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LACK OF SECURITY CULTURE IN FACING THE COVID-19 PANDEMIC

Summary: The current COVID-19 pandemic, caused by the novel human coronavirus SARS-CoV-2, is an unprecedented event in recent human history in many aspects. By reaching nearly all the countries in the world and causing strong restrictive reactions in many countries, the ongoing pandemic presents perhaps the greatest social challenge for this generation and threatens to permanently change the life as we know it. As a specialized organization of the UN responsible for international public health, the WHO took the leading role in the promotion of the most optimal measures for containment of the pandemic, but its reactions caused certain controversies as well. Without a developed security culture in the domain of public health, and without learning from previous pandemics or epidemics, different countries applied different measures. And while some countries were hit more than others regardless of the activities taken, a common denominator for nearly all of them was the fact that the economy received the strongest blow. The fact that this pandemic takes place at the moment when the Internet is a dominant form of disseminating information and communication caused that numerous controversies and disinformation were appearing due to lack of control of truthfulness of information, which in perspective has to result with reevaluating the criteria of credibility, which is another consequence of unreadiness of the world to face a pandemic of great proportions.

Key words: coronavirus, COVID-19, pandemic, the WHO, security culture, containment and prevention measures, controversies

Introduction

Bertrand Russell said once that nature, even if you banish it with a stick, will once return¹. Today many authorities claim that the current pandemic of COVID-19 is in part revenge of nature to humans who persistently devastate and humiliate it. And not to all the people, also. For the first time, a large pandemic of a contagious

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¹ Bertrand Russell, *Social Cohesion and Human Nature*, *BBC Reith Lectures*, 1948, <https://www.bbc.co.uk/programmes/p00hgk62>, 01/04/20

disease hit the rich, white, Christian world the hardest. Without a reasonable explanation so far, Belgium has more affected than India, Ireland than Pakistan, Switzerland than Bangladesh, Luxembourg than Vietnam. For the first time in history, the well-funded official global health system embodied in the World Health Organization and powerful pharmaceutical giants broke down and presented itself as *in flagranti* useless and futile. As we will see in the remainder, despite the Hippocratic oath, the care for money overcame the care for the health and life of a man. Because of these misgivings, the contagious disease was let to ravage the planet for months, while endangering life, health, and safety and security of human civilization. Without anything else at their disposal, the people fought the contagion in the same way they did centuries ago: with isolation, hygiene, masks, and teas. Everything they have. Those who got seriously ill died, and even in the best hospitals in the world, nobody was able to help them by any means. The human neglect allowed the small nano-virions to threaten to change the human identity and the way of life on Earth with the contagion and mysterious disease.

An infectious disease pandemic, even if it is with a low level of lethality, poses a danger to the biological security of mankind. Biological security is “a state of protection of people², domesticated animals and plants, and the environment from dangers caused by emergencies, and it is pointed to following sanitary, hygiene and epidemiological diseases, as well as protection of biosphere as a whole from threats coming from the man, and protection of the living nature from the aspect of biopolitics. Biological security also envelops the prevention of abuse (theft) of biological materials from research labs and their use for terrorist purposes.” The situation in the field points to certain suspicions and requests to explore the possibility of artificial creation of the virus and its incidental “escape” from the laboratory when exploring the primary creation of the virus SARS-CoV-2.

It was once again shown that, like the New Testament riders of the apocalypse, “contagious diseases not only spread mass deaths, but they largely influenced new ways of civilization, history, and human identity. So the Justinian Plague in the 6th century prevented this Byzantine emperor from uniting remaining parts of the former Western Roman Empire that dissolved in 476. The apocalyptic atmosphere that followed contagious diseases helped the spread of Christianity. Empires were rising and falling when the plague or similar diseases were hitting. Wars have been led or stopped because of diseases, after pandemics, new borders were being determined. A fear for the apocalyptic end of the world caused by contagious diseases is now much more intensive and it seems more realistic than from an Armageddon³ caused by a nuclear war, or our fears of death⁴.” Because of the COVID-19 pandemic hostilities and war conflicts in the Near East were ceased, and even the Islamic

² Željko Bjelajac, *Bezbednosna kultura – umeće življenja*, Pravni fakultet za privredu i pravosuđe, Novi Sad, 2018, p.156

³ Armageddon is, according to the Bible, a place of final fight during the end of the world, interpreted both literally and figuratively. The word in colloquial usage refers to any world ending scenario or a global catastrophe.

⁴ Dragan Štavljanin, *Epidemije od Troje i španske groznice do korona virusa*, Radio Slobodna Evropa, 2020, <https://www.slobodnaevropa.org/a/historija-bolesti-zaraza-pandemija-kuga-kolera-grip/30478110.html>, 01/05/20

State advised its followers not to travel to Europe or the West in general. Fear of an apocalyptic pandemic replaces other fears and scenarios of the end of life on Earth, or at least of life as we know it.

COVID-19 is the name of the most recently appeared contagious diseases that affect the human population. And the disease is defined⁵ as any harmful deviation from the normal structural or functional state of an organism, generally associated with certain signs and symptoms and differing in nature from physical injury. A diseased organism commonly exhibits signs or symptoms indicative of its abnormal state. Thus, the normal condition of an organism must be understood to recognize the hallmarks of the disease. Nevertheless, a sharp demarcation between disease and health is not always apparent. The study of disease is called pathology. It involves the determination of the cause (etiology) of the disease, the understanding of the mechanisms of its development (pathogenesis), the structural changes associated with the disease process (morphological changes), and the functional consequences of those changes. Correctly identifying the cause of a disease is necessary for identifying the proper course of treatment.

A disease is an individual state of a human, but in the case of contagious diseases, a disease can be spread from one man to others and to envelop large geographical areas. In that case, we talk about an epidemic. An epidemic⁶ is an occurrence of a disease that is temporary of high prevalence. An epidemic occurring over a wide geographical area is called a pandemic. The rise and decline in the epidemic prevalence of an infectious disease is a probability phenomenon dependent upon transfer of an effective dose of the infectious agent from an infected individual to a susceptible one. After an epidemic has subsided, the affected host population contains a sufficiently small proportion of susceptible individuals that reintroduction of the infection will not result in a new epidemic. Since the parasite population cannot reproduce itself in such a host population, the host population as a whole is immune to the epidemic disease, a phenomenon termed herd immunity.

Occasionally the agents of high virulence⁷ appear, which rapidly spread among the population. If the contagion hits large portions of the world we have a pandemic. A pandemic⁸ is an outbreak of infectious disease that occurs over a wide geographical area and that is of high prevalence, generally affecting a significant proportion of the world's population, usually over several months. Pandemics arise from epidemics, which are outbreaks of disease confined to one part of the world, such as a single country. Pandemics, especially those involving influenza, sometimes occur in waves, so that a post-pandemic phase, marked by decreased disease activity, may be followed by another period of high disease prevalence.

Who can declare a pandemic and what criteria must be met to call an epidemic a pandemic? The World Health Organization⁹ (WHO) is authorized to declare a

⁵ <https://www.britannica.com/science/disease>, 01/05/20

⁶ <https://www.britannica.com/science/epidemic>, 01/05/20

⁷ <https://www.britannica.com/science/virulence>, 01/05/20

⁸ <https://www.britannica.com/science/pandemic>, 01/05/20

⁹ The World Health Organization is a specialized agency of the UN and a coordinating body for global public health. It was founded in 1948 in Geneva, Switzerland. Serbia is member of the WHO since 2000. The WHO has an office in Serbia, and its head is dr Marijan Ivanusa.

pandemic. The WHO follows the activity of a disease on a global level through a network of centers located in the countries around the world and has a pandemic preparedness plan that includes six phases of the pandemic warning. Phase 1 is the lowest alert level and usually shows that newly created or previously existing virus circulates among animals, with a small risk of transmission to humans. Phase 6 is a pandemic phase and it is declared when an outbreak is characterized by global distribution and permanent transmission of a disease among people.

Despite many things that have befallen humanity regarding the pandemic is new and unexpected, it seems that the coronavirus is not a new thing after all. It was first discovered in the 1930s in chickens, and according to available competent sources¹⁰, the coronaviruses are known to human medicine since the 1960s. A Macedonian infectious disease expert, professor Velo Markovski told the Alfa TV that coronavirus is a known virus discovered in 1965. "It had small virulence and it was harmless, so the students of medicine voluntarily infected themselves so they could see the clinical features¹¹." Dr. Markovski questioned the position of the health authorities on mandatory quarantine, mass testing, and strict isolation of the population. Similar positions were published by a German physician Dr. Wolfgang Wodarg¹². His words had a greater effect as we had signed a resolution that called for an investigation of the influence of pharmaceutical companies on a global campaign that the WHO¹³ was leading during the epidemic of H1N1 influenza (swine flu), while he presided over the Health board of the Parliamentary Assembly of the Council of Europe in 2009.

Coronaviruses (CoV) (order *Nidovirales*, family *Coronaviridae*, subfamily *Coronavirinae*) are enveloped positive-stranded RNA viruses. The subfamily *Coronavirinae* contains the four genera *Alpha-*, *Beta-*, *Gamma-*, and *Deltacoronavirus*. Coronaviruses infect birds (gamma- and deltacoronaviruses) and several mammalian species (mainly alpha- and betacoronaviruses), including humans. Animal CoVs, which include important livestock pathogens such as transmissible gastroenteritis virus (TGEV) of swine, bovine CoV (BCoV), and feline coronavirus (FCoV) have been known for more than 80 years¹⁴.

The coronaviruses are viruses of *Nidovirales* order, *Coronaviridae* family, and *Orthocoronavirinae* subfamily.¹⁵ Coronaviruses are enveloped positive-strand RNA viruses with the largest known RNA genomes, of 30–32 kb¹⁶. The term "coro-

¹⁰ Jeffrey S. Kahn, Kenneth McIntosh, "History and recent advances in coronavirus discovery". The Pediatric Infectious Disease Journal, Vol. 24, No. 11, 2005, pp. 223-227

¹¹ <https://istokrs.com/izdvojeno/dr-velo-markovski-jedan-drugaciji-pogled-na-koronavirus-panika-je-obmana/>, 30/04/20

¹² <https://www.wodarg.com/>, 30/04/20

¹³ <https://healthcare-in-europe.com/en/news/european-parliament-to-investigate-who-pandemic-scandal.html>, 30/04/20

¹⁴ Victor C. Corman et al, *Hosts and Sources of Endemic Coronaviruses*, Advances in Virus Research, Vol. 100, pp. 163-188, 2018

¹⁵ ICTV Master Species List 2019.v1, *International Committee on Taxonomy of Viruses*, Berlin, 2019, https://talk.ictvonline.org/files/master-species-lists/m/msl/9601_01/05/20

¹⁶ Susan R. Weiss, Julian L. Leibowitz, *Coronavirus Pathogenesis*, Advances in Virus Research, vol. 81, 2011, pp. 85-164

navirus” originates from the Latin word *corona*, which means “crown” or “halo”, and relates to the specific appearance of virions under an electronic microscope: they have protein growth on their surface that looks similar to a royal crown or a solar corona.

There is a great difference in risk carried by potential infection by a coronavirus. The four endemic human coronaviruses HCoV-229E, -NL63, -OC43, and -HKU1 contribute a considerable share of upper and lower respiratory tract infections in adults and children¹⁷. Other than SARS-CoV-2, there are six known coronaviruses in humans: HCoV-229E, HCoV-OC43, SARS-CoV, HCoV-NL63, HCoV-HKU1, and MERS-CoV.¹⁸ Out of a total of seven known coronaviruses in humans, three are epidemic: SARS-CoV, MERS-CoV, and SARS-CoV-2, which is the causative agent of the current pandemic.

Security culture in health – an inadequate answer of the WHO

The World Health Organization (WHO) is a specialized agency of the United Nations, financially subordinate to the United Nations Economic and Social Council. It has around 7,000 employees in 150 countries and regions and an annual budget of around \$4.2 billion.¹⁹ As an umbrella organization for care about global health and making recommendations and decisions about procedures in health crises.

The WHO was informed about possible health problems in China in December 2019, but because of the holiday season it reacted only on January 11th with an announcement filed under “emergency preparedness response”²⁰. In the statement, it was told that the evidence is highly suggestive that the outbreak is associated with exposures in one seafood market in Wuhan. The Chinese authorities identified a new type of coronavirus (novel coronavirus, nCoV), which was isolated on 7 January 2020.²¹ The earliest cases were identified through the “pneumonia of unknown etiology” surveillance mechanism. Pneumonia of unknown etiology is defined as an illness without a causative pathogen identified that fulfills the following criteria: fever ($\geq 38^{\circ}\text{C}$), radiographic evidence of pneumonia, low or normal white-cell count or low lymphocyte count, and no symptomatic improvement after antimicrobial treatment for 3 to 5 days following standard clinical guidelines.²² Laboratory testing was conducted on all suspected cases identified through active case finding and ret-

¹⁷ Victor C. Corman et al, *Hosts and Sources of Endemic Coronaviruses*, Advances in Virus Research, Vol. 100, pp. 163-188, 2018

¹⁸ Sasmita Poudel Adhikari et al. *Epidemiology, causes, clinical manifestation and diagnosis, prevention and control of coronavirus disease (COVID-19) during the early outbreak period: a scoping review*, Infectious Diseases of Poverty, Vol. 9, art. no. 29, 2020

¹⁹ *The U.S. Government and the World Health Organization*, The Henry J. Kaiser Family Foundation, 2020, <https://www.kff.org/global-health-policy/fact-sheet/the-u-s-government-and-the-world-health-organization/>, 05/05/20

²⁰ <https://www.who.int/csr/don/12-january-2020-novel-coronavirus-china/en/>, 01/05/20

²¹ *ibid*

²² Li Qun et al, *Early Transmission Dynamics in Wuhan, China, of Novel Coronavirus-infected Pneumonia*, New England Journal of Medicine, Vol. 382, 2020, pp. 1199-1207

respective review. Other respiratory pathogens such as influenza, avian influenza, adenovirus, Severe Acute Respiratory Syndrome coronavirus (SARS-CoV), Middle East Respiratory Syndrome coronavirus (MERS-CoV) were ruled out as the cause²³. Given the severe acute respiratory syndrome coronavirus (SARS-CoV) outbreak in 2002 and the Middle East respiratory syndrome coronavirus (MERS-CoV) outbreak in 2012, 2019-nCoV is the third coronavirus to emerge in the human population in the past two decades — an emergence that has put global public health institutions on high alert.²⁴ The virus was later named SARS-CoV-2, while the disease it causes was named COVID-19.

The World Health Organization declared a “public health emergency of international concern” on January 30th and the pandemic on March 11th. The WHO reported that the virus is primarily spread between people through close contact, often via droplets. Coughing and sneezing without covering the mouth can disperse droplets into the air. Touching or shaking hands with a person who has the virus can pass the virus between individuals. Making contact with a surface or object that has the virus and then touching the nose, eyes, or mouth.²⁵ There are various reports about how long the surfaces can be contaminated by the virus. Usual symptoms of the infection are fever, cough, shortness of breath, loss of sense of smell. The incubation time is usually five days, but it can vary from two to 14 days. Although dozens of companies and laboratories actively work on manufacturing there is no vaccine or specific antiviral therapy. Therefore the primary treatment is symptomatic and supportive therapy.

The question that is being more frequently asked is: did the WHO when declaring the pandemic followed its own rules and whether all the conditions for declaring a pandemic were met? When the pandemic was declared, the Associated Press commented that “by declaring the pandemic, the WHO wants to shake the inactive countries to try and apply every possible measure for containment of the virus spread”. The director-general of the WHO Tedros Adhanom Ghebreyesus said when he declared the pandemic that the WHO “made the assessment that COVID-19 can be characterized as a pandemic”, and that “WHO has been assessing this outbreak around the clock and we are deeply concerned both by the alarming levels of spread and severity and by the alarming levels of inaction.” Dr. Ghebreyesus continued and said that “Describing the situation as a pandemic does not change WHO’s assessment of the threat posed by this virus. It doesn’t change what WHO is doing, and it doesn’t change what countries should do”, and added that until then 57 countries reported less than 10 cases while 81 country does not have the infected while reminding that there are 118,000 infected in 114 countries and that 4,291 people died. Dr. Ghebreyesus made these comments on March 11th, 2020, in a speech in which he declared the COVID-19 pandemic.²⁶ The problem with the novel virus occurred

²³ <https://www.who.int/csr/don/12-january-2020-novel-coronavirus-china/en/>, 01/05/20

²⁴ Vincent Munster et al, *A Novel Coronavirus Emerging in China*, New England Journal of Medicine, Vol. 382, 2020, pp. 692-694

²⁵ Shrikrushna Subhash Unhale et al, *A Review on Corona Virus (COVID-19)*, International Journal of Pharmaceutical and Life Sciences, Vol. 6, Issue 4, 2020, pp. 109-115

²⁶ <https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020>, 01/05/20

when it was clear that the WHO does not have not only the best or the final solution, but no solution whatsoever, and therefore it did not justify its existence and its primary function.

Without an own verified doctrine that would respect economic, cultural, social, and civilization attributes of many different countries that are or could be hit with the disease, the WHO accepted unverified Chinese procedures, although there were different opinions and even resistance to drastic measures dictated by the Chinese procedures. The WHO also easily believed that the COVID-19 epidemic will remain a regional one, like with previous strains of coronaviruses that were put out by itself without serious human interventions, not to appear again. Additionally, since the start of the spread of the disease, there were suspicions that the Chinese did not share everything they know about the disease, as well as suspicion they hide important data on the number of infected and deceased. China was even then shyly accused of covering up the real danger and data. The authorities around the world reacted with travel bans and limitations, quarantines, curfews, and stay-at-home orders, as well as the closure of businesses.

The pandemic causes serious global socio-economical, political, and security disorders, including the largest global recession since the Great Depression²⁷. It led to postponing or canceling sports, religious, political, and cultural events, shortages in supply that was worsened by panic buying, but also to decreased emission of greenhouse gases. Schools, colleges, and universities were closed on a state or local basis in 194 countries, which hit around 98,5% of students in the world. All sporting events were stopped, the Olympic Games were postponed, as well as several continental sports championship tournaments. Nearly all commercial subjects changed the way they work or stopped working. Millions of employees were sent home, many of whom were left without an income. The traffic stopped. In six weeks eight million flights were canceled²⁸. Disinformation about the virus has spread over the Internet, causing xenophobia and discrimination against the Chinese people, or the people from areas with a high level of contagion.

A conspiracy, or complete powerlessness and ignorance

Powerless to scientifically explain the emergence of the virus, its spread, effects on the human organism, variances in morbidity and mortality, even in neighboring countries, various centers for opinion creation launched different theories that allegedly explain what the science cannot. And the situation with COVID-19 is strange, mysterious even. In Italy, the epicenter of the new coronavirus outbreak, the mortality rate in late March was 11%. At the same time, in nearby Germany, the same virus and disease led to the mortality rate of only 1%. In China that rate was

²⁷ The Great Depression was a worldwide economic depression that lasted 10 years. It began on "Black Thursday," Oct. 24, 1929. Over the next four days, stock prices fell 22% in the stock market crash of 1929.

²⁸ The average number of commercial airplane flights in the world is close to 200,000. The FlightRadar24 service, which covers global flights in real time, announced that on June 29th, 2018 there were 202,157 flights, which was the record. www.flightradar24.com, 30/04/20

4%, while Israel has the lowest mortality rate in the world, 0,35%. Is the data on mortality true, or is it a result of great confusion and different methodologies? Numerous controversies exist even in comments of exceptional medical experts exactly because of uncoordinated methodologies.

The spread of coronavirus posed a political threat in addition to health one for the Chinese authorities and president Xi Jinping (习近平), who faced the strongest eruption of discontent since he came to power. President Xi mobilized vast state machinery intending to defeat the disease, and to win a battle on another front as well – public discontent that was unseen since 2012 and his ascension to power, the *Wall Street Journal* reported²⁹. The Chinese leader faced anger and frustration about the reaction of the government to the spread of the disease, particularly the emotions stirred after the death of a young physician Li Wenliang (李文亮), an ophthalmologist in Wuhan Central Hospital, who was disciplined after he raised an early emergency after the coronavirus emerged. On December 30th, 2019, this physician, in a WeChat group consisting of his colleagues, warned that are confirmed cases of SARS in Wuhan. Several days later Li was taken to a police station where he was interrogated for “giving false comments on the Internet”, reprimanded and censored. He soon returned to work where he became infected with new coronavirus on January 8th, 2020. The death of the whistleblower Li Wenliang who was reprimanded because he warned about the novel virus instigated rare calls for political reform and freedom of speech in China, but these appeals were also censored on the Chinese networks. Li died more than a month after he raised the alarm about the virus similar to SARS in Wuhan. He was one of the eight physicians penalized by the Wuhan security services for “spreading rumors”.

The World Health Organization was accused many times for negligence and poor work, as well as for various malversations³⁰, for illegal commercial cooperation with the pharmaceutical industry and multinational corporations whose work is tied with public health. There were parliamentary debates, court proceedings, health ministers were deposed³¹, but without any result. Recently (April 21st, 2020) regarding COVID-19 an indicative article was published in the renowned *New York Times Magazine*, which tells about a crucial omission of the WHO which helped the spread of the contagion, and which could bring more troubles to health, security and life of people in the future.

”On a cold morning in February 2018, a group of 30 microbiologists, zoologists, and public-health experts from around the world met at the headquarters of the World Health Organization in Geneva. The group was established by the W.H.O. in

²⁹ <https://www.wsj.com/articles/the-west-is-misinterpreting-wuhans-coronavirus-progressand-drawing-the-wrong-lessons-11585074966>, 30/04/20

³⁰ A parliamentary commission of the Council of Europe investigated the topic of “false pandemic” declared by the WHO in 2009 based on reports of pharmaceutical companies Glaxo Smith Klein, Roche, Novartis, which sold hundreds of millions of vaccines and drugs to European countries, which turned out to be unnecessary.

³¹ The Polish health minister Ewa Bożena Kopacz was removed from office in 2011 after conflict with the WHO, as WHO was commercially connected with pharmaceutical companies who had big profits on drugs and vaccines. Even the Polish then-ombudsman Janusz Kochanowski launched criminal proceedings against Ewa Kopacz on request of the pharmaceutical lobby.

2015 to create a priority list of dangerous viruses - specifically, those for which no vaccines or drugs were already in development. The consensus, at least among those in the room, was that as populations and global travel continued to grow and development increasingly pushed into wild areas, it was almost inevitable that once-containable local outbreaks, like SARS or Ebola, could become global disasters. The final list — which did contain SARS and MERS, along with seven other respiratory, hemorrhagic, or otherwise-lethal viruses — also included something the W.H.O. dubbed “Disease X”: a stand-in for all the unknown pathogens, or devastating variations on existing pathogens, that had yet to emerge.³² Peter Daszak, director of a pandemic-prevention group EcoHealth Alliance and the chairman of the Forum on Microbial Threats at the National Academies of Sciences, Engineering, and Medicine, was present at that meeting. For the *New York Times Magazine*, Daszak told that „the disease caused by the virus SARS-CoV-2, as exactly the kind of threat that Disease X was meant to represent: a novel, highly infectious coronavirus, with a high mortality rate, and no existing treatment or prevention. The problem isn’t that prevention was impossible,” Daszak said. “It was very possible. But we didn’t do it. Governments thought it was too expensive. Pharmaceutical companies operate for profit. And the W.H.O., for the most part, had neither the funding nor the power to enforce the large-scale global collaboration necessary to combat it. As COVID-19 has spread around the world, overwhelming hospitals and even mortuaries, there has been widespread consternation over how we could have been caught so flat-footed by a virus. Given all the shining advances of high-tech medicine — computer-controlled surgery, unprecedented immunotherapies, artificial-intelligence programs for assessing heart-disease risk — this failure feels utterly baffling. How could the entire world remain so powerless?”³³

One of the answers could be heard in the podcast “This Week In Virology“, where a pediatric infectious disease physician and virologist Mark Denison of the Vanderbilt University presented a pan-viral drug *remdesivir*, which he helped discover as a possible treatment for coronaviruses caused diseases. The drug was developed for the treatment of hepatitis C but proved ineffective against it, as well as against Ebola or Marburg virus disease. Vincent Racaniello, a Higgins professor in the Department of Microbiology and Immunology at Columbia University came to a disheartening conclusion in a podcast: “We knew after SARS that bats in China had SARS-like coronavirus. We didn't know that before, and it would have been pretty straightforward to get a few of those isolated and develop drugs that blocked them”³⁴. He continued to comment that the development of such drugs require large investments, concluding that „That's not the way companies work, so you know if somehow we can get around that model, you know even governments have to participate, nonprofits, we could have been ready.“

³² Jennifer Kahn, *How Scientists Could Stop the Next Pandemic Before It Starts*, <https://www.nytimes.com/2020/04/21/magazine/pandemic-vaccine.html?searchResultPosition=1>, 01/05/20

³³ Ibid

³⁴ <https://www.wfaa.com/article/news/health/coronavirus/virology-professor-coronavirus-facts/287-30148acf-086a-4407-ae19-42b8aba5a060>, 04/05/20

Controversy 1: All the media, local and international, as well as specialized websites, report about the number of “diseased” from coronavirus. There are 3,952,183 of such people on this day and hour³⁵. Nonetheless, it would be correct to say that that number is the number of persons who tested positive for coronavirus, out of which the majority have no symptoms nor afflictions, and by definition, they are not diseased. At this moment there is no evidence of intent to display the situation worse than it is. It would rather be that the confusion is a result of the lack of methodology or simply – ignorance.

Controversy 2: The number of deceased should be a fact and not an estimation. Still, in the majority of countries, including Serbia direct causes of deaths are not determined, but all the deaths are attributed to coronavirus. That is the explanation of why certain countries have an enormous number of deaths, while some others do not. In late March 2020 Italian physician Walter Ricciardi, who is a scientific advisor in the Italian Ministry of Health said that the coronavirus is a true cause of death for a very small percent of people who had died in Italy. “On re-evaluation by the National Institute of Health, only 12 percent of death certificates have shown a direct causality from coronavirus, while 88 percent of patients who have died have at least one pre-morbidity - many had two or three³⁶”. This certainly does not mean that the coronavirus infection did not contribute to those deaths – it certainly did, but it confirms the controversy on the true number of deaths directly caused by COVID-19.

Controversy 3: Share of COVID-19 deaths in the total number of deaths. According to official data³⁷ during this year, there were 20,750,000 total deaths from all the causes combined, while since the emergence of the novel coronavirus up to this moment 273,795 persons had died because of COVID-19. On this day³⁸ the total number of global deaths is 128,000, while the number of COVID-19 related deaths is 3,370.

The important information is the relation of the number of coronavirus deaths and the number of deaths caused by other factors. According to the American National Center for Health Statistics³⁹, death-related statistics in the USA in 2019 were:

- Number of deaths: 2,813,503
- Death rate: 863.8 deaths per 100,000 population
- Life expectancy: 78.6 years
- Infant Mortality rate: 5.79 deaths per 1,000 live births

Additionally, the number of deaths for leading causes of death was:

- Heart disease: 647,457
- Cancer: 599,108

³⁵ The data was refreshed on May 8th, 2020 at 17:30h, according to worldometers.info, a specialized statistical website. This site grew with the development of the COVID-19 pandemic, and on May 8th it was the 74th most visited website in the world, while it was 6,494th three months before.

³⁶ <https://www.telegraph.co.uk/global-health/science-and-disease/have-many-coronavirus-patients-died-italy/>, 06/05/20

³⁷ <https://www.worldometers.info/coronavirus/>, 06/05/20

³⁸ Data retrieved on May 8th, 2020 from the website worldometers.info

³⁹ <https://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm>, 07/05/20

- Accidents (unintentional injuries): 169,936
- Chronic lower respiratory diseases: 160,201
- Stroke (cerebrovascular diseases): 146,383
- Alzheimer’s disease: 121,404
- Diabetes: 83,564
- Influenza and pneumonia: 55,672
- Nephritis, nephrotic syndrome and nephrosis: 50,633
- Intentional self-harm (suicide): 47,173

What does all of this mean? Well, dying is a natural process, even during an epidemic. The difference is that this year each person who died of COVID-19 is registered. The number of people who died from that disease is the only one that is announced publicly, and there were 273,795. People who succumbed to other diseases are not announced publicly and there were 20,750,000. Is it a certain kind of pressure of health authorities on citizens to justify some misgivings or poor work about which we shouldn’t talk at this moment?

Controversy 4: The origin of the virus is a true modern Rashomon. A controversial French scientist Luc Montagnier, the recipient of the 2008 Nobel prize for medicine for his research of HIV, said that he is certain that the novel coronavirus was created artificially. “The COVID-19 disease was created in a laboratory in Wuhan, specialized for coronaviruses research for a decade. The scientists probably imported RNA from HIV while searching for a vaccine, so the manipulation occurred. I don’t know how the virus got out of the laboratory”, Montagnier said on CNEWS TV. His statements stirred up the public and experts, and the Pasteur Institute in Paris denied such claims. American president Donald Trump has a similar opinion. He publicly calls the virus “the Chinese virus” and accuses China of negligence in allowing the virus to “escape” from a laboratory, and then covered that and other facts until the virus could not be hidden any longer. Another unsubstantiated claim was that the coronavirus is a part of the Chinese biological warfare program and that it was created in a lab of the Institute of Virology in Wuhan. Many social media users shared two articles from the Washington Times quoting a former Israeli intelligence officer, which not only offers no evidence and even the quoted officer says in the article that “there is no evidence or indications of that, for now”. One theory tied the virus with the researchers from the National Laboratory for Microbiology of Canada. A virologist Xiangguo Qiu, her husband, and several Chinese students were allegedly expelled from the lab for “breaking the rules”, the Canadian national broadcaster CBC reported. The police, however, announced that there was no threat to public security. Another theory is that dr Xiangguo visited a laboratory in Wuhan twice over the last year and that together with her husband, specialized for coronaviruses research, they are a “spy ring”. None of the news was confirmed, which CBC reported later.

Controversy 5: Distribution of the virus. For now, it is not explainable why the virus has much higher virulence in one country compared to the neighboring one. For instance, Toronto and Chicago are both on shores of Great Lakes, and they are 350 km from another. In Chicago, there were 38,668 diseased and 1,673 dead,

while Toronto had 7,114 diseased and 532 deaths. Why is there so vast difference between Italy and Greece? Is it due to a difference in virus mutation or genetic difference of the people? If the coronavirus is spread by massive unhygienic contacts, why Bangladesh has a similar number of deaths to Serbia, a number smaller than the number of people packed in and on a train car?

How to explain that the disease hit hardest the countries that have the highest level of health care, most Nobel prize winners in fields of medicine and pharmacy. They have the best hospitals, institutes, researchers, billions of dollars at their disposal – and they couldn't do anything with all that. What truly happened?

Table 1 – *The number of COVID-19 cases and deaths per country on May 5th, 2020*⁴⁰

| Country | Number of cases | Number of deaths | Deaths per 1 mil. |
|---------|-----------------|------------------|-------------------|
| USA | 1,292,879 | 76,942 | 232 |
| Spain | 256,855 | 26,070 | 558 |
| Italy | 215,858 | 29,958 | 495 |
| UK | 206,715 | 30,615 | 451 |
| Russia | 187,859 | 1,723 | 12 |
| France | 174,791 | 25,987 | 398 |
| Germany | 169,430 | 7,392 | 88 |
| Brazil | 135,773 | 9,190 | 43 |
| Iran | 104,691 | 6,541 | 78 |
| China | 82,886 | 4,633 | 3 |
| Serbia | 9,848 | 206 | 24 |

The WHO recommended strict hygiene and isolation measures that some countries transformed in a draconian pressure on their citizens and economy. Nonetheless, researches conducted around the world show that mass testing does not prove anything, and particularly that isolation is not a good solution. The governor of the state of New York, Andrew Cuomo, told⁴¹ that in that state 66% of the newly infected were in isolation and did not go anywhere,

Discussion

From the disease, more than 250,000 people had died in the world, and another 50,000 are listed as “serious or critical”⁴². Physicians are still far from a vaccine or any specific treatment. The only “treatment” the WHO “prescribes” is the prevention of contagion, or isolation, and that concept, per number of newly infected and deceased, does not give good enough results. For such treatment, we don't need the WHO and thousands of medical doctors it employs. On the other side, the system promoted by the WHO strains local and global economies and decreases the worth

⁴⁰ <https://www.worldometers.info/coronavirus/>, 08/05/20

⁴¹ <https://www.cnn.com/video/2020/05/06/new-york-gov-andrew-cuomo-says-its-shocking-most-new-coronavirus-cases-were-people-who-stayed-at-home.html>, 08/05/20

⁴² <https://www.worldometers.info/coronavirus/>, 03/05/20

of the basic life values we know: freedom, entrepreneurship, money, socializing, security, future. Without these values, life does not have much sense, so many individuals who think that life after the pandemic will not have the same values. According to the Bible, two of the apocalypse riders are already here – Pestilence and Death, as well as inhuman and medieval-like treatment of the bodies of the deceased, like in some medieval plague chronicle. Corpses of hundreds of the deceased, if they are lucky, lie in refrigerators, and if they luck out, like in Ecuador⁴³, they remain for days on the streets or floors where they fell and died. The countries that together with the WHO could not or would not provide the medication for their citizens now cannot bury them properly.

In local media recently an interesting comparison was published, which can be very indicative, and it compared Serbia and Belarus as two countries with a polar opposite approach to the pandemic⁴⁴. After initial inaction, Serbia accepted the recommendations of the WHO, and especially the rigid recommendations of the Chinese medical doctors. So Serbia was “among the countries with the strictest measures for coronavirus containment in the world. Still, the curfew and draconian measures did not give expected results. On the map of countries with the most cases in Eastern Europe, Serbia shares the position with Belarus, where they “treat corona with vodka” and do not undertake absolutely no measures of the protection from the virus”.

Table 2 – *The number of COVID-19 cases and deaths in Serbia and Belarus on May 5th, 2020⁴⁵*

| Country | Number of cases | Number of deaths | Deaths per 1 mil. |
|---------|-----------------|------------------|-------------------|
| Serbia | 9,848 | 206 | 24 |
| Belarus | 20,168 | 116 | 12 |

Why despite the declaring the state of emergency, a curfew, prohibition of leaving home for older than 65, sufficient number of ventilators, masks, improvised hospitals, social distancing, and timely testing, Serbia has the same number of infected as a country where COVID-19 is “treated with vodka”?

This paper is not a place where we shall discuss why the WHO has no vaccine against the Disease X. If the vaccine existed, we would talk about an epidemic that was stopped in China, and life in the rest of the world would continue as usual. Only a small number of people would become ill, some would probably die. Nonetheless, by their fault, and probably not wanting to come in conflict with large pharmaceutical companies, the WHO left humanity without a vaccine, which they were not able to create alone, so they had to recommend bans, quarantines, and testing of millions of people.

Still, things do not work as planned. Now it is clear what economic damage was made in only two months. It became clear that the disease will remain with us

⁴³ <https://www.bbc.com/news/world-latin-america-52329500>, 03/05/20

⁴⁴ <https://nova.rs/drustvo/srbija-ima-zarazenih-kao-belorusija-gde-koronu-lece-votkom/>, 08/05/20

⁴⁵ <https://www.worldometers.info/coronavirus/>, 08/05/20

for a long time, despite assurances that the virus, like in previous cases, will disappear in a short time. It is impossible to block life for a year or two. Something is very wrong in the strategy and the recommendations of the WHO.

The information from the WHO point that the organization is intensely looking for an exit strategy, and tries to find a way to exit the first wave of the pandemic, in hopes that the vaccine will arrive soon, and it is indicative that no one will ask how much it costs⁴⁶. Someone will make money from this situation. It seems that the WHO changes its recommended strategy of strict isolation with arrest and drastic penalizing of the offenders. Recently Michael Ryan, Executive Director of the World Health Organization's Health Emergencies Programme where he leads the team responsible for the international containment and treatment of COVID-19, told the New York Daily News that Sweden is an example to be followed, despite being objected to harsh criticism for refusing to close the country and implement strict measures. Dr. Ryan said that Sweden has a “very strong public health policy” and that “to reach a ‘new normal’, in many ways Sweden represents a future model”. He continued to praise the trust this Scandinavian country had in their community in implementing social distancing measures. This statement further contradicts all the recommendations issued by the WHO earlier and adds to the confusion.

Conclusion

The population of Earth organized in countries and narrower social communities have shown on many occasions a frighteningly low level of self-responsibility. *Homo homini lupus est* endangers life on Earth far too often. Here we remind of the Disease X and a missed chance to obtain a cure, not only for COVID-19 but many other diseases that might emerge among people in the future, for several billions of dollars. The pharmaceutical companies and research then said that it is not worthwhile for them as they cannot make a profit, and countries did not want to invest money in research and manufacture of the cure.

In the containment of pandemic different countries had a different approach, as the WHO recommendations are not mandatory. Some countries, like China, quickly introduced extremely strict measures, and they put the city of Wuhan and other 15 cities in the Hubei province in strict quarantine. By doing that the Chinese created the largest *cordon sanitaire* in human history, locking down 57,000,000 residents of that province. In addition to quarantine, other restrictive measures were imposed, such as electronic surveillance, and even welding the doors so the citizens would be physically prevented from leaving, which opened many questions regarding human rights. Nonetheless, when the pandemic began to spread quickly, other countries followed the Chinese model, including Serbia, which introduced very strict preventative measures in coordination with the Chinese experts. On the other side, South Korea, which was one of the first countries hit by the epidemic after China,

⁴⁶ <https://www.nydailynews.com/coronavirus/ny-coronavirus-who-emergency-expert-20200430-rsa3s3lm6bfk3fjofw3oezrxu-story.html>, 05/05/20

did not introduce isolation except for infected and their immediate contacts, and with mass testing, they were able to identify the carriers and prevent uncontrolled spread, so the example of South Korea is given as one of the most successful in the containment of the COVID-19 pandemic. Sweden was criticized for a long time for not introducing mandatory measures of isolation and closures, only to be hailed later as the best-balanced model, both from an epidemiological and socio-economical standpoint. Some countries, like Belarus, rejected the threat and the everyday life of the people did not change, and the results were not only not disastrous as many predicted from the outside but weren't drastically different compared to countries who had much stricter approach. Therein lies another contradictory aspect of the pandemic, and another proof that this is a completely new virus and a disease and the knowledge is lacking – regardless of the measures introduced, its volume and duration, results are similar, which can bring up the question of credibility of the WHO in recommending measures for containment of the COVID-19 pandemic.

To paraphrase Bertrand Russell from the beginning of this paper, nature now returned to people and it is frenzied. It returned with a stick. The fast spread of COVID-19 has shocked the world. The total death toll cannot be precisely predicted. Neither can the economic toll. The International Labor Organization⁴⁷ estimates that so far 25 million jobs were lost, and the losses occurred due to closures of work is 3,4 trillion dollars. That is only an estimation based on the facts known at the moment, so the total consequences of unpreparedness for the pandemic can be far worse.

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НЕДОСТАК БЕЗБЕДНОСНЕ КУЛТУРЕ У СУОЧАВАЊУ СА ПАНДЕМИЈОМ КОВИД-19

Сажетак: Актуелна пандемија болести Ковид-19, изазвана новим људским корона вирусом SARS-Cov-2, по много аспеката догађај је без преседана у новијој људ-

ској историји. Захвативши готово све земље света у мањој или већој мери, и изазвавши снажне рестриктивне реакције у много држава, ова текућа пандемија представља можда највећи друштвени изазов ове генерације, и прети да трајно промени живот какав знамо. Као кровна организација за бригу о глобалном јавном здрављу, СЗО је добила водећу улогу у промовисању најоптималнијих мера за сузбијање пандемије, али њене реакције су изазвале и одређене контрадикторности. Без развијене безбедносне културе у домену јавног здравља, и без поука извучених из претходних пандемија и епидемија, различите државе примењивале су различите мере. И док су одређене државе биле погођеније од других без обзира на предузете активности, оно што је заједничко за готово све је да економија трпи највећи ударац. Чињеница да се ова пандемија одвија у тренутку када је интернет доминантни вид информисања и комуникације, довела је до тога да су из недостатка контроле истинитости информација које се објављују проистекле бројне контроверзе и дезинформације, што мора да у перспективи резултира преиспитивањем критеријума кредибилности, што је још једна од консеквенци неспремности света да се суочи са једном пандемијом великих размера.

Кључне речи: корона вирус, Ковид-19, пандемија, СЗО, безбедносна култура, мере сузбијања и превенције, контроверзе

