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The pandemic and the military: towards total defence?

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The COVID-19 pandemic, which broke out in December 2019 in the Chinese city of Wuhan and quickly spread across the globe, will have a lasting impact on worldwide economic, political and strategic developments. Some observers question whether the different approaches by nations to the pandemic may benefit or hinder global economic competition.¹ Others worry that some states may exploit the pandemic as a pretext to curtail individual freedoms.² Still others note the emergence of an outright “battle of narratives” on the origins of the virus and the correct approach to bringing it under control, adding fuel to an already lingering “systemic” contest.³

The global pandemic has also thrust the role of the military into the fore. Around the world, the mil-

itary was tasked with transporting medical personnel and supplies; setting up field hospitals; and providing many other services to support civilian health care efforts. As during natural disasters or even industrial incidents, the military emerged as a unique actor. Given its distinct toolkit, which ranges from transport aircraft to medical supplies, and its ability to respond to an emergency on short notice, the military became a major instrument in fighting the spread of the pandemic. NATO, the world’s largest military Alliance, coordinated several hundred missions to transport thousands of medical personnel and supplies; helped build field hospitals; and furnished tens of thousands of treatment beds.⁴

A growing role for the military?

The use of the military in fighting pandemics and other health challenges is not new. An early example dates back to 1904, when US military engineers and the “sanitary police” drained swamps along the Panama Canal Zone to reduce the area of mosquito-breeding sites. More recent cases include the response to the tsunami that hit parts of South East Asia in late 2004, and fighting Ebola in Sierra Leone in 2014. The military also played an important role in vaccination campaigns on the African continent throughout the 20th century.

The benefits of relying on the military to deliver humanitarian assistance, especially during a public health crisis, are obvious. During the outbreak of an infectious disease, the military’s capacity for rapid, large-scale deployment can be life-saving, particularly in places where health systems and governments are poorly resourced. Hence, if one assumes that large-scale pandemics will become more frequent, and that phenomena such as climate change will exacerbate the

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1 K. Mahbubani, “How China could win over the post-coronavirus world and leave the US behind”, *Market Watch*, 18 April 2020.

2 S. Simon, “Subtle connections: pandemic and the authoritarian impulse”, *Survival*, Vol.62, Iss.3, June-July 2020, pp.103-111.

3 See for instance F. Gaub, L. Boswinkel, “Who’s first wins? International crisis response to COVID-19”, *Policy Brief*, No.11, EU Institute for Security Studies, May 2020; B. Tertrais, “Year of the rat: the strategic consequences of the Coronavirus crisis”, *Note*, No.17, Fondation pour la Recherche Stratégique, April 2020.

4 For a NATO military insider perspective see Lt.Gen. O. Rittimann, “NATO and the COVID-19 emergency: actions and lessons”, *NDC Policy Brief*, No.15, NATO Defense College, September 2020.

number and scale of natural disasters, it is also fair to assume that the calls for the military to intervene as a first responder in such emergencies will only grow louder.

However, merely equipping national militaries with more resources will not suffice. Leveraging military – and indeed civilian – contributions to help overcome health crises requires a number of additional measures, both by individual nations and international organizations. The measures range from closer institutional cooperation to specific improvements in national pandemic preparedness.

Towards total defence

Establish a new security “narrative”. A new security narrative could help bridge the civilian and military sectors. The aim would not be to “militarise” the civilian sector, but rather, do away with organizational or ideological stovepipes that

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hinder smooth cooperation among nations and institutions. Central to this narrative would be “resilience”. This notion may well become a security policy paradigm on a par with the more familiar terms of “deterrence” and “defence”. While building resilience is essentially a national responsibility, it also involves

cooperation and sharing of best practices among nations. Given the presumed long-term impact of the COVID-19 pandemic, a resilience-oriented narrative would resonate among the wider population.

Broaden the concept of defence. The notion of defence will increasingly have to be understood as “total defence”, as practised, for instance, by Nordic European countries. “Total defence” would encompass non-military elements such as civil defence (including countering-disinformation), civil emergency planning, or medical stockpiling. As the economic fallout of COVID-19 will strain and stretch defence budgets, and given that deterrence and defence will continue to define the posture of armed forces, it is all the more important to make sure that broadening the notion of defence is not portrayed as an expensive departure from established policies. Rather, emphasis must be placed on the importance of broadening nations’ toolkits for dealing with non-kinetic, but extremely harmful challenges.

Enhance civil preparedness. Civil preparedness is a primary instrument to improve national resilience. It is about the capacity to cope with the full range of challenges, from natural disasters (including pandemics), cyber and hybrid attacks, to armed conflict. Within NATO, Allies have agreed on seven baseline requirements for national resilience, against which they can measure their levels of preparedness.⁵ These requirements need to be continuously adapted to ensure that certain core tasks are maintained under the most strenuous circumstances. Of particular significance are the continuity of government, essential services to the population, and civil support to the military.

Enhance cooperation and coordination between key actors. Cooperation and coordination apply to the players on the ground during an emergency situation, such as local government authorities and the foreign militaries deployed there. Major institutions that deal with health crises, such as the World Health Organization and national governments are equally bound to ensure cooperation and coordination. For NATO, interaction with the UE is crucial. COVID-19 proved that NATO-EU links long established before the crisis (e.g. between NATO’s Euro-Atlantic Disaster Response Coordination Centre (EADRCC) and DG ECHO) are effective and work smoothly, whereas links developed during the crisis were less robust. Hence, broadening staff-to-staff interaction on non-military challenges, and integrating pandemic response into both institutions’ hybrid work strands are two obvious lessons to be learned.

Improving operational preparedness

Improve stockpile and demand management. Nations must identify critical items that ought to be stockpiled. They also need to develop better networks between suppliers and customers. In the area of mobility and transportation, transport contracts could be pre-established, as could be border-crossing exemptions for specific personnel and supplies. Other improvements could be made in funding mechanisms to facilitate the expedited purchase of relevant equipment.

Set up pandemic response contingencies. Nations could enhance their effectiveness in responding to a health crisis by investing in a dedicated contingency plan for a pandemic response. Interoperability should not just be viewed as a requirement for military equipment,

⁵ These are: 1) assured continuity of government and critical government services; 2) resilient energy supplies; 3) ability to deal effectively with uncontrolled movement of people; 4) resilient food and water resources; 5) ability to deal with mass casualties; 6) resilient civil communications systems; 7) resilient civil transportation systems.

but also for civil emergency measures and procedures. In order to respond to a rapidly spreading pandemic, the military must ensure that it has appropriate surge capacities in key areas in order to handle sudden spikes in demand.

Exercise pandemic response scenarios. Exercising, which is a fundamental pillar of any effective military establishment, should be extended to include pandemic scenarios and responses. The military, much like their civilian counterparts, must also ensure that they can perform their mission when their working environment is compromised or even downgraded or debilitated by the very pandemic they are supposed to fight (e.g. social distancing, teleworking).

Re-visit critical supply chains. The COVID-19 pandemic has exposed serious vulnerabilities in healthcare and pharmaceutical supply chains. For example, some crucially important medical items were produced by a single source. The fact that more than 200 of the “Fortune Global 500” firms have a presence in Wuhan, the highly industrialised Chinese city where the outbreak originated, suggests that a change is overdue. While the incentive to minimise costs and reduce inventories through a “just-in-time” delivery model will remain a fixture, risks must be mitigated by acknowledging the potentially higher cost of inaction. Buffers, contingency and flexibility must be built in to absorb disruptions.⁶

Improve information and intelligence sharing. The haphazard sharing of information between countries during the early phase of the COVID-19 pandemic was a major obstacle to a swift collective response. For example, most NATO and EU members did not share data about certain protective equipment, often citing national security concerns as the reason for withholding information. Improving the information sharing process will significantly improve the capacity to respond more rapidly and coherently to a pandemic. By the same token, an improved intelligence-sharing process among nations, be it within NATO or the EU, would enable these institutions to fully leverage their coordinating functions.

Tackling broader and unconventional challenges

Enhance the ability to counter disinformation. The COVID-19 pandemic was fertile ground for the emergence of distinct false narratives intended to obfuscate the origins of the crisis; to undermine Western relief efforts;

and to create the impression that some non-Western countries were handling the crisis far more competently. This political “weaponization” of a health crisis should give nations and institutions ample cause to become more agile in countering such false narratives and propaganda efforts. This includes the early detection of a disinformation campaign, and a rapid and robust public diplomacy effort to counter it.

Improve cyber defences. The COVID-19 crisis also set the stage for cyberattacks against health care services and other cyber espionage activities within Western pharmaceutical companies. These incidents only amplify the imperative to invest more in cyber defence.

“Lockdowns” have accelerated the shift towards more digitally enabled, distributed forms of working, thereby revealing and increasing vulnerabilities. Since digital weapons can be operated by states, as well as by proxies and private organizations that are not bound to geographic or jurisdictional constraints, they will remain the weapon

of choice for years to come.⁷ Moreover, with most cyber networks in private hands, it will be crucial to build public-private partnerships to address the cyber dimension of health care.

Improve CBRN defences. The defence against chemical, biological, radiological and nuclear (CBRN) threats is a standard task for the military. On the one hand, COVID-19 has underscored the sustained need for the armed forces to continue operating in a contaminated environment. On the other, the pandemic proved how indispensable expertise (both military and civilian) is in dealing with biological risks. For example, the EU and NATO both have dedicated institutions, such as Centres of Excellence (COE), that deal with CBRN threats. During the COVID-19 pandemic, some of these COEs played a notable role in harnessing expertise.

Name and shame reckless behaviour. The COVID-19 crisis also cast the principle of non-interference in a state’s “internal affairs” in a new light. Such a principle, em-

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⁶ Deloitte Canada, *COVID-19: Managing Supply Chain Risk and Disruption*, 2020, https://www2.deloitte.com/content/dam/Deloitte/ca/Documents/finance/Supply-Chain_POV_EN_FINAL-AODA.pdf

⁷ For an overview of the security and strategic issues stemming from the cyber domain see A. Missiroli, “The dark side of the web: cyber as a threat”, *European Foreign Affairs Review*, Vol.24, No.2, 2019, pp.135-152. For the combination with “hybrid”/disinformation campaigns, A. Missiroli, “From hybrid warfare to ‘cybrid’ campaigns: the new normal?”, *NDC Policy Brief*, No.19, NATO Defense College, September 2019.

phased most emphatically by autocratic regimes, may no longer be regarded as an impenetrable shield when global health is at stake. The attempt by the Chinese authorities to cover-up the initial outbreak had global ramifications. The demand for greater transparency, exhorted by the international community and even by some Chinese citizens, showed that the social contract of some autocracies – prosperity in exchange for loyalty to the regime – is reaching its limits. Even rigorous censorship of the internet will not reverse the damage.

Understand emerging and disruptive technologies. The challenges of emerging and disruptive technologies (EDT) are significant, but so are their opportunities. For example, Artificial Intelligence (AI), which

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is already playing a major role in medical research and the global distribution of medical products, can also be utilised to rapidly detect and counter false news campaigns in social media, particularly during a health crisis. “Big Data” can be a tool for detecting hybrid campaigns at

an early stage. The race to leverage EDT in scale and in speed has already begun. The winner is not likely to be the one who possesses the best technology, but the one with the most agile bureaucracy.⁸

Improve forecasting efforts. The search for faster and more effective responses to global health risks also requires nations and organizations to have better foresight. With the availability of new forecasting tools (such as AI), the mapping of risk has become more granular and precise. While forecasting should not be mistaken for predicting the future, civilian and military

actors should cooperate in identifying future health risks, including those which may be climate-induced. Modelling pandemics and their impact on societies and economies can convince decision-makers of the imperative to take precautionary measures.

An inconvenient truth

Calling upon the armed forces to offer support in a major health crisis is both logical and legitimate. Even if its main tasks lie elsewhere, the variety of means at its disposal are crucial in responding to pandemics or other humanitarian disasters. This fact makes the military a natural “first responder” in many cases, although it does not mean that the military would be the first line of defence against a pandemic. A solid health care system will always be more relevant.

Dealing with unconventional challenges such as pandemics requires a paradigm shift: *deterrence* will have to be augmented by *resilience* – an enormous challenge for individual states as well as for alliances. Any security policy that posits that military deterrence will not prevent such threats, that some threats cannot be avoided and some damage is inevitable, will draw fire for being fatalistic or lacking ambition. Others will interpret such a policy as an alibi for governments to spy on their citizens, or an excuse for increasing defence budgets. Yet, governments have no choice but to be candid with their citizens, and acknowledge that in an era defined by pandemics, climate change, terrorism, and resource scarcity – all potentially “wicked problems” – neither the individual state nor an alliance can offer near-perfect protection.

Unconventional challenges such as health crises bring to bear a most inconvenient truth: what once was considered near absolute security has now become *relative* security. Everyone and anyone can become a victim, anytime, and anywhere. This has far-reaching implications for the modern state, which in the final analysis, derives its legitimacy from its mandate and ability to protect its citizens. The way forward is difficult and costly. However, inaction will ultimately prove to be more expensive.

⁸ See R. Murray, “Building a resilient innovation pipeline for the Alliance”, *NATO Review*, 1 September 2020. More generally A. Missiroli, “Game of drones? How new technologies affect deterrence, defence and security”, *NATO Review*, 5 May 2020.



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