

GLOBAL HEALTH DIPLOMACY AS AN INSTRUMENT OF SOFT POWER IN BRAZIL-CHINA RELATIONS

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Abstract

As a result of significant economic growth, driven by increased international trade and the densification of urban populations – leading to a faster global transmission of diseases – health has been a top priority in global governance in recent decades. The coordination between national public policies and international cooperation efforts to address public health challenges has become crucial and acknowledged by the majority of the states in the international system (Ibanez et. al., 2022 Ibanez, 2020). This acknowledgment – together with the awareness of the “globalization of disease” (Fidler, 2004) – conduces to the use of Global Health Diplomacy (GHD) as an instrument of foreign policy and soft power. Due to its ever-growing role in the international arena, China has made efforts to play a more relevant role in health governance, especially in the Global South. In turn, as Brazil has a long tradition and experience in GHD, and being both Brazil and China countries that are commercial partners and integrate the BRICS, it is quite relevant to understand the evolution of their relationship in the sphere of GHD and governance across time. In this paper, by means of a literature review of scientific papers relevant in the field, we use a perspective based on



bilateralism to i) outline both China's and Brazil's positioning towards health diplomacy between 2013 and 2023, and ii) analyse their articulation in this realm within the context of the BRICS. The evolution of such relationship with health diplomacy at the core has been turbulent depending on political leaderships and their respective political programs; however, this study enables us to identify the challenges and point out best practices and potential reinforcing partnerships for the achievement of better health for all and sustainable development.

Keywords

Global Health Governance, Health Diplomacy, China-Brazil Relationship, BRICS.

Resumo

Em resultado de um crescimento económico significativo, impulsionado pelo aumento do comércio internacional e pela densificação das populações urbanas – que conduz a uma transmissão mais rápida de doenças à escala global – a saúde tem sido uma das principais prioridades da governança mundial nas últimas décadas. A coordenação entre as políticas públicas nacionais e os esforços de cooperação internacional para enfrentar os desafios da saúde pública tornou-se crucial e reconhecida pela maioria dos Estados do sistema internacional (Ibanez et. al., 2022 Ibanez, 2020;). Este reconhecimento – combinado com a consciência da “globalização da doença” (Fidler, 2004) – conduz à utilização da Diplomacia da Saúde Global como um instrumento de política externa e de soft power. Devido ao seu papel cada vez maior na arena internacional, a China tem feito esforços para desempenhar um papel mais relevante na governança global da saúde, especialmente no Sul Global. Por sua vez, como o Brasil tem uma longa tradição e experiência em Diplomacia da Saúde Global, e sendo tanto o Brasil como a China países parceiros comerciais e integrantes dos BRICS, é bastante relevante compreender a evolução da sua relação nessa esfera e na esfera da governança ao longo do tempo. Neste artigo, por meio de uma revisão de literatura de artigos científicos relevantes na área, utilizamos uma perspectiva baseada no bilateralismo para i) delinear o posicionamento da China e do Brasil em relação à diplomacia da saúde entre 2013 e 2023, e ii) analisar sua articulação nesse âmbito no contexto dos BRICS. A evolução dessa relação, com a diplomacia da saúde no centro, tem sido turbulenta, dependendo das lideranças políticas e dos seus respetivos programas políticos; no entanto, este estudo permite-nos identificar os desafios e apontar as melhores práticas e potenciais parcerias de reforço para a consecução de uma melhor saúde para todos e do desenvolvimento sustentável.

Palavras-chave

Governança Global da Saúde, Diplomacia da Saúde, Relação China-Brasil, BRICS.

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Introduction

Health diplomacy has emerged as critical component of international relations, especially in the context of globalization and increasing interdependence among nations. The rapid economic growth and urbanization observed globally have facilitated the swift transmission of diseases across borders, making health a priority in global governance (Fidler, 1997; Fidler, 2004; Almeida, 2020). The coordination between national public policies and international cooperation is essential to address public health challenges effectively. This coordination is widely acknowledged by the majority of states within the international system (Ibanez et al., 2022; Ibanez, 2020; Lee and Gomez, 2011).

Global health diplomacy has been defined in the literature in various fields of knowledge according to different historical and geographic perceptions as well. For the purpose of this paper, we assume the definition given in Global Health Centre Report (2021:39): "Global health diplomacy refers to the multi-level and multi-actor negotiation processes that shape and manage the global policy environment for health, in health and non-health fora". In this sense, GHD integrates the disciplines of public health, international affairs, management, law, and economics, among others, to address global health issues and improve relations among countries (Katz et al., 2011). Moreover, the increasing globalization of diseases – illustrated by outbreaks such as SARS, Ebola, and COVID-19 – has underscored the importance of robust international health policies (Fidler, 2004). Besides globalization itself, also the expansion of non-governmental organizations (NGOs) in international health, the globalization of science and pharmaceutical research, as well as the use of militarized languages of biosecurity impact global health (Adams, Novotny and Leslie, 2008).

In sequence, due to several factors – namely their economic relevance and wide know-how in health governance and diplomacy – Brazil and China are two key players in international order whose relationship is important to be understood. Brazil and China have established a robust partnership over the years, marked by significant trade relations and cooperation in various sectors (Herrero & Tussie, 2015). Both nations are



integral members of the BRICS group, which emphasizes collaboration among emerging economies from the Global South. The partnership between Brazil and China extends into the realm of health diplomacy, which serve as an instrument of soft power and foreign policy (Herrero & Tussie, 2015). Understanding the evolution of their relationship in GHD is crucial, given their influential roles in the Global South. The diplomatic relationship between Brazil and China has seen various phases, with an increasing focus on cooperation in science and technology, public health, and sustainable development. This relationship is further strengthened by the creation of new institutional framework to reform global governance structures and promote a multipolar world order, namely financing institutions, such as the New Development Bank and the Asian Infrastructure and Investment Bank (Santiago & Rodrigues, 2023).

Indeed, health diplomacy can be perceived as a tool of soft power as previously stated. Soft power, a concept popularized by Joseph Nye (1990, 2004, 2008), refers to the ability of a country to shape the preferences of others through appeal and attraction rather than coercion or payment. Health diplomacy is then a vital tool of soft power, enabling nations to foster goodwill, build alliances, and promote their values and interests on the global stage. As defined by Fidler (2001), GHD encompasses the policymaking processes through which both state and non-state actors address global health challenges, extending their efforts beyond the health sector. Similarly, Kickbusch et al., in a 2021 report by the Global Health Centre, described GHD as involving “multi-level and multi-actor negotiation processes that shape and manage the global policy environment for health, in health and non-health fora” (Global Health Centre, 2021:39). This perspective underscores the complex and collaborative nature of GHD, highlighting its role in coordinating a wide array of stakeholders and forums to effectively tackle health issues on a global scale.

Since the end of World War II, GHD has become an essential part of foreign policy agendas. It now plays a pivotal role in discussions related to national security, international trade, and diplomatic relations (Almeida, 2020; Ruckert et. al., 2022; Almeida, 2010). This development highlights the growing recognition that global health issues are closely linked to broader geopolitical and economic stability. This connection became particularly evident in the 1980s and 1990s during the rapid spread of HIV/AIDS in the developing world (Mahani et. al., 2018). The widespread impact of such health crises led to the integration of health concerns into foreign policy and international diplomacy, establishing GHD as a distinct field (Labonté and Gagnon, 2010). As a result, nations have increasingly recognized the importance of health diplomacy not only for safeguarding their own citizens, but also for enhancing global health security and fostering international goodwill (Gauttam et. al., 2020). The role of GHD, especially through the World Health Organization (WHO), in uniting countries towards the common goal of improving global health, has been consistently demonstrated during public health crises, most recently during the COVID-19 pandemic (Kickbusch and Liu, 2022). This ongoing emphasis underscores the crucial function of GHD in addressing contemporary health challenges and promoting international cooperation for a healthier world.

By using a perspective based on their bilateral relations, we can better understand the collaborative efforts and joint initiatives undertaken by Brazil and China in the fields of health diplomacy, by assessing how bilateral cooperation enhances their soft power and



contributes to global health governance. This approach allows us to identify the challenges and opportunities in their relationship and explore the potential for reinforcing partnerships to achieve better health outcomes.

Methodology

This paper adopts a qualitative approach, using a literature review to explore the role of health diplomacy in the context of Brazil-China relations within the BRICS framework from 2013 to 2023. The research is grounded in bilateralism, emphasizing the importance of collaborative efforts and joint initiatives between Brazil and China to address global health and scientific challenges. The literature review involved a comprehensive set of relevant scientific literature, including peer-reviewed journal articles, reports from international organizations and book chapters focusing on GHD and international, bilateral relations between Brazil and China. The literature search was conducted using several academic databases, including PubMed, Scopus and Google Scholar, filtered by some criteria such as articles either in English, Spanish or Portuguese, that after the abstract reading revealed to be relevant in one or more of the key topics of the study (global health governance, global health diplomacy, soft power, BRICS, China-Brazil cooperation, Chinese foreign policy, Brazilian foreign policy). Some grey literature, namely new in media, was used to complement the scientific literature. The resulting analysis that composes this paper is grounded in a total of 76 references and aims to make a contribution to the *status quo* of health diplomacy as an instrument of soft power in Brazil-China Relations.

Brazil's Positioning Towards Health Diplomacy (2013-2023)

Brazil has a long-standing tradition in health diplomacy, particularly through its involvement with international health organizations and its leadership in global health initiatives (Ibanez et. al., 2022). The country's Unified Health System (*Sistema Único de Saúde - SUS*) has been recognized as a model for public health, emphasizing universal health coverage and equitable access to healthcare services (Paim et al., 2011). Indeed, Brazil was the first developing nation to successfully integrate trade and public health by effectively challenging and renegotiating the barriers to medicine access within the framework of the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS). This initiative culminated in Brazil offering free antiretroviral treatment to HIV/AIDS patients, leading to a significant decrease in AIDS-related morbidity and mortality (Mahani et. al., 2018). In the international health arena, Brazil has been particularly proactive, pioneering several health measures that have been adopted by other health systems and endorsed by the WHO. Prominent examples include the provision of universal primary care services, the strategic training and deployment of healthcare personnel, and efforts to address the social determinants of health (Almeida et al., 2023), as well as the role of Brazil in the Framework Convention on Tobacco Control (FCTC) that offers valuable insights into the country's efforts to foster global health cooperation and achieve broader foreign policy goals (Lee, Chagas and Novotny, 2010). Indeed, in 1999, the Inter-Ministerial National Commission on the Control of Tobacco Use



was established. Supported by top government officials, this commission served as an advisory group to shape the government's stance on FCTC negotiations. Notably, the commission included representatives from nine ministries, such as Inland Revenue, Trade and Development, and Agriculture. By involving all relevant stakeholders (not only direct health-related ones), the commission ensured that tobacco control was integrated into consistent policies across the entire government, rather than being solely a concern of the health ministry (Lee, Chagas and Novotny, 2010).

During the 2013-2023 period, Brazil's health policies continued to prioritize these principles, even as the country faced economic and political challenges. Brazil has challenged the traditional model of aid, development assistance, and the typical donor-recipient relationships by promoting 'South-South' or 'horizontal cooperation'. This alternative framework emphasizes reciprocal learning and exchange between countries. Unlike the conventional model, where external health aid packages are imposed, this demand-driven approach enables recipient countries to request health aid tailored to their specific needs (Mahani et al., 2018; Almeida et al., 2010). By fostering this model of cooperation, Brazil not only enhances the effectiveness of health interventions, but also empowers partner countries to take an active role in their own health development, thereby promoting sustainable and contextually relevant health solutions.

The country has been a vocal advocate for health equity and the right to health in international forums. Its health policies have emphasized the importance of social determinants of health and the need for comprehensive primary healthcare (Buss and Ferreira, 2010; Almeida, 2023). The country's commitment to these principles has been evident in its active participation in global health initiatives and its efforts to strengthen health systems in developing countries. Going back to the early 2000s, to further contextualize our current period of analysis, by that time diplomacy and health in Brazil were highly connected, with a shift in the discussion on global health towards the priorities of foreign policy. The Lula's government emphasized multilateralism and integration with developing and emerging countries – particularly highlighted through the coordination with BRICS and South America (Ibanez et al., 2022) – aiming for a policy of international cooperation for development. In this context, within the health sector, there was a consolidation of a universalist discourse, according to Pinheiro (2020), with Brazil's participation in the creation of the Foreign Policy and Global Health Initiative (FPGH), which aimed to position health as an essential and strategic issue on the foreign policy agenda. Furthermore, there was a significant regional presence with the establishment of the South American Health Council within the Union of South American Nations (UNASUL) in 2008. This council sought to collectively combat the H1N1 and dengue epidemics, which were intensifying at the time, and to plan a response to the potential arrival of Ebola on the continent (Ibanez et. al., 2022). During Dilma's government, there was a continuation of this stance of participation in international initiatives (Lima, 2017). However, political instability and economic constraints have sometimes hindered the continuity and expansion of these initiatives. From 2019 until 2022, Jair Bolsonaro's tenure represented a significant shift in Brazil's health diplomacy approach. His administration's policies were marked by a strong nationalist stance and conservative ideology, which often resulted in a reduced emphasis on international health cooperation. Bolsonaro's government faced intense criticism for its management of the



COVID-19 pandemic, both within Brazil and from the global community (Trivellato and Ventura, 2022; Vieira de Jesus, 2022). This criticism, combined with Bolsonaro's skepticism towards multilateral organizations like the WHO, led to a decline in proactive health diplomacy. Effectively, Jair Bolsonaro's administration exhibited a strong anti-globalist stance, marked by a rejection of liberal multilateral institutions and international treaties (Ventura and Bueno, 2021). Bolsonaro threatened to exit key agreements such as the Paris Climate Accords and the WHO and actually withdrew from the UN Global Compact for Migration. His government distanced itself from the Global South and showed indifference towards South-South cooperation forums like BRICS (Trivellato and Ventura, 2022). Overall, engagement in health diplomacy was diminished (Buss and Tobar, 2020). Not only because of Brazil or China – but as a whole group – the COVID-19 pandemic exposed the BRICS' internal divisions and shortcomings in their collective policymaking and implementation, highlighting their constrained influence within the WHO (Moore, 2022).

With his return to the presidency in 2023, Luiz Inácio Lula da Silva had to deal with many issues domestically. As far as health is concerned, rebuilding the SUS after significant setbacks stands as a top priority and a monumental challenge for Lula's administration. Upon taking office, President Lula was faced with a dire situation marked by severe deterioration in health indicators (Ortega and Pele, 2023). Various stakeholders have identified the key challenges for his administration, which include: (i) outlining a progressive plan to increase public funding for SUS from the current 4% to 6%-7% of the GDP, while also improving the efficiency of resource allocation; (ii) addressing regional health disparities by implementing new governance mechanisms; (iii) reestablishing and enhancing primary health care to function as a comprehensive, effective, community-based model within the regionalized SUS network; (iv) managing health market regulations to prevent costly treatments from being accessed through the judicial system; (v) restructuring the training, placement, and provision of health workers, introducing policies to prevent precarious working conditions, and addressing the shortage and uneven distribution of doctors; (vi) developing a national health data policy to support the management and digital transformation of SUS (Ortega and Pele, 2023).

Besides the domestic health issues, Lula also has made revitalizing Brazil's health diplomacy a key priority. Lula's administration seeks to reassert Brazil's leadership role in global health initiatives, focusing on principles of South-South cooperation and solidarity (Ventura, 2023). Efforts are being made to rebuild relationships with international health organizations and enhance Brazil's participation in global health forums. In subsequent sub-sections of this paper, we focus on the health cooperation between Brazil and China under their respective health diplomacy approach.

China's Positioning Towards Health Diplomacy (2013-2023)

China's health policies have evolved significantly over the past decade, reflecting its growing influence in global affairs. The country has made substantial investments in health infrastructure and scientific research, aiming to enhance its soft power through health diplomacy (Hu et. al., 2017). China's Health Silk Road initiative, part of the larger

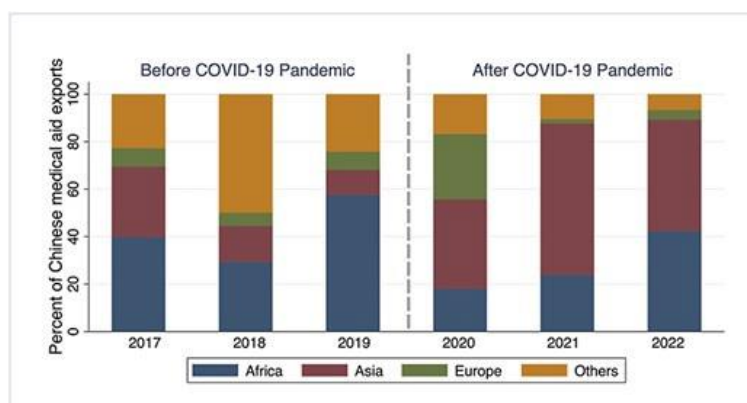


Belt and Road Initiative (BRI), exemplifies its commitment to improving global health through international cooperation (Cao, 2020).

Domestically, China's health policies have focused on expanding healthcare access, improving healthcare quality, and enhancing the country's capacity to respond to public health emergencies (Meng et al., 2019). The country has also emphasized the importance of innovation and technological advancement in its health strategies, investing heavily in research and development, also as part of its "Made in China 2025" strategic plan. Abroad, indeed, China's Health Silk Road has been a cornerstone of its health diplomacy strategy, involving projects to build hospitals, provide medical training, and supply medical equipment to countries along the BRI routes (Yuan, 2023; Chow-Bing, 2020). This initiative aims to enhance healthcare infrastructure and improve health outcomes in partner countries, while also strengthening China's influence in these regions (Gauttam et al., 2020; Shajalal et al., 2017), a factor which is sometimes associated to the conception of "aid with strings attached" (Tritto et al., 2024) or "old wines in new bottles" (Alden, 2006) when compared with traditional donors' aid. This strategy offers several potential benefits for China. It may facilitate access to Africa's rich natural resources, which are vital for China's expanding economy, and it fosters a sense of gratitude and dependence towards China. Indeed, by enhancing healthcare infrastructure and addressing public health challenges, China can generate goodwill and create a sense of obligation among the recipient nations, both economically and politically (Yuan, 2023).

With or without strings attached, the fact is that the Chinese government has been proactively engaging in health diplomacy, particularly with developing countries and notably with the African continent, as part of its wider South-South cooperation strategy. This commitment was evident, not only before, but also during and after the COVID-19 pandemic (Killeen et al., 2018; Cabestan, 2022). However, as illustrated in figure 1, the high volume of Chinese medical aid exports post-COVID-19 was primarily directed towards Asian countries. This shift is seen by many scholars as part of China's "neighbors' diplomacy" strategy, aiming to solidify relationships and enhance influence within the Asian region (Guo et al., 2024; Aria et al., 2023).

Figure 1: Distribution of Chinese medical aid exports across regions by quarter from January 2017 to September 2022, measured by the amount in current US\$



Source: Guo et al., 2024



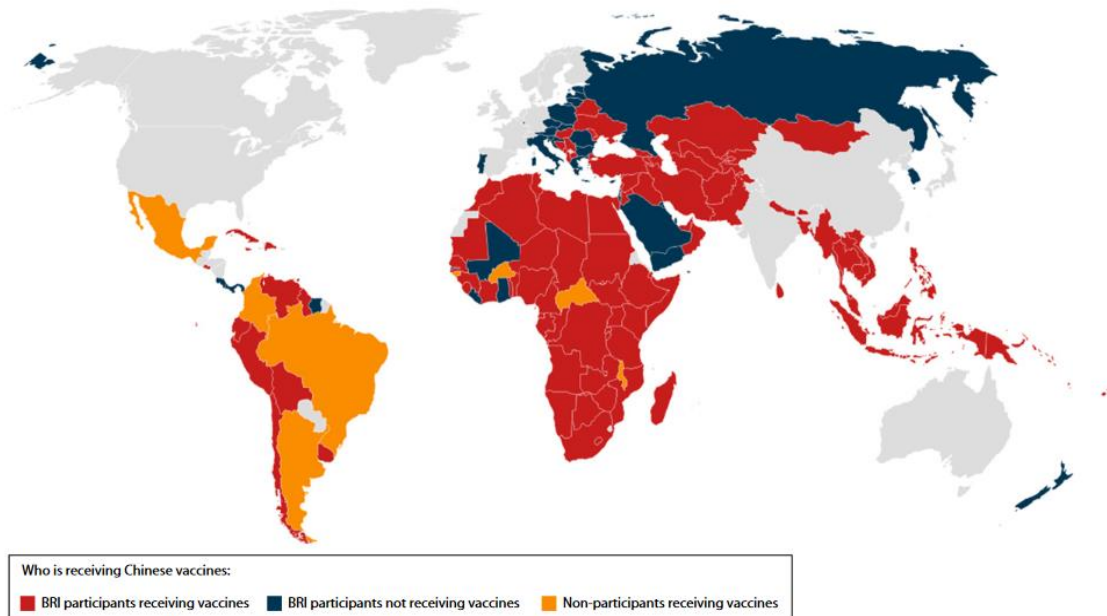
Through its multifaceted engagements, China's health diplomacy highlights the core principles of South-South cooperation, focusing on mutual benefit, solidarity, and shared developmental goals. Countries classified as 'emerging' or 'non-traditional' donors, which have only recently increased their contributions to development finance, are reshaping and expanding the boundaries of conventional health aid practices (McDade and Mao, 2020). This strategic approach fosters the creation of a more interconnected and cooperative global community, where developing nations support each other in tackling common challenges and achieving sustainable development in a more "horizontal" manner. This stands in contrast to the traditional "vertical" model of cooperation seen in North-South international aid (Almeida, 2010). Such horizontal cooperation not only emphasizes development assistance but also promotes equitable partnerships and shared growth.

In the sequence of the COVID-19 pandemic, China was said to be using what we know as "mask diplomacy" and "vaccine diplomacy" as tools of soft power, to provide an image of responsible power, ensuring equitable vaccine distribution, and fostering strategic partnerships. Partly to mitigate negative perceptions following the initial outbreak in Wuhan, China aimed to shift its image from a source of the virus to a global health leader (Wu & Gelineau, 2021; Lee 2023). China's COVID-19 aid during the first wave of the pandemic – the phase of mask diplomacy – was largely reactionary and driven by recipient countries' needs, reflecting traditional norms of non-interference rather than a coherent strategic plan. The fragmented nature of aid implementation highlights the challenges China faces in leveraging foreign aid for strategic purposes (Sun and Yu, 2023).

As for vaccine diplomacy, China began with vaccine trials in Brazil in July 2020, expanding to donations and sales across Asia, Africa, and Latin America (Lee, 2023). In early 2021, China appeared to gain an advantage with its swift delivery of medical masks and vaccines, as Western nations lagged behind (Nolte 2023; De Luce, 2021); indeed, early vaccine deliveries created a perception of Chinese diplomatic success compared to the U.S. and Europe (von der Burchard, 2021; Stuenkel, 2020). By March 2021, China had provided millions of vaccine doses to 69 countries and exported to 28 others (Huang, 2021; Lee 2023), as per figure 2. By June 2021, China had participated in COVAX to support global vaccine distribution (MFA, 2021; Huang, 2021; Kobierecka, 2022).



Figure 2: The Belt and Road Initiative and China's Vaccine Diplomacy



Source: Huang, 2021

The effectiveness of China's efforts in improving its international standing remains debated, with mixed perceptions from global audiences (Silver et al. 2023; Kobierecka, 2022; Silver et al., 2020). As for the case of Latin America, and Brazil in particular, the pandemic did not dramatically alter the economic and geopolitical landscape. China remained a major economic partner, but its vaccine diplomacy did not lead to substantial geopolitical shifts (Nolte, 2023). China's influence in Latin America was constrained by the effective vaccine diplomacy of the U.S. and Europe in the latter half of 2021 (Nolte, 2023).

All in all, either mask and vaccine diplomacy are part of China's health diplomacy that, besides the real effects in the global health landscape, serve as a tool for image repairing and nation branding (Lee, 2023). In next section, the relation between Brazil and China in terms of health cooperation will be further discussed within the BRICS context.

Brazil-China Articulation in Health and Science Diplomacies within BRICS

Crises in general, and health crises in particular, usually prompted discussions about open science and innovation, emphasizing the need for widespread experimentation and international collaboration (Chesbrough, 2020; Roehrl et al., 2020). We analysed the case of Brazil and China's health cooperation in the contemporary period.

Brazil and China's health cooperation is rooted in the complementary strengths each country brings to the partnership: essentially, China provides advanced technological and medical resources, including manufacturing capabilities for medical equipment and



vaccines; while Brazil, on the other hand, contributes with its deep expertise in global health, particularly in managing infectious diseases, thanks to its well-established health institutions, such as the *Fundação Oswaldo Cruz (Fiocruz)* (Santiago and Rodrigues, 2023).

During the COVID-19 pandemic, China's ability to rapidly produce and supply medical equipment and vaccines was crucial for Brazil. This included the provision of Sinovac's CoronaVac vaccine, which played a significant role in Brazil's vaccination campaign (Santiago and Rodrigues, 2023). The partnership exemplifies how technological and resource-sharing can enhance public health responses in times of crisis. Despite political tensions during Bolsonaro's administration, the health cooperation between Brazil and China remained strong, mainly deriving from local authorities' efforts. The steady flow of medical supplies from China to Brazil during the pandemic underscores the strategic importance of maintaining robust health partnerships irrespective of political changes (McBride et al., 2023). However, although Brazil has historically played a leading role in multilateral forums advocating for the health interests of the Global South (Ventura et al., 2020), as well as promoted innovative forms of health cooperation (Almeida et al., 2010), its stance from the pandemic period until very recently changed:

Brazil stands out from almost all other countries for the lack of legislation seeking to regulate and give an effective response to Covid-19 on the federal level. In fact, there has been a systematic obstruction from the Executive branch of government to contain the pandemic, coming from other actors, such as the National Congress and local governments (Ventura and Martins, 2020, p. 68).

Here, paradiplomacy plays a crucial role in finding federal and local alternatives. The shift in relationship with China occurred during Bolsonaro's administration led to tensions and difficulties, especially in a pandemic context as China being the foremost producer of masks and health equipment (Hoirisch, 2020) and also Brazil's largest trading partner (Alvarenga et al., 2020). Despite these strains, the already referred notable paradiplomatic efforts between Brazilian regional entities, particularly in the Northeast, and their Chinese counterparts had a mitigating effect. For instance, the province of Sichuan donated health supplies to Pernambuco (Alvarenga et al., 2020; Pozatti and Farias, 2022). The current research agenda on international cooperation needs to broaden its scope to include these emerging forms of collaboration and their effects on national and multilateral institutions and alliances. This is particularly pertinent given that in March 2021, Fiocruz obtained definitive approval from the National Health Surveillance Agency (Anvisa) for the COVID-19 Fiocruz vaccine, which is produced using Chinese Active Pharmaceutical Ingredients (API) (Valverde, 2021). The large-scale production of this vaccine influenced the trajectory of the pandemic in Brazil and across Latin America (Xing et al., 2023), provided that Brazil enhances its performance in the region and continues Fiocruz's strong tradition of international cooperation (Pozatti and Farias, 2022).

Another example which is representative of the paradiplomacy efforts and also of a return to previous stage of relations between Brazil and China is the signature of a Memorandum



of Understanding between Fiocruz and CAS-TWAS Center of Excellence for Emerging Infectious Diseases (CEEID), to establish the Sino-Brazilian Center for Research and Prevention of Infectious Diseases (IDRPC). The agreement aims to strengthen cooperation in health-related science and technology, particularly in preventing and controlling pandemics and epidemics such as Covid-19, influenza, Zika, dengue, yellow fever, and tuberculosis, among others. This initiative includes developing global public health goods like rapid diagnostic tests, therapies, vaccines, and medications. The IDRPC will have headquarters in both Beijing, at the Institute of Microbiology of the Chinese Academy of Sciences (CAS), and at the Fiocruz campus in Manguinhos, Rio de Janeiro. The Rio facilities are expected to be completed by the end of 2024 and operational by 2025 (Azevedo, 2023/ Agência Notícias Fiocruz).

The partnership was initiated before the pandemic but faced delays due to health emergencies and political factors. However, with President Lula's recent visit to China and the subsequent signing ceremony, the agreement has gained renewed momentum, highlighting the deepening health cooperation between Brazil and China. The signing ceremony emphasized the importance of this high-level and bilateral partnership, underscoring joint research efforts, exchange of expertise, and enhanced epidemiological surveillance capabilities.

The IDRPC will facilitate joint research projects, training programs at various levels, technology and material exchange, seminars, conferences, and collaborative efforts in tropical medicine. It represents a significant shift towards permanent scientific collaboration by establishing physical centers where Brazilian and Chinese researchers can work together extensively. This bilateral partnership aims to advance global health systems and reduce vulnerability to emerging health crises through sustained scientific cooperation and knowledge exchange (Pereira, 2023/ Exame).

Final Considerations

In this paper, we have explored the roles of health diplomacy as an instrument of soft power in the context of Brazil-China relations within the BRICS framework. The evolution of their relationship from 2013 to 2023 demonstrates the dynamic nature of health diplomacy in shaping international relations and addressing global health challenges. Health diplomacy has emerged as a crucial tool for enhancing soft power. Both Brazil and China have leveraged it to strengthen their global influence. Brazil's long-standing tradition in health diplomacy, exemplified by its universal health coverage model and proactive stance in international health forums, showcases its commitment to health equity, public health and cooperation. China's Health Silk Road initiative, as part of the BRI, underscores its strategic use of health diplomacy to enhance global health infrastructure and foster international goodwill.

The COVID-19 pandemic further highlighted the importance of GHD. Brazil and China's collaboration in vaccine development and distribution illustrated how health diplomacy could serve immediate public health needs while reinforcing diplomatic ties. China's mask and vaccine diplomacies, despite criticisms, managed to position it as a key player in global health leadership.



The BRICS platform provides an essential context for these collaborations, promoting collective action and mutual support among emerging economies. However, the BRICS management of the Covid-19 pandemic revealed divisions and limitations in their collective ability to formulate and act upon policies, with limited agency within the WHO (Moore, 2022). This paper examines BRICS' global health diplomacy also during the Covid-19 pandemic and finds that multiple dimensions of power are significant in global health leadership.

Despite the successes, the relationship between Brazil and China in health diplomacy faces challenges, including political shifts and economic constraints. The period under Jair Bolsonaro's administration, marked by a nationalist stance and reduced international cooperation, posed significant hurdles (Trivellato & Ventura, 2022). However, the resilience of regional and local efforts, as well as the renewed focus under President Lula's administration, highlights the potential for overcoming these challenges. A signal of this is the establishment of the Sino-Brazilian Center for Research and Prevention of Infectious Diseases which represents a significant milestone in China and Brazil's collaboration. This center symbolizes a shift towards sustained scientific cooperation, aiming to develop global public health goods and improve epidemiological surveillance capabilities. It is a testament to the potential of multilateral efforts in addressing global health challenges effectively.

Moving forward, Brazil and China must continue to prioritize health diplomacy within their foreign policy agendas. Strengthening their collaboration through multilateral platforms like BRICS can enhance their soft power and contribute to global health governance. By fostering innovative and equitable health partnerships, they can address transnational health issues more effectively and promote global sustainable development.

References

- Adams, V., Novotny, T. E., & Leslie, H. (2008). Global Health Diplomacy. *Medical Anthropology*, 27(4), pp. 315–323. <https://doi.org/10.1080/01459740802427067>
- Alden, C. (2006). Through African eyes: Representations of China on the African continent. In *SciPo/Fudan/LSE conference*.
- Almeida, C. (2010). Saúde Global e Diplomacia da Saúde: um início de diálogo entre saúde e relações internacionais. *Revista Eletrônica De Comunicação, Informação and Inovação Em Saúde*, 4(1). <https://doi.org/10.3395/reciis.v4i1.691>
- Almeida, C. (2020). Global Health Diplomacy: A Theoretical and Analytical Review. *Oxford Research Encyclopedia of Global Public Health*. <https://doi.org/10.1093/acrefore/9780190632366.013.25>
- Almeida, C., Santos Lima, T., and de Campos, R. (2023). Brazil's foreign policy and health (1995–2010): A policy analysis of the Brazilian health diplomacy – from AIDS to 'Zero Hunger'. *Saúde debate* 47, 136. doi: 10.1590/0103-1104202313601i



Almeida, C.; Pires de Campos, R. & Buss, P. & Ferreira, J. & Fonseca, L. (2010). Brazil's conception of South-South "structural cooperation" in health. *Reciis*. 4. 10.3395/reciis.v4i1.343en.

Alvarenga, A. A., E. M. Rocha, J. Filippou, and M. A. Carvalho. (2020). Desafios do estado brasileiro diante da pandemia de Covid-19: o caso da paradiplomacia maranhense. *Cadernos Saúde Pública* 36, no. 12, pp. 1-15. doi: <https://doi.org/10.1590/0102-311X00155720>

Aria, A.; Tayeb, M. and Zazai, A. (2023). China's New Approach to Neighborhood Diplomacy: Analyzing the Economic and Political Relations with Afghanistan in the Post-2014 Period. *Journal of Humanities and Social Sciences Studies*. 5. 94-101. 10.32996/jhsss.2023.5.8.11.

Azevedo, C. (2023). Fiocruz e instituição chinesa assinam acordo para criação de centro de prevenção de doenças. Agência de Notícias da Fiocruz. Retrieved in July 2024, from: <https://agencia.fiocruz.br/fiocruz-e-instituicao-chinesa-assinam-acordo-para-criacao-de-centro-de-prevencao-de-doencas>

Buss, P. M., & Ferreira, J. R. (2010). Ensaio crítico sobre a cooperação internacional em saúde. *Revista Eletrônica De Comunicação, Informação & Inovação Em Saúde*, 4(1). <https://doi.org/10.3395/reciis.v4i1.710>

Buss, P.; Tobar, Se. (2020). COVID-19 and opportunities for international cooperation in health. *Cadernos de Saúde Pública, Rio de Janeiro*, v. 36, n. 4, pp. 1-3

Cabestan, J. P. (2022). The COVID-19 health crisis and its impact on China's International Relations. *Journal of Risk and Financial Management*, 15(3), 123. <https://doi.org/10.3390/jrfm15030123>

Cao, J. (2020). Toward a health silk road: China's proposal for global health cooperation. *China Quarterly of International Strategic Studies*, 6(01), pp. 19-35. <https://doi.org/10.1142/S2377740020500013>

Chesbrough, H. (2020). To recover faster from COVID-19, open up: Managerial implications from an open innovation perspective. *Industrial Marketing Management*, 88, pp. 410-413.

Chow-bing, N. (2020). COVID-19, Belt and Road Initiative and the Health Silk Road: Implications for Southeast Asia. *Friedrich Ebert Stiftung*.

De Luce, D. 2021. China is using vaccines to push its agenda in Latin America, and the U.S. is behind the curve, experts say. NBC News, May 23. Retrieved in July 2024, from: <https://www.nbcnews.com/news/world/china-using-vaccines-push-its-agenda-latin-america-u-s-n1268146>

Fidler D. P. (2001). The globalization of public health: the first 100 years of international health diplomacy. *Bulletin of the World Health Organization*, 79(9), pp. 842-849.

Fidler, D. (1997). The Globalization of Public Health: Emerging Infectious Diseases and International Relations. *Indiana Journal of Global Legal Studies*: Vol. 5: Iss. 1, Article 2. Retrieved in July 2024, from: <https://www.repository.law.indiana.edu/ijgls/vol5/iss1/2>



Fidler, D. (2004). SARS, Governance, and the Globalization of Disease, *London: Palgrave Macmillan*.

Gauttam, P., Singh, B., and Kaur, J. (2020). COVID-19 and Chinese Global Health Diplomacy: Geopolitical Opportunity for China's Hegemony? *Millennial Asia*, 11(3), 318-340. <https://doi.org/10.1177/0976399620959771>

Global Health Centre. (2021). 2021 Annual Report. *Geneva, Graduate Institute of International and Development Studies, Global Health Centre*.

Guo, B., Fan, V., Strange, A., & Grépin, K. A. (2024). Understanding China's shifting priorities and priority-setting processes in development assistance for health. *Health policy and planning*, 39(Supplement_1), i65–i78. <https://doi.org/10.1093/heapol/czad095>

Herrero, M. B., & Tussie, D. (2015). UNASUR health: A quiet revolution in health diplomacy in South America. *Global Social Policy*, 15(3), pp. 261–277

Hoirisch, C. (2020). Brics na Covid-19: multilateralismo, capacidade tecnológica e colaboração em PD&I. In: *Diplomacia da saúde e Covid-19: reflexões a meio caminho*, organized by P. M. Buss, and L. E. Fonseca, 213-230. *Rio de Janeiro: Fundação Oswaldo Cruz*.

Hu, R., Liu, R., & Hu, N. (2017). China's Belt and Road Initiative from a global health perspective. *The Lancet. Global health*, 5(8), e752–e753. [https://doi.org/10.1016/S2214-109X\(17\)30250-4](https://doi.org/10.1016/S2214-109X(17)30250-4)

Huang, Y. (2021). Vaccine diplomacy is paying off for China. *Foreign Affairs*, March 11. Retrieved in July 2024, from: <https://www.foreignaffairs.com/articles/china/2021-03-11/vaccine-diplomacy-paying-china>.

Ibanez, P. (2020). Geopolítica e diplomacia em tempos de Covid-19: Brasil e China no limiar de um contencioso. *Revista Brasileira de Geografia Econômica*. Vol. IX, n. 18. <https://doi.org/10.4000/espacoeconomia.13257>

Ibanez, P., Pereira, A., and Recio, C. (2022). Saúde Global e Geopolítica: a diplomacia como política pública e a relação dos BRICS no cenário de pandemia no Brasil. *Cadernos De História Da Ciência*, 15(1). <https://doi.org/10.47692/cadhistcienc.2021.v15.36538>

Katz, R., Kornblet, S., Arnold, G., Lief, E., & Fischer, J. E. (2011). Defining health diplomacy: changing demands in the era of globalization. *The Milbank quarterly*, 89(3), pp. 503–523. <https://doi.org/10.1111/j.1468-0009.2011.00637.x>

Kickbusch, I., and Liu, A. (2022). Global health diplomacy-reconstructing power and governance. *Lancet (London, England)*, 399(10341), pp. 2156–2166. [https://doi.org/10.1016/S0140-6736\(22\)00583-9](https://doi.org/10.1016/S0140-6736(22)00583-9)

Kickbusch, I.; Nikogosian, H.; Kazatchkine, M.; Kökény, M. (2021). A Guide to Global Health Diplomacy. Better health – improved global solidarity – more equity. *Global Health Centre. Graduate Institute of Geneva*.



Killeen, O.; Davis, A.; Tucker, J.; and Mason Meier, B; (2018). Chinese Global Health Diplomacy in Africa: Opportunities and Challenges. *Global Health Governance*; 12(2): pp. 4–29.

Kobierecka A. (2022). Post-covid China: 'vaccine diplomacy' and the new developments of Chinese foreign policy. *Place Branding and Public Diplomacy*, pp. 1–14. <https://doi.org/10.1057/s41254-022-00266-2>

Labonté, R., Gagnon, M.L. (2010). Framing health and foreign policy: lessons for global health diplomacy. *Global Health* 6, 14. <https://doi.org/10.1186/1744-8603-6-14>

Lee K, Chagas LC, Novotny TE (2010) Brazil and the Framework Convention on Tobacco Control: Global Health Diplomacy as Soft Power. *PLoS Med* 7(4): e1000232. <https://doi.org/10.1371/journal.pmed.1000232>

Lee S. T. (2023). Vaccine diplomacy: nation branding and China's COVID-19 soft power play. *Place Branding and Public Diplomacy*, 19(1), pp. 64–78. <https://doi.org/10.1057/s41254-021-00224-4>

Lee, K.; Gomez, E. J. (2011). Brazil's ascendance: the soft power role of global health diplomacy. *European Business Review*, pp. 61-64.

Lima, J. (2017). Saúde global e política externa brasileira: negociações referentes à inovação e propriedade intelectual. *Ciência e saúde coletiva*. Vol. 22, n. 7, p.2213-2221. DOI: <http://dx.doi.org/10.1590/1413-81232017227.02652017>.

Mahani, A.; Ruckert, A.; Labonte, R. (2018). Global Health Diplomacy. In: The Oxford Handbook of Global Health Politics, Eds: Colin McInnes, Kelley Lee, and Jeremy Youde. *Oxford Handbooks*. DOI: 10.1093/oxfordhb/9780190456818.013.7

McBride, J., Berman, N., and Chatzky, A. (2023). China's Massive Belt and Road Initiative. *Council on Foreign Relations*. Retrieved in July 2024, from: <https://www.cfr.org/backgroundunder/chinas-massive-belt-and-road-initiative>

McDade, K. K., & Mao, W. (2020). Making sense of estimates of health aid from China. *BMJ global health*, 5(2), e002261. <https://doi.org/10.1136/bmjgh-2019-002261>

Meng Q, Mills A, Wang L, Han Q. (2019). What can we learn from China's health system reform? *BMJ*; 365: l2349 doi:10.1136/bmj.l2349

Ministry for Foreign Affairs of the People's Republic of China (MFA). (2021). Regular press conferences and official statements.

Moore, C. (2022). BRICS and Global Health Diplomacy in the Covid-19 Pandemic: Situating BRICS' diplomacy within the prevailing global health governance context. *Revista Brasileira de Política Internacional*. 65 (2). <https://doi.org/10.1590/0034-7329202200222>

Nolte, D. (2023). China's mask and vaccine diplomacy in Latin America: a success story? *Int Polit*. <https://doi.org/10.1057/s41311-023-00525-w>

Nye, J. (1990). Soft Power. *Foreign Policy*, nº 80, pp. 153-171. <https://doi.org/10.2307/1148580>



Nye, J. (2004). *Soft Power: The Means to Success in World Politics*. New York: *Public Affairs*.

Nye, J. (2008). Public Diplomacy and Soft Power. *The ANNALS of the American Academy of Political and Social Science*, 616(1), pp. 94-109. <https://doi.org/10.1177/0002716207311699>

Nye, J. S. (2008). Public Diplomacy and Soft Power. *The Annals of the American Academy of Political and Social Science*, 616, pp. 94-109. Retrieved in July 2024, from: <http://www.jstor.org/stable/25097996>

Ortega, F.; Pele, A. (2023). Brazil's unified health system: 35 years and future challenges. *The Lancet Regional Health - Americas*, 28, 100631.

Paim, J., Travassos, C., Almeida, C., Bahia, L., and Macinko, J. (2011). The Brazilian health system: history, advances, and challenges. *Lancet (London, England)*, 377(9779), 1778-1797. [https://doi.org/10.1016/S0140-6736\(11\)60054-8](https://doi.org/10.1016/S0140-6736(11)60054-8)

Pereira, I. (2023). Fiocruz assina acordo com instituição chinesa para prevenção de doenças infectocontagiosas. *Exame*. Retrieved in July 2024, from: <https://exame.com/brasil/fiocruz-assina-acordo-com-instituicao-chinesa-para-prevencao-de-doencas-infectocontagiosas/>

Pinheiro, L. (2020). Política Externa Brasileira e Saúde Global: encontros e desencontros no passado e no presente. In: *Seminários de Quarentena IESP-UERJ*, 4, Retrieved in July 2024, from: <https://www.youtube.com/watch?v=K0ath0QIotA>.

Pozzatti, A., & Farias, L. W. (2022). From emergency to structure: ways to fight Covid-19 via international cooperation in health from Brazil. *Revista Brasileira De Política Internacional*, 65(1), e006. <https://doi.org/10.1590/0034-7329202200106>

Roehrl, R. A., Liu, W., and Mukherjee, S. (2020). The COVID-19 pandemic: A wake-up call for better cooperation at the science-policy-society interface. *UN/DESA Policy Brief*, 62.

Ruckert, A., Almeida, C., Ramírez, J., Guerra, G., Salgado de Snyder, V. N., Orozco, E., Alvarenga, A. A., Nassim de Saboya, A., Martins Dos Santos, R., Sepúlveda, D., Rivera Vivian, E. D. C., Santos, M. D. S., Doriani, K., and Labonté, R. (2022). Global Health Diplomacy (GHD) and the integration of health into foreign policy: Towards a conceptual approach. *Global public health*, 17(6), pp. 1041-1054. <https://doi.org/10.1080/17441692.2021.1900318>

S4D4C. (2020). Building Better Science Diplomacy for Global Challenges: insights from the COVID-19 crisis. *S4D4C Project/ Horizon Europe 2020*. https://www.s4d4c.eu/wp-content/uploads/2020/06/S4D4C_PolicyBrief_June2020_BuildingBetterScienceDiplomacy_COVID-19.pdf

Santiago, A.; Rodrigues, C. (2023). The impact of the Health Silk Road on Global South countries: insights from Brazilian health agents. *Front. Polit. Sci.* 5:1250017. doi: 10.3389/fpos.2023.1250017



Shajalal, M., Xu, J., Jing, J. et al. (2017). China's engagement with development assistance for health in Africa. *glob health res policy* 2, 24. <https://doi.org/10.1186/s41256-017-0045-8>

Silver, L., Devlin, K., & Huang, C. (2020). Unfavorable Views of China Reach Historic Highs in Many Countries. *Pew Research Center*.

Silver, L.; Huang, C.; Clancy, L.; Lam, N.; Greenwood, S.; Mandapat, J.; Baronavski. (2023). Comparing Views of the U.S. and China in 24 Countries. *Pew Research Center*.

Stuenkel, O. (2020). The BRICS and the future of global order. *Lanham/Maryland: Lexington Books*.

Sun, Y. & Yu, B. (2023). Mask Diplomacy? Understanding China's Goals in Delivering Medical Aid in the First Wave of the COVID-19 Pandemic. *Journal of Current Chinese Affairs*. 52. 10.1177/18681026221139499.

Tritto, A.; Haini, H. and Wu, H. (2024). Help with strings attached? China's medical assistance and political allegiances during the Covid-19 pandemic. *World Development, Elsevier*, vol. 178(C). DOI: 10.1016/j.worlddev.2024.106568

Trivellato, P.; Ventura, D. (2022). The decline of Brazil in the global health field: Rupture, loss, and reversal of leadership in the international health agenda. *Latin American Policy*; v. 13, n. 2. DOI: 10.1111/lamp.12274

Valverde, R. (2021). Fiocruz entrega ao PNI primeiro lote de vacinas covid-19. Portal Fiocruz, Rio de Janeiro, Retrieved in July 2024, from: <https://portal.fiocruz.br/noticia/fiocruz-entrega-ao-pni-primeiro-lote-de-vacinas-covid-19>

Ventura, D. (2023). After testing times, Brazil is back. *The BMJ*; 380, p. 48. doi:10.1136/bmj.p48

Ventura, D. F. L., J. Martins. (2020). Between Science and populism: the Brazilian response to Covid-19 from the perspective of the legal determinants of Global Health. *Revista de Direito Internacional* 17, no. 2 (2020): pp. 66-83. <https://doi.org/10.5102/rdi.v17i2.6687>

Ventura, D.; Bueno, F. (2021). From global health leader to pariah: Brazil as a laboratory for "epidemiological neoliberalism" in the face of Covid-19. *Foro Internacional* Vol. LXI, 2 (244). DOI: <https://doi.org/10.24201/fi.v61i2.2835>

Ventura, D.; Ribeiro, G. Di Giulio, P. Jaime, J. Nunes, C. M. Bógus, J. L. Antunes, and E. Waldman. (2020). Challenges of the COVID-19 pandemic: for a Brazilian research agenda in global health and sustainability. *Reports in Public Health*, v. 36, n. 4. <https://doi.org/10.1590/0102-311X00040620>

Vieira de Jesus, D. (2022). The Strategy of Chaos: Brazilian Foreign Policy under Jair Bolsonaro (2019-2022). *International Journal of Social Science Studies* Vol. 10, No. 6; <https://doi.org/10.11114/ijsss.v10i6.5686>



Von der Burchard, H. 2021. Borrell: EU's 'insufficient' vaccine donations open door for China. *Politico*, July 30. Retrieved in July 2024, from: <https://www.politico.eu/article/josep-borrell-eu-vaccine-donations-insufficient/>

Wu, H.; Gelineau, K. (2021). Chinese vaccines sweep much of the world, despite concerns. *New York: Associated Press*.

Xing, L.; Vadell, J. and Rubiolo, F. (2023). Soft Power with Chinese Characteristics: Pandemic Diplomacy in Latin America and the Caribbean. *Latin American Perspectives*, Issue 251, Volume 50, nº 4, pp.193-209. DOI: 10.1177/0094582X231187895

Yuan, S. (2023). The Health Silk Road: A Double-Edged Sword? Assessing the Implications of China's Health Diplomacy. *World*, Vol. 4, pp. 333-346. <https://doi.org/10.3390/world4020021>