happening in the
world during the last decades. The unviability of infinite economic growth on a finite planet
is rather obvious. This logical impossibility is already appearing empirically: there are all
kinds of ecological disasters. But the commitment to a social regime based on the
imperative of indefinite material progress is the founding stone of all states existing today.
It is not surprising that in the majority of public speeches, on either side of ideological
frontiers within capitalism (conservatives versus progressivists; liberals versus populists;
pro-market orthodoxy versus pro-state heterodoxy), the relation between the pandemic and
the ecological situation is omitted or minimized. Moreover, very little is said about the
relation between capitalism and pandemic while there is a brutal contrast between health
and economy. On this same line, it is also not surprising that in the so much polarized Argentina of la grieta\(^9\) the policy of the lockdown by the government (national and Peronist) has been supported by the three provincias radicales (Mendoza, Jujuy, Corrientes) and also by Buenos Aires (capital of the country), also controlled by Macrism, (the four jurisdictions which are center-right opponents to the national government).

The regional differences shown in this text – something that blows into the face of anybody analyzing the data – are being systematically ignored. The typical approach focuses on a superficial political level, persistently leaving aside both long-term structural analyses and the agential possibility of changing socioeconomic structures. Yet, this possibility remains open although with different circumstances and degrees of feasibility. As a consequence, thin analyses predominate. Thin because they must omit obvious information (the scandalous regional differences already mentioned, for example), discard revealing questions (such as why is there so much alarm over COVID-19, the rate of mortality of which is far away from those of undernourishment, cholera or malaria?) and avoid the crossing of variables and dimensions (as ecology and capitalism).

The result of all this is a dreadful public discussion of problems, together with a general bewilderment that goes beyond both geopolitical and social frontiers. Humanity seems to have entered blind folded into the eye of the storm, in a crisis of civilization. Its only difference with the Greek goddess Themis is its unbalanced scales and its blunt sword.

\(^9\) Grieta (in Spanish), literally “gap”. In Argentina, this metaphor is usually used to refer to the politico-ideological discussion and confrontation between Kirchnerism (populism) and Macrism (liberal-right wing).