ANALYTICAL ESSAY

Contesting Legitimacy of Global Governance Institutions: The Case of the World Health Organization During the Coronavirus Pandemic

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This article examines the (de)legitimation of a global governance institution (GGI) in the throes of a full-blown legitimacy crisis: the World Health Organization (WHO) during the coronavirus pandemic. Substantively, it fleshes out systematically the discursive (de)legitimating practices of six (types of) actors: the Trump administration, US allies, US quality press, global health-scientific community, the WHO, and the Chinese government. To that end, it synthesizes elements from the rich literature on legitimacy and elaborates a conceptual apparatus bolstered by operational sources of legitimacy. Empirically, it is grounded in a qualitative content analysis of a purpose-built data corpus of 458 texts that contain justifications for (de)legitimation. In so doing, this study not only presents a holistic and yet granular view of discursive (de)legitimation by some pivotal actors surrounding the WHO and its pandemic response, but offers general insights on legitimacy and (de)legitimation of GGIs during times of crisis.

Este artículo examina la (des)legitimación de una institución de governanza mundial (Global Governance Institution, GGI) en medio de una crisis de legitimidad en estado avanzado: la Organización Mundial de la Salud (OMS) durante la pandemia de coronavirus. De manera sustancial, complementa sistemáticamente las prácticas discursivas (des)legitimatoras de seis (tipos de) actores: la administración de Trump, los aliados de los Estados Unidos, la prensa de calidad estadounidense, la comunidad científico-sanitaria mundial, la OMS y el Gobierno chino. Para ello, sintetiza elementos de la abundante literatura sobre la legitimidad y elabora un aparato conceptual que se refuerza con las fuentes operativas de la legitimidad. Empíricamente, se basa en el análisis cualitativo de contenidos de un corpus de datos diseñado específicamente que incluye 458 textos con justificaciones para la (des)legitimación. Haciendo esto, este estudio no solo presenta una visión integral pero muy detallada de la (des)legitimación discursiva por parte de algunos actores fundamentales que rodean a la OMS y su respuesta a la pandemia, sino que ofrece
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percepciones generales sobre la legitimidad y la (des)legitimación de las GGI en tiempos de crisis.

Cet article examine la (dé)légitimation d’une institution de gouvernance mondiale dans les affres d’une crise de légitimité généralisée : l’Organisation mondiale de la santé (OMS) durant la pandémie de coronavirus. En substance, il étoffe systématiquement les pratiques discursives de (dé)légitimation de six (types d’) acteurs : l’administration Trump, les alliés des États-Unis, la presse de qualité des États-Unis, la communauté sanitaire/scientifique internationale, l’OMS et le gouvernement chinois. À cette fin, cet article synthétise des éléments issus de la riche littérature sur la légitimité et élabore un appareil conceptuel étayé par des sources opérationnelles de légitimité. Du point de vue empirique, il est basé sur une analyse de contenu qualitative d’un corpus de données conçu sur mesure constitué de 458 textes comprenant des justifications de la (dé)légitimation. Ce faisant, cette étude présente non seulement une vue holistique mais pourtant granulaire de la (dé)légitimation discursive de certains acteurs pivots entourant l’OMS et sa réponse à la pandémie, mais elle offre également des renseignements généraux sur la légitimité et la (dé)légitimation des institutions de gouvernance mondiale en temps de crise.

Keywords: World Health Organization, legitimacy contest, (dé)legitimation
Palabras clave: organización mundial de la salud, disputa por la legitimidad, (des)legitimación
Mots clés: organisation mondiale de la santé, contestation de légitimité, (dé)légitimation

Introduction

Global governance institutions (GGIs) have increasingly been challenged on legitimacy grounds (Lenz and Viola 2017; Zürn 2018; Kentikelenis and Voeten 2020). Due to the increasing demands for legitimacy (Zürn 2004) and the imperative to mobilize support and attendant resources, GGIs face sustained pressure of acquiring, maintaining, losing, and regaining legitimacy. This has prompted an increasing number of legitimacy contests, pitting proponents of GGIs against critics of their governance. This study zooms in on a recent paradigmatic case centering on the World Health Organization (WHO) during the coronavirus pandemic.

The WHO had experienced a series of (legitimacy) crises before, not least for its patchy performance during global health emergencies (Hanrieder and Kreuder-Sonnen 2014; McInnes 2015). It was put under spotlight and sometimes heavily criticized during the 1990s/2000s HIV/AIDS pandemic, 2002/3 SARS endemic, 2009 H1N1 influenza pandemic, and 2014/2015 Ebola virus outbreak (Lee and Piper 2020). Other issues such as its sweeping mandate (“health for all” leading to mission creep, see Hanrieder 2020), fragmented governance (Graham 2014), ambiguity and rigidity in the legal framework stipulating obligations of the WHO and national governments during disease outbreaks—the International Health Regulations (IHR), also raised questions.

During the coronavirus pandemic, the legitimacy crisis faced by the WHO coincided with the unprecedented devastation wrought by the coronavirus and the utmost urgency for the body to fulfill its role in mounting a global response. As the United Nations’ specialized agency responsible for directing and coordinating global health work, the WHO is mandated and arguably best positioned to organize the international response. Yet the agency was plunged into a state of deep crisis.
It was caught in power politics between the United States and China, with the former accusing the organization of being obsequious toward Beijing and failing to act promptly and properly. Full-throated attacks of the Trump administration and its withdrawal of funding and membership, coupled with concomitant politicization of the agency and foregrounding of its structural problems (Gostin et al. 2021), led to “a concerning loss of confidence in the WHO at a time when the world needs it the most” (Lee and Piper 2020, 524).

Substantively, the WHO drew a barrage of sharp criticism from the Trump administration, allegedly for its “role in severely mismanaging and covering up the spread of the coronavirus” (White House 2020a). Citing concerns over the WHO’s mishandling of the outbreak and perceived lack of neutrality, the administration blocked a joint commitment by the G20 health ministers to strengthen the WHO’s mandate in April 2020 (Bollyky and Fidler 2020), suspended funding to the organization in May 2020, and terminated membership 2 months later. Shortly after the withdrawal decision, the State Department (2020a) made a follow-up announcement to redirect funding, recall personnel, and opt out of Covax (a global initiative co-led by the WHO aiming to ensure equitable access to COVID-19 vaccines). US senior officials also repeatedly floated the idea of establishing a WHO alternative (State Department 2020b). Such attacks at the WHO by the Trump administration were arguably little surprising given its trademark disdain for expertise and multilateralism, and the urgent need for it to deflect blame for domestic failures in view of the 2020 presidential elections.

However, the Trump administration was not alone in questioning the global health governing authority. Its negative assessment was echoed to varying degrees by other actors. In May 2020 during the annual World Health Assembly (WHA)—the WHO’s highest decision-making forum, a COVID-19 resolution was adopted by consensus, which demanded a full independent review of the global pandemic response, including that of the agency. Beyond WHO members, Taiwan repeatedly accused the organization of being too deferential toward Beijing (Chen and Cohen 2020). A petition calling for the resignation of Director-General Tedros was launched in February 2020 and shortly garnered more than one million signatures (Change.org 2020). Moreover, some health professionals faulted the agency for its hesitancy to recommend wearing masks and equivocation on the possibility of asymptomatic and airborne transmission (Boseley 2020; Morawska and Milton 2020).

Irrespective of the validity of these charges, the confluence of politically fraught questions over procedural correctness and performance, increased mediatization and politicization, and enormous difficulties wrestling with a full-blown pandemic, piled huge pressure on the WHO. To fend off criticism and shore up legitimacy, the embattled organization redoubled (self-)legitimating efforts. It held regular press conferences to explain, and in some instances, defend its decisions. It engaged in legitimacy-boosting institutional practices like the initiation of an Independent Panel for Pandemic Preparedness and Response (IPPR) to evaluate the pandemic response of the agency (and that of individual members) in July 2020 (WHO 2020a). In response to the Trump administration’s attacks, many others including WHO members, media, and scientists came to the defense of the WHO. Apart from lending high-level rhetorical support, some pledged extra funding. Countries including the United Kingdom, France, Germany, Japan, and China increased financial contributions and backed WHO-led efforts such as Covax. The Gates Foundation, the second largest contributor to the WHO’s budget after the United States, also made extra funding available. It was estimated that between January and November 2020, private donors contributed a total of fifteen billion US dollars to the COVID-19 response (Agostinis et al. 2021, 322).

Together, these contending perspectives and actions attested to the intensity of the legitimacy contest centering on the organization. The study at hand focuses on
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this contest at the level of discourse and the important actors featured therein. The overarching research question is formulated as: how did different actors seek to discursively (de)legitimate the WHO during the coronavirus pandemic? To that end, a qualitative content analysis of a purpose-built corpus is conducted along the lines of a conceptual apparatus informed by a systematic synthesis of the rich scholarship on legitimacy.

In doing so, the study seeks to make both conceptual and empirical contributions. Conceptually, it builds a framework that makes fine-grained distinctions between legitimacy types/sources and includes some oft-overlooked sources (see infra). Such a framework offers increased analytical purchase for empirical mapping exercises, as evidenced by the present case study. The study also makes the case for using a holistic approach to look at legitimacy and (de)legitimation as different types/sources of legitimacy are intertwined in practices of (de)legitimation, and for privileging a sociological understanding of legitimacy with a focus on perceptions and beliefs as legitimacy evaluations of an entity may differ considerably across audiences and be motivated by self-interest. Further, it showcases that (de)legitimation can be examined as per types of justification advanced on legitimacy indicators, thus providing an alternative to classifying (de)legitimation based on different types of audience (Gronau and Schmidtke 2016) or types of practice (Bäckstrand and Söderbaum 2018).

Empirically, the research provides a systematic mapping of the (de)legitimating discourses by parsing out the discursive contestation through the lens of legitimacy and (de)legitimation, and by identifying the contending perspectives and justifications advanced by different actors. This results in a holistic and yet granular view on the polarized debate on the WHO and its pandemic response. Substantively, the central argument, grounded in the systematic mapping exercise, is twofold. First, the WHO was defended by a wide array of actors during the pandemic owing primarily to its almost taken-for-granted instrumental legitimacy (rather than procedural and performance legitimacy). This significantly blunted the Trump administration’s diffuse delegitimation of the organization. Second, apart from apparent divergence in the positioning of key actors vis-à-vis the WHO, substantial differences existed between a technical/technocratic and politicized assessment of the legitimacy of the WHO and its pandemic response. Despite occasional lament on the WHO’s limited power and funding, global health-scientific professionals and WHO staff were predominantly positive about the appropriateness and effectiveness of the agency’s actions and policies. In a politicized milieu, the debate was characterized by polarization in the form of blanket approval (China) or categorical censure (the United States). Most accounts, as shown by the analysis of the discourses of US allies and US quality press, sought to stake out a middle ground. They recognized the WHO’s utility and centrality but also its flaws and potential failings, hence in need of reform.

Unpacking Legitimacy and (De)Legitimation

Legitimacy is without doubt one of the most essentially contested concepts in the social sciences. It is widely recognized to be a concept of central importance in IR scholarship (Clark 2007a, 325). Some have noted its definitional ambiguity (Brasnett and Tsingou 2011; Steffek 2003) and the imperative to avoid conflating it with such concepts as authority, justice, rationality, democracy, compliance, and support (Franck 1995; Hurd 1999; Buchanan and Keohane 2006; Reus-Smit 2007; Koppell 2008; Keohane 2011). Despite its conceptual pluralism, legitimacy is generally understood as the right to act, rule, or govern (Reus-Smit 2007, 158). In a definition that captures disparate uses of legitimacy across disciplines, Suchman (1995, 574) conceives of legitimacy as “a generalized perception or assumption that the actions of an entity are desirable, proper, appropriate.” Similarly, Tyler (2006, 376) defines
legitimacy as “the belief that authorities, institutions, and social arrangements are appropriate, proper, and just.” In this sense, legitimacy is a desirable quality ascribed to “an actor’s identity, interests, or practices, or to an institution’s norms, rules and principles” (Reus-Smit 2007, 159).

Legitimacy is desirable because it elicits voluntary compliance based on normative conviction. As Zürn (2021, 200) postulates, “any system of rule and any authority that is considered legitimate is ceteris paribus much more efficient and effective than one without legitimacy.” Legitimacy is particularly important for GGIs as it offers an authority-exercising mechanism alternative to coercion (power) and material inducement (interest), which are “often unavailable, in short supply, or costly to use” in the global governance context (Bernstein 2011, 20; see also Hurd 1999). The more a GGI is (perceived to be) legitimate, the more it is “able to obtain resources, take decisions, secure compliance, and, ultimately, mitigate problems” (Dellmuth et al. 2019, 627). Also, legitimacy is critical for a GGI in its competition with alternative governance sites in an era of “contested multilateralism” wherein dissatisfied (coalitions of) states and nonstate actors can opt for other multilaterals or simply establish new ones (Morse and Keohane 2014; Zürn 2018).

Legitimacy is intrinsically dynamic. It waxes and wanes as a function of endogenous and exogenous factors. A GGI may be marred by a legitimacy gap: a disparity “between claims to the fairness and rightfulness of policy actions by those who seek to govern, and the conferral of legitimacy on these claims through beliefs-driven acts by those being governed” (Seabrooke 2007, 252). Or worse, it may suffer an acute legitimacy crisis, namely a “critical turning point when decline in an actor’s or institution’s legitimacy forces adaption... or disempowerment” (Reus-Smit 2007, 167), as a result of notable changes in the social-political environment within which it operates. These can be the advent of “black swan” events, protests by state representatives and civil society organizations (Gregoratti and Uhlin 2018), or shifts in what actually constitutes normative appropriateness (Clark 2007b; Lenz and Viola 2017; Imerman 2018, 75).

A GGI’s legitimacy equally rests on the practices its proponents perform for the purpose of establishing and boosting legitimacy—also known as legitimation. Reus-Smit (2007, 159) defines legitimation as a “normative process... characterized by actors seeking to justify their identifies, interests, practices, or institutional designs.” Proponents of a GGI assert legitimacy for the institution by making claims that are aligned with the widely-shared social norms that prescribe standards of appropriateness (March and Olsen 1998; Reus-Smit 2007, 163), or in the words of Pouliot and Thérien (2018), by couching the GGI and its action in a language of supposedly “universal values.” This understanding implies that legitimation is essentially a discursive phenomenon (Reus-Smit 2007, 163; Steffek 2003).

Discursive legitimation, by means of communicative acts such as arguing, rhetorical action, or indirect speech (Risse 2000; Schimmelfennig 2001; Stephan 2015), invokes good arguments about the goals, procedures, and policies of a GGI in order to cultivate beliefs in its legitimacy and secure approval and support (Steffek 2003). Conversely, discursive delegitimation aims to contest and undermine legitimacy, with a view to creating or reinforcing “a sense of negative, morally reprehensible or otherwise unacceptable action or overall state of affairs” (Vaara 2014, 503). It involves negative assessments of a GGI and manifests in public criticisms of its lack of purposes, unfair decision-making procedures, or poor performance (Tallberg and Zürn 2019, 588–9). Further, discursive delegitimation can come in two variants: diffuse and specific. This mirrors the distinction between diffuse and specific protest made by Gregoratti and Uhlin (2018). The former rejects the authority of a GGI as a whole, including its purposes, principles, and governing structure, whereas the latter questions the appropriateness and effectiveness of specific policies and practices (Gregoratti and Uhlin 2018, 143–4).
It should be noted that discursive (de)legitimation is not the only strategy whereby actors attempt to assert or challenge legitimacy. In fact, discursive and nondiscursive (de)legitimation tend to go together. In addition to rhetorical measures, a GGI can use nondiscursive practices such as association, emulation, and cooption to assure legitimacy for itself or its policy (Heupel et al. 2021). Speech acts of (de)legitimation are frequently accompanied by substantive behaviors like institutional reform or challenge, participation in or resistance to GGI’s activities (Gronau and Schmidtke 2016; Bäckstrand and Söderbaum 2018, 542; Tallberg and Zürn 2019, 588–9). This study focuses squarely on the discursive dimension, which is “an important way of getting to the heart of IO legitimation process” (Binder and Heupel 2021, 2).

Equally, legitimation and delegitimation are best studied together, for at least two reasons. First, the need to legitimate emanates in part from delegitimating practices. Legitimation is motivated primarily by two factors: visibility and the need for mobilizing support (Goddard and Krebs 2015). Delegitimation accentuates the need for legitimation because public disapproval of a GGI and its action not only catapults the governing institution into prominence and contributes to its politicization, but also erodes confidence and undermines its ability to mobilize publics and resources. Second, legitimation in the form of advancing legitimacy claims does not exist in isolation but is “laced through with contestation” (Goddard and Krebs 2015, 15). Clearly, contestation exists between proponents of a GGI and detractors of its governance. Whereas the former seeks to cultivate beliefs in legitimacy, the latter questions whether authority is appropriately exercised (Tallberg and Zürn 2019, 588). For a GGI to be deemed legitimate, normative justifications advanced by proponents need to prevail over delegitimating arguments of critics.

Sources of Legitimacy and Practices of Discursive (De)Legitimation

The rich and fast-growing body of literature on legitimacy sheds considerable light on the variety of factors wedded to legitimacy, the bulk of which fall under input (procedure) and output (performance). Table 1 gives an overview of the select legitimacy studies discussed here and their conception of legitimacy types/sources.

Studies of legitimacy/legitimation generally start from a widely accepted understanding of legitimacy as the diffuse support for governing actors or institutions independent of cost-benefit calculations and satisfaction with their (short-term) performance (Easton 1975; Caldeira and Gibson 1995; Gronau and Schmidtke 2016). Weber (1991) proposes a heuristic of three ideal legitimacy types based on charisma, traditions, and rules. To the extent that charisma and tradition were invoked for traditional forms of authority, conformity to correct procedures is an indispensable criterion in modern governance arrangements, as reflected in the following accounts of legitimacy. Suchman (1995) divides different notions of legitimacy into three basic categories: pragmatic (based on self-interest), moral (grounded in normative approval of procedure, performance, and purpose), and cognitive (as a function of comprehensibility and taken-for-grantedness). Koppell (2008, 182) focuses squarely on normative legitimacy and contends that pragmatic as a legitimacy type should be ruled out as it is based purely on self-interested calculations, and cognitive legitimacy is better understood as “an echo of normative legitimacy rather than a rationale onto itself.”

Scharpf (1999) also concentrates on normative legitimacy and distinguishes between input and output legitimacy. The former refers to the political process featured by representation and participation, mostly in the form of electoral input; the latter concerns the success in producing desired outcomes such as economic welfare. Noting the inadequacy of input–output divide,
Table 1. An overview of selected works on legitimacy

| Selected works                            | Legitimacy types/sources                                |
|-------------------------------------------|--------------------------------------------------------|
| Weber (1991)                              | charisma, tradition, rules                              |
| Suchman (1995)                            | pragmatic, normative/moral, cognitive                  |
| Koppell (2008)                            | normative/moral                                         |
| Scharpf (1999)                            | input, output                                           |
| Bodansky (1999)                           | source based, procedure, outcome                        |
| Hurd (2007)                               | fairness (in input and output), procedure, outcome    |
| Zaum (2013)                               | structural, procedure, outcome                         |
| Schmidt (2013)                            | throughput, input, output                               |
| Binder and Heupel (2015)                  | legality, procedure, performance                       |
| Steffek (2009), Lenz and Viola (2017)    | purpose/goal, procedure, performance                   |
| Dellmuth et al. (2019), Tallberg and Zürn (2019) | procedure, performance                  |
| Hurrell (2005)                            | procedure, substantive (policies justifiable based on shared norms), expertise, effectiveness, reason giving |
| Scholte (2011)                            | legality, democracy, morality, charismatic leadership, technical performance |
| Buchanan and Keohane (2006), Keohane (2011) | minimum moral acceptability, integrity, comparative benefit, accountability, transparency |

Schmidt (2013) proposes to add throughput, which focuses on the quality of governance processes (see also Schmidt and Wood 2019). Equally building on the input–output distinction, Bodansky (1999, 612) incorporates legitimacy derived from sources (e.g., tradition, consent), Hurd (2007, 67) identifies legitimacy grounded in fairness (in input and output), and Zaum (2013, 10) suggests legitimacy grounded in identity and particular qualities (structural legitimacy), as supplementary to the widely recognized procedural and performance legitimacy.

Some scholars develop their typology of legitimacy explicitly along procedure and performance, but make further distinctions. They do so by separating legality from procedure (Binder and Heupel 2015, 241) and purpose/goal from performance (Steffek 2009; Lenz and Viola 2017, 315), or by distinguishing between the different qualities (e.g., democratic, purposive) of procedure and performance (Dellmuth et al. 2019; Tallberg and Zürn 2019, 592). A number of scholars go beyond the overarching input–output conceptualization and sketch out a granular set of legitimacy sources. Hurrell (2005) suggests legitimacy stems from fair procedures, substantive policies that are in line with socially sanctioned norms, efficiency, expertise, and reason giving. Scholte (2011) proposes legality, democracy, morality, charismatic leadership, and technical performance. Along the lines of substantive and epistemic criteria, Keohane (2011) and Buchanan and Keohane (2006) identify minimum moral acceptability, institutional integrity, comparative benefit, accountability, and transparency as normative standards of legitimacy.

Synthesizing different elements from the extant literature on legitimacy, this research develops an analytical framework that incorporates different legitimacy sources. While most existing analyses operate with overall distinctions such as input–output or procedure–performance, this study develops a more granular framework. First, following Steffek (2009) and Lenz and Viola (2017), it distinguishes between purpose and performance. Such a distinction is warranted by the need in empirical analyses for separating out an ex-ante statement of purpose and mission from an ex-poste evaluation of policy outcome. Substantively,
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Table 2. Legitimacy and discursive (de)legitimation of a GGI

| Legitimacy type | Legitimacy source | Definition: a GGI... | Discursive (de)legitimation |
|----------------|------------------|-----------------------|-----------------------------|
| Instrumental   | purpose          | has important functions to fulfill | Discursive legitimation makes, promotes, and defends these legitimacy claims; |
|                | irreplaceability | occupies a central role and cannot be replaced | discursive delegitimation contests and dismisses these legitimacy claims |
| Procedural     | legality         | acts according to legal mandate and secondary rules | |
|                | inclusiveness    | ensures equal participation and does not arbitrarily exclude interested parties | |
|                | transparency     | makes information publicly available and does not engage in cover-up | |
|                | accountability   | is directly answerable to stakeholders and puts in place appropriate oversight mechanism | |
|                | integrity        | acts based on correct beliefs and robust evidence | |
|                | impartiality     | is politically neutral and does not give special treatment | |
| Performance    | problem-solving  | delivers on its mandate and solves problems | |
|                | effectiveness    | (A GGI’s executive head) | |
|                | executive        | exhibits strong leadership | |

Instrumental\(^1\) legitimacy is included together with the two well-established types of legitimacy (procedure, performance). Second, the conceptual apparatus disaggregates the three main legitimacy types into substantive sources with a view to facilitating the identification of (de)legitimating arguments along specific legitimacy indicators. A related third point is that some legitimacy sources often overlooked in the extant scholarship such as irreplaceability, impartiality, integrity and charismatic executive leadership are included here.

Before proceeding further, it is important to note that the study adopts an “ad-ductive” (combining deductive and inductive) approach and builds an analytical framework attuned to the WHO case. This inevitably entails prioritization and exclusion. As such, the list of legitimacy sources included herein is by no means exhaustive, and the framework clearly does not have universal applicability. In fact, it has been acknowledged that “there are no universally shared criteria” as regards legitimacy in the global governance context (Koppell 2008, 192). The remainder of this section will summarily present the commonly referenced sources under each legitimacy type before spelling out those more relevant to this case. An overview is shown in Table 2.

Instrumental

Statements of usefulness *ex ante* are often subsumed under performance and used as a benchmark for assessing outcomes *ex post*. While acknowledging the interconnect-edness in practice, this research follows the approach of Steffek (2009) and Lenz

\(^1\)This study prefers the term “instrumental” rather than “purpose” (Lenz and Viola 2017) or “goal” (Steffek 2009), as it captures not only a GGI’s useful purposes but its particular qualities (e.g., centrality, irreplaceability).
and Viola (2017) and distinguishes purpose/goal from performance. Such distinc-
tion is necessary, both conceptually and empirically. Conceptually, while legitimacy
assessments may focus only on policy outcome, rhetorical reference to a GGI’s man-
date and purpose is common for the sake of legitimation, not least when policy
effectiveness is yet to be established. Empirically, it is necessary to recognize the
time lag and (inevitable) gap between rhetoric and practice, and more pertinent to
the present case, the disparity between functions enabled by a GGI’s mandate and
secondary rules and those expected by its stakeholders.

Instrumental legitimacy pertains to sources such as usefulness, novelty, unique-
ness, and complementarity (Steffek 2009; Raffaelli and Glynn 2015, 315; Yang and
Keukeleire 2019, 937). Two are of particular relevance to this case. First, legitimacy
rests on purposes, namely intended functions. In line with the consequentialist logic
(March and Olsen 1998, 949), states establish a GGI to carry out specific tasks and
address transnational issues in need of collective action (e.g., spread of infectious
diseases), thus allowing states to avoid negative externalities and gain benefits that
would otherwise be unattainable. There normally exists a wide consensus among
GGI stakeholders on the importance of the core mission to be accomplished and
the set of goals to be incrementally achieved. A prototypical example is United Na-
tions Framework Convention on Climate Change. Its raison d’être rests in large
part on the consensus on the urgency of climate action and its role in organizing
the global response.

An element related to but distinct from purpose is irreplaceability. It pertains to
the question as to why a GGI is best positioned to manage and address certain is-

Procedural

Procedural legitimacy, as said above, figures large in almost every legitimacy typol-
ogy. Any modern form of governance is expected to abide by a set of procedural
standards, most of which are linked to the principles of democracy. As stated by
Held (1995, 1), “democracy bestows an aura of legitimacy on modern political life:
laws, rules, and polities appear justified when they are democratic.” This is partly re-
flected in the commonly invoked procedural standards, including representation,
participation, fairness, transparency, accountability, responsiveness, and local own-
ership (Albin 2008, 764–5; Koppell 2008, 191; Von Billerbeck 2017; Schmidt and
Wood 2019). But procedural legitimacy equally pertains to decision-making qual-
ities beyond democracy, like efficiency, legality, and expertise (Tallberg and Zürn
2019, 592). To the extent that a GGI makes decision in line with widely accepted
procedures, it is deemed legitimate (even if it may not measure up sufficiently on
other criteria). A number of procedural mechanisms of particular relevance to this
study are discussed below.

First, a GGI is bound by legality and must act within the purview of its legal man-
date and secondary rules to which members have consented (Binder and Heupel
2015, 241). The second is inclusiveness. A GGI must be open to all the parties inter-
ested or affected to ensure fair presentation and fair treatment (Albin 2008, 764).

2 Steffek (2009, 315) uses “appropriateness” to express the same idea.
A third element is transparency with reference to information provision. Adopting public information policies and making nonconfidential information available enable the parties concerned to observe and trace a GGI’s deliberation and determine whether the decisions and policies emerging therefrom are in the public interest (Grigorescu 2007, 626). Accountability is another necessary condition for legitimacy. It renders a GGI directly answerable to those who entrust it with powers and those affected by its actions (Grant and Keohane 2005). Further, legitimacy is associated with institutional integrity, which stresses the need to base decision-making on truth and correct beliefs (Keohane 2011, 102). The last criterion is impartiality, that is, “being nonpartisan to, and thus not aligned with, the interests of certain member states” (Heinzel et al. 2020, 2). It is known that powerful states exert disproportionate influence over GGIs (Stone 2008). Sometimes even the mere fact of having powerful states as members lowers legitimacy perceptions (“guilt by association,” see Johnson 2011), not to mention open display of double standards, as seen in the “law for thee but not for me” critique against the International Criminal Court (Ba 2021). This makes it all the more imperative that a GGI act independently and not give special treatment to powerful states. Discursive (de)legitimation may refer to these procedural standards and beyond to assert or challenge a GGI’s legitimacy.

**Performance**

Performance legitimacy is akin to the conception of output legitimacy (Scharpf 1999). Performance is mostly concerned with substantive results, namely “the collective benefits they [IOs] have produced for states and societies” (Tallberg and Zürn 2018, 595). Persistent failure to fulfill the stated or assigned objectives (even on account of external contingencies) can undermine a GGI’s credibility and diminish support for it. As said here, “IOs are created with a specific aim; if they do not fulfill their purpose, or if they create negative externalities, they will not be considered legitimate” (Binder and Heupel 2015, 241). Performance is rendered even more pronounced in global governance due to the inherent democratic deficit of GGIs and their inability to meet sufficiently such key criteria as democratic participation, inclusiveness, and accountability (Zürn 2004, 260; Herz and Hoffman 2019, 247–8). For some GGIs, technocratic performance is therefore the most important and viable source of legitimacy (Scharpf 1999).

Performance of a GGI can be gauged along the co-constituting dimensions of policy output (in the form of decisions), compliance, and effectiveness (Tallberg et al. 2016; Sommerer and Agné 2018), or against more substantive results like protecting rights and securing collective welfare gains (Dellmuth et al. 2019, 633; Tallberg and Zürn 2019, 593). Two key factors are discussed here. The first is the effects of policies, which evaluate whether and the extent to which results comport with stated goals. It focuses on the actual ability to deliver, and specific to a GGI, what it manages to do and what beneficial consequences its actions bring about (Gutner and Thompson 2010).

A second element less frequently discussed is the performance of a GGI’s executive leadership, often put under the magnifying glass during times of crisis (Lipsky 2020, 104). Cox (1969, 205) posits, “the quality of executive leadership may prove to be the most critical single determinant of the growth in the scope and authority of international organization.” While most scholars would not go that far, some credit meaningful institutional change of a GGI to executive heads (Schroeder 2014) and acknowledge their agential power to navigate and push back on political–legal, bureaucratic, and resource constraints (Hall and Woods 2018). As regards performance, discursive (de)legitimation recognizes or questions the effectiveness of a GGI’s policies and the performance of its executive leadership, among others.
The substantive legitimacy sources under the three legitimacy types (instrumental, procedural, performance) constitute the building blocks for different actors to construct their (de)legitimating accounts of the WHO and its pandemic response. The juxtaposition of different and sometimes diagonally opposite interpretations led to a high-profile legitimacy contest. In what follows, discursive (de)legitimation of different key actors will be analyzed and their claims drawn out and substantiated with examples.

Data and Method

In order to canvass the discursive (de)legitimation surrounding the WHO since the outset of the coronavirus pandemic, the research gathered data covering the period of January–October 2020. A total of 458 texts were collected from a constellation of actors featuring large in the legitimacy contest. A detailed breakdown of the data and their sources is shown in the supplementary file.

Data were first collected from the self-legitimating actor: the WHO. All the transcripts of the WHO COVID-19 Emergencies Press Conference were included. It is worth pointing out that a significant part of the transcripts were devoted to providing technical information such as updates on the progression of the coronavirus and the results of clinical trials and vaccine development. Still, these transcripts were instrumental in uncovering the underlying patterns of discursive legitimation. They contained not only the opening remarks of Director-General Tedros (delivered at the beginning of every press conference), but responses to questions as regards the organization’s performance and compliance with correct procedures, China’s handling of the pandemic, and the Trump administration’s claims and decisions.

Subsequently, data were identified from other actors by combining keywords of “World Health Organization” or “WHO” and “Covid-19” or “Coronavirus.” Specifically, texts were extracted from the websites of relevant government bodies of key WHO member states with a (largely) favorable stance, including China, Germany, France, the UK, Japan, and Australia, and of the most outspoken critic—the Trump administration.

In addition, two other actors actively involved in the contest were considered: the US quality press and global health-scientific community. Quality press was included because it is a (de)legitimating agent in its own right. As part of the communicating elites, quality newspapers play a central role in framing a wide range of issues to the attentive publics by not only passing on interpretations of other actors such as officials of government bodies and GGIs, but more importantly, by adding critical reflections and their own interpretations (Gamson and Modigliani 1989, 3). During the pandemic, quality press from many quarters frequently assessed the validity of claims made by the Trump administration, the Chinese government, and the WHO,

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3 October was chosen as the end point since political-media attention, not least in the United States, switched to the US presidential elections after that.

4 The texts collected from these official sources are representative in the sense that they summarize and accurately reflect the government’s position. They are, however, not exhaustive since not all the official sources were included. For countries where sufficient data were gathered from the central government and/or the foreign ministry (United States and China), data search was not extended. For countries where relevant publicly available data were scant (UK, France, Germany, Japan, Australia), the search was expanded to other government bodies.

5 The research brackets out the question of “frame sponsoring” (i.e., who speaks what in the news) and attributes the views embedded in news content to media. Clearly, journalists quote other actors such as officials and scientists, who in turn attempt to mainstream their own views and influence public opinion through media. Still, selecting sources is part of the media framing process (Van Gorp 2007, 69). To capture (only) the views of media, all the claims explicitly questioned and refuted in the news articles were not coded.
and brought attention to the political aspects largely downplayed by health-scientific professionals. This research focuses on three elite newspapers in the United States: the *New York Times*, the *Wall Street Journal*, and the *Washington Post*. They hold considerable prestige and influence, both domestically and internationally. The plurality of views embedded in their reporting and their preferred interpretation of an issue frequently find their way into the coverage of other media in the United States and quality press in other countries. More importantly, focusing on these three US elite newspapers was motivated by the salient role of the US government in the legitimacy contest. The Trump administration almost single-handedly triggered the process of politicization and contestation by lambasting the WHO for its mismanagement of the outbreak and deference toward China. This drew a flurry of media attention, most notably from those selected here.

Similarly, the global health-scientific community actively weighed into the debate on the WHO throughout the pandemic. Judgements of prominent scientists and public health professionals carried considerable weight. They arguably provided the most objective and least political/politicized account of the WHO. To sketch out the landscape of their views, the study gathered all the WHO-related editorials or commentaries published by the *Lancet*, *New England Journal of Medicine*, *Nature*, and *Science*, which are among the world’s most influential and respected medical-scientific journals.

Data analysis was done in four steps. First, all the text excerpts evaluating the different aspects of the WHO were gathered. The key criterion for inclusion was the presence of evaluation. Mere description (e.g., WHO’s policy advice, information on the number of cases, and deaths worldwide) was systematically excluded, unless it was explicitly linked to evaluation of the WHO’s decision-making and performance. Second, all the excerpts were subsequently examined as per the framework outlined above (see Table 2) in such a way as to identify the specific legitimacy source—or combinations thereof—in invoked by actors. Third, to measure the quality of coding manual and the operational definition of (de)legitimation indicator, a pilot phase was held with two researchers coding independently a randomly selected sample of 50 texts. Substantial intercoder reliability (with a kappa value above 0.75) was secured for each indicator. Lastly, the rest of the material was divided between two coders. Ambiguous cases were discussed together and decided by consensus.

### In the Eye of Beholder: Discursive (De)Legitimation of the WHO

This section spells out the discursive contestation centering on the WHO and presents the empirical findings of a qualitative content analysis of the dataset along the lines of the conceptual framework outlined above (Table 2). It first provides an account of the (de)legitimating claims of the most foremost and outspoken critic—the Trump administration, thus bringing to relief the compelling need for legitimization. Such claims were qualified and partly countered by the US allies, US quality press, and global health-scientific community, and dismissed altogether by the WHO and China.

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5 What the study seeks to do with a purposive sample of the US elite newspapers is simply illustrate the “mediating” role that quality press was able to play in the polarized debate by adding critical reflections and staking out the middle ground. A systematic cross-country comparison of media coverage on the WHO during the pandemic, a topic of interest in its own right, is beyond the scope of this research.

6 A prime example was the discussion on the lab-leak hypothesis of coronavirus. The hypothesis was virtually excluded from the debate on the origins after *Lancet* published a statement signed by twenty seven scientists endorsing “zoonotic spillover” as the most plausible explanation and rejecting lab-leak as conspiracy mongering. It regained currency after *Science* published a letter from another eighteen scientists stating the hypothesis should not be ruled out before a thorough investigation.
Table 3. An overview of (de)legitimating claims by different actors

| Actors                  | Trump admin n = 74 | US allies n = 57 | US quality press n = 106 | Global med-sci community n = 18 | WHO n = 109 | China n = 94 |
|-------------------------|--------------------|-----------------|--------------------------|---------------------------------|-------------|-------------|
| Indicator               | +                  | −               | +                        | −                               | +           | +           |
| Purpose                 | 7                  | 0               | 40                       | 0                               | 47          | 0           |
| Irreplaceability        | 12                 | 1               | 6                        | 0                               | 2           | 6           |
| Legality                | 0                  | 5               | 0                        | 0                               | 1           | 0           |
| Inclusiveness           | 0                  | 7               | 0                        | 3                               | 24          | 0           |
| Transparency            | 0                  | 23              | 1                        | 0                               | 2           | 9           |
| Accountability          | 0                  | 7               | 3                        | 0                               | 2           | 1           |
| Integrity               | 0                  | 11              | 0                        | 0                               | 25          | 14          |
| Impartiality            | 0                  | 34              | 0                        | 0                               | 3           | 65          |
| Effectiveness           | 5                  | 49              | 5                        | 0                               | 24          | 44          |
| Executive head          | 6                  | 0               | 0                        | 0                               | 3           | 17          |

**Trump Administration**

The Trump administration was the most vehement WHO detractor during the pandemic. It shifted its early sympathetic attitude to the agency and started railing against it shortly after the coronavirus situation spun out of control in the United States and the government was widely faulted for its inconsistency and incompetence. Its negative assessment of the WHO, often paired with strident criticism of China, was summarily presented in the official letter sent to the WHO Director-General in May 2020. The long list of charges included inter alia the global health governing body’s alleged failure to investigate information contrary to the Chinese official accounts and to warn against the possibility of human-to-human transmission in a timely manner; its belated declaration of the outbreak as a Public Health Emergency of International Concern (PHEIC); failure to hold Beijing to account as stipulated in the IHR; exclusion of Taiwan; discouragement of travel restrictions from China; and reluctance to push Beijing for an independent investigation into the genesis and evolution of the virus (White House 2020b).

An analysis of seventy-four official texts of the White House and State Department (Table 3) shows—barring a few sympathetic remarks early on (February to early March 2020) expressing support for the WHO, recognizing its important role, and praising its response—the Trump administration sought to delegitimate the WHO by noting its alleged failure to satisfy almost all the legitimacy indicators (except purpose). In particular, Trump and State Department officials consistently pointed to the agency’s lack of effectiveness (“failure in delivering its core mission”), impartiality (“China puppet”), transparency (“complicity in initial cover-up”), and to a lesser extent, integrity (“prioritize politics over science and health security”). This prepared the ground for the United States’ withdrawal of funding and membership.

The Trump administration was decidedly critical. Its assertions, irrespective of their validity, contained almost all the hallmarks of delegitimation. US government representatives repeatedly expressed concerns about the WHO’s procedural correctness on normative standards like impartiality, transparency, and integrity, and took issue with its performance by readily dismissing its outbreak response as botched and counterproductive in accomplishing its core mission of preventing and handling epidemics. Undoubtedly, the force of these sharp criticisms was weakened by apparent contradictions to the earlier accounts of the administration and crude attempts of Trump to deflect blame for his own failures (Trump blamed many other actors than the WHO). Still, these criticisms, along with the administration’s decision to halt funding and exit and its proposal to set up a WHO alternative,
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amounted to an act of diffuse delegitimation and challenged the overall authority of the organization, thus heightening the need for legitimation, or at a minimum, a more balanced account.

US Allies, US Quality Press, and Global Health-Scientific Community

The results presented here are based on a close examination of fifty-seven texts gathered from government bodies of the UK, Germany, France, Japan, and Australia; eighteen editorials or commentaries from the high-impact medical-scientific journals; and 106 articles from the US elite newspapers. They added nuances and critical reflections to the debate.

Two observations can be made. First, there was a strong convergence of views among these three types of actors on the WHO’s central role in managing global pandemic cooperation and addressing global public-health emergencies (purpose, irreplaceability), hence the need to support and strengthen it. As stated by German Foreign Minister Heiko Maas (2020), “to overcome this challenge, we need worldwide cooperation rather than national go-it-alone approaches. We need a united response in a spirit of solidarity from all countries and the United Nations, with a strong WHO at the centre.” A *Nature* (2020a) editorial equally endorsed the irreplaceability of the WHO by stating, “pulling funding from the WHO during a pandemic, whatever the concerns over its performance, is only likely to stifle the global response to COVID-19... which other agency would take its place if we did not have the WHO?.” In this light, extra financial contributions to the agency by US allies and others were justified; the Trump administration’s fateful decisions, on the other hand, were widely lamented by US allies as ill-timed and strongly criticized by the global health-scientific community and US quality press as diversionary and irresponsible (a common critique being “shutting down fire service in the midst of the fire”).

Second, while the three categories of actors seemed to agree on the importance and irreplaceability of the WHO, there was demonstrably less consensus on its performance and procedural correctness, most notably regarding its initial response. US allies, at least at the official level (as reflected in the official documents), were relatively reticent on the issue but invariably insisted on and welcomed the independent international review. In the health-scientific community, it was generally acknowledged that the WHO had acted properly and performed relatively well within the limits of the possible, given that it is first and foremost a technical agency and has to make decisions and issue advice based on robust evidence. As said in a *Nature* (2020b) editorial, “leading public-health researchers and practitioners agree that, so far in the current crisis, the agency has offered leadership and acted according to the evidence it has received.” If anything, the WHO’s praise for the Chinese government was largely attributable to the fact that it is member driven and needs national governments’ cooperation to conduct its work; its suboptimal performance was related to the capability-expectations gaps, namely “countries’ expectations for the WHO are not aligned with the limitations on funding, political, and legal authorities those same countries set on the organization” (Kupferschmidt and Cohen 2020).

Within and across quality newspapers, viewpoints on the WHO’s procedural correctness and performance were considerably more divided. Some were prone to siding with health professionals and defended the agency’s pandemic performance. But more acknowledged the validity of questions such as the WHO’s decision to delay the declaration of the coronavirus outbreak as a PHEIC and its problematic

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8 It does not mean there weren’t any critical voices in the global health-scientific community. In fact, some health scholars spoke out against the WHO’s weak stance vis-à-vis Beijing but most nevertheless attributed it to its limited authority as a member state organization and the need of the WHO to perform a difficult balancing act when facing a powerful member as China.

9 Delegitimation of the Trump administration was less frequent in the conservative-leaning *Wall Street Journal*. 
communication on issues like the use of masks and the asymptomatic and airborne transmissibility of the coronavirus. A related issue is on the ties between the WHO and China. In comparison with the health-scientific community and US allies, media elites were much more likely to focus on this politically fraught issue and interpret it as the WHO’s overt deference to Beijing. As shown in Table 3, there were a significant number of references in selected news articles doubting the WHO’s impartiality, with particular reference to its parroting of China’s official statements, its praise for China’s leadership, transparency and stringent containment measures, and its exclusion of Taiwan.

The analysis suggests the US quality press, US major allies, and global health-scientific community recognized the important and even irreplaceable role of the WHO in addressing such global public-health emergencies as the coronavirus pandemic (purpose, irreplaceability). As such, they were often at loggerheads with the Trump administration, and in some instances, publicly censured its decisions. That said, important questions remained, which could imperil the WHO’s procedural and performance legitimacy. Media elites repeatedly expressed concerns about WHO’s deference toward China, failing in the initial response, and confusing messaging. But unlike the diffuse delegitimation of the Trump administration, these concerns are better to be understood as a form of specific delegitimation because they were only directed at some decisions of the WHO and did not challenge its purpose and overall authority as the most appropriate forum for global health cooperation.

**WHO**

As pressure mounted over its putative faltering start and deterrence to China, the WHO put forward a series of claims to counter criticisms and defend itself. Facing misgivings over his public praise and “soft handling” of China (impartiality), Director-General Tedros accentuated the veracity of his claim about the necessity and effectiveness of stringent measures implemented by the Chinese authorities, stating “I know there is a lot of pressure on WHO when we appreciate what China is doing but because of pressure we should not fail to tell the truth” (WHO 2020b). He also sought to justify the agency’s stance on Taiwan by emphasizing the WHO as a member state organization and the scope of Director-General’s authority (the decision to invite observer is contingent on the overwhelming support of members that did not exist on Taiwan) and the existing contacts with the island (WHO 2020c). This was often followed by a reference to the principle of inclusiveness in the WHO’s constitution, which stipulates the broad mandate of promoting “the health of all people everywhere... without distinction of race, religion, political belief, economic or social condition” (WHO 2020d).

As a retort to sharp criticism from the US government, the WHO slammed politicization and scapegoating at the international and national level, warning “Please don’t politicize this virus... if you want to have many more body-bags, then you do it” (WHO 2020e). This was a not-so-subtle rebuke of the Trump administration despite the rarity of the body to openly reprimand national governments. Responding directly to procedural concerns, the Director-General professed over and again the WHO’s commitment to correct procedures. A representative example is his remarks after the passage of the COVID-19 resolution in May 2020 that made the WHO’s response a subject of review. “We welcome any initiative to strengthen global health security... As always, WHO remains fully committed to transparency, accountability and continuous improvement. We want accountability more than anyone” (WHO 2020f).

To have a more fine-grained view of the WHO’s (self-)legitimating discourse, the study analyzed 109 WHO press conference transcripts. As presented in Table 3, the WHO constructed its (self-)legitimating discourse overwhelmingly on what it managed to deliver (policy effectiveness). It stressed, to a lesser extent, its role in
organizing the global response to the pandemic and its commitment to the “health for all” mission (purpose). Interestingly, integrity, compared with other procedural standards, featured relatively large in the rhetoric. This might be accounted for by the observed pattern wherein concerns about the WHO’s purported “pro-China bias” and slowness to act were countered by an emphasis on the appropriateness of its decisions, its status as a member-driven organization (limited authority), and its technical health mandate (evidence-based decision-making).

Chinese Government

The Chinese government cast the WHO in a categorically positive light and defended it from any kind of criticism. This is an intuitive position in view of the connection between the pandemic performance of Beijing and that of the WHO, and the agency’s largely favorable attitude to the country. The analysis of ninety-four text excerpts from Chinese Ministry of Foreign Affairs uncovers the underlying patterns of legitimation by Chinese officials. As shown in Table 3, the most frequent type of claims concerns China’s endorsement of the WHO’s centrality and leadership in coordinating global health matters (purpose, irreplaceability). Whereas others either openly censured the WHO or endorsed it with qualifications, Beijing offered overwhelmingly favorable assessments of the WHO’s performance (policy effectiveness) at the helm of Director-General Tedros (executive leadership), which, in the eyes of Beijing, helped the WHO garner global recognition. As said here,

Since the COVID-19 outbreak, the World Health Organization, under the leadership of Dr. Tedros, has been earnestly fulfilling its duties, upholding an objective, scientific and fair stance, and playing an important role in coordinating international efforts and advancing international cooperation in response to the pandemic. It has won recognition and acclaim from all over the world (Chinese Ministry of Foreign Affairs 2020).

Also, Chinese officials referred, albeit to a lesser extent, to the WHO’s “objective, scientific and fair stance” and provided legal ground for excluding Taiwan from the WHA based on “One-China” principle, thus indirectly asserting the organization’s integrity, impartiality, and inclusiveness.

What is equally remarkable is that China’s discursive legitimation of the WHO was frequently accompanied by its delegitimation of the Trump administration, Taiwan, and reference to the WHO’s acknowledgment of China’s anti-pandemic efforts. Specifically, China’s rhetorical support for the WHO was frequently mixed with reference to the imprimatur of the global health governing authority (and by extension, of the international community) for the country’s “comprehensive, rigorous and thorough” containment; “open, transparent, responsible” attitude; and “commitment to multilateralism.” This stands in contrast with the “trumped-up” charges aiming to “smear” China and the WHO by the Trump administration and the efforts of Taiwan to “politicize” its exclusion for diplomatic gains.

Conclusion

This research examined from the conceptual lens of legitimacy and (de)legitimation the intense discursive contest centering on a GGI in the throes of a full-blown crisis: the WHO during the coronavirus pandemic. Substantively, it zoomed in on six (types of) actors that were prominently involved in the contest: the Trump administration, US allies, US quality press, global health-scientific community, the WHO, and China.

Grounded in the findings outlined above, this research makes two key arguments. First, the WHO enjoyed broad support throughout the pandemic, thanks in large measure to the entrenched belief in its instrumental legitimacy, namely purpose.
and irreplaceability. Its central role in global health governance in general and in addressing public health crises in particular remained largely unchallenged, reaching in effect a level of taken-for-grantedness (Suchman 1995, 583). In this light, the Trump administration’s diffuse delegitimation of the WHO actually pushed others to rally around it and prompted attempts at legitimation by lending rhetorical support and pledging additional funding. Extending this line of reasoning, many defended the WHO despite an (implicit) acknowledgement of its flaws and failings. All the actors examined here, barring the WHO and China, seemed to concede in their discourses that the WHO could have produced a better and more forceful pandemic response, although they differed in the interpretation of causes. Some ascribed potential missteps to curtailed authority and others to deterrence to China. That said, most agreed that given its central role, the WHO needs to be supported and strengthened rather than abandoned altogether.

Second, substantial differences existed between a technical/technocratic and politicized assessment of the WHO’s legitimacy and its pandemic response. From a technical/technocratic perspective, as represented by the views of the health-scientific community and WHO staff, the agency should not be judged for what falls outside of its authority nor be scapegoated for inaction and ill-preparedness of some national governments. Most health-scientific professionals believed that it had acted properly. Concerns about procedural fairness and performance were deflected by noting the WHO’s mandate as a technical-scientific body (need to base decisions in science and evidence) and its status as a member-driven organization (limited authority). In a politicized context, discussions on the issue were polarized, as shown by the categorically favorable account of the Chinese government and the overwhelmingly negative assessment of the Trump administration. In fact, the blanket approval or critique of the WHO was inextricably associated with the need for justifying controversial national pandemic response. This crystallizes the function of a GGI as a collective legitimating authority (Claude 1966) or convenient “scapegoat” (Dreher and Gassebner 2012).

Still, most members, exemplified here by US allies, were keen to see the WHO depoliticized and extricated from the mudslinging and divisive politics between Washington and Beijing. While agreeing that there might be some truth in the charges of Trump, they were against his ill-timed decisions and accentuated instead their intention to continue backing the global health agency and to revamp it so that it can remain “fit for purpose.” In doing so, they staked out a middle ground and brought in a more balanced account, a position mirrored in reporting by the US quality press.

As President Biden reversed the exit decision, recommitted the United States to the agency, and provided support for WHO-led activities such as Covax, the WHO has emerged from the deep crisis it was in for the most part of 2020. Still, the debate trundles on. This crisis has rekindled prosaic talks about the inherent structural issues that have scarred the agency for decades but never been fully addressed, only to resurface every time a crisis strikes. Limited authority and budget, undue influence of powerful members/donors, patchy compliance with the IHR, just to name the most obvious. Discussions on how to reform the WHO have already begun. Among the differing approaches available (see Lee and Piper 2020), boosting the agency’s authority and financing seems to have emerged as the preferred course of action. In November 2020, the European Union made a list of suggestions to strengthen the WHO’s capacity (Council of the EU 2020). In December 2020, a Foreign Affairs (2020) survey of global health experts evinced a broad consensus on the urgency of revamping and empowering the WHO. The much-anticipated IPPR review also urged more power and funding for the body (IPPR 2021). These proposals unequivocally tilt toward the norm of global health security that is “built on an understanding of infectious disease outbreaks as international security problem requiring supranational coordination and governance capacity”
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(Kreuder-Sonnen 2018, 535). Still, the fundamental collective action problem remains: “everyone desires coordination, but no one wants to be coordinated” (Gostin et al. 2015, 858). “Hard” binding rules are unlikely to fare well, not least among member states that have long resisted intrusions into their sovereignty.

Equally, some observations can be made as regards legitimacy and (de)legitimation. First, different legitimacy types and sources are entangled in (de)legitimating practices. Failure to measure up on one may be justified or compensated by another. A case in point is the WHO’s response to criticisms of missteps and delays by noting its technical mandate and status as a member-driven organization. This privileges a holistic approach to understanding legitimacy and (de)legitimation, and problematizes the prevailing dichotomy of procedure versus performance (Dellmuth et al. 2019, 628) and the tendency to focus squarely on the “usual suspects” (e.g., accountability, transparency, fairness, effectiveness). Second, legitimacy is in the eye of beholder and its (non)attribution rests less on procedure and performance per se than the perception thereof, as shown by the contending or even diagonally opposite accounts. In particular, for member states with high political stakes in how a GGI is assessed, their (de)legitimating practices do not necessarily imply their (dis)belief in the GGI’s normative appeals but may be motivated more by self-interest, such as the need to deflect blame for domestic failures or mobilize support for controversial domestic policies. Third, (de)legitimation can be studied and classified as per types of justification advanced on legitimacy indicators. This offers an alternative to the existing (de)legitimation analyses that distinguish between types of audience (Gronau and Schmidtke 2016) or types of practice (Bäckstrand and Söderbaum 2018).

Further, this empirically focused research suggests the need to untangle the primary legitimacy types and the desirability to disaggregate them, at least for analytical purposes. In this case, it is necessary to distinguish between instrumental and performance legitimacy. As argued above, legitimacy judgements in the WHO were mostly grounded in its purpose and irreplaceability, rather than performance. Relatedly, most studies follow a typology of legitimacy building on an overarching distinction between input (procedure) and output (performance) (see Table 1) without systematically disaggregating them into concrete legitimacy sources (for an exception, see Binder and Heupel 2015). Synthesizing elements from the existing literature, this study built a framework substantiated by a diverse range of legitimacy sources, some of which are oft-overlooked by scholars working with an overall input–output or procedure–performance distinction. Such an apparatus lends substantial analytical purchase to the systematic mapping of (de)legitimizing discourses of different actors. It enables to identify the key lines of the legitimacy contest, capture the contending perspectives and the logics by which they were justified, and explore the dialectical interplay between them. That said, the framework developed here has its limitations as it is attuned to the case, which entails prioritization and exclusion and limits the scope of its applicability. Still, it is reasonable to expect that with its fine-grained distinctions, the conceptual apparatus—after some finessing—can be applied to similar studies on the (de)legitimation of GGIs.

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Conflict of interest

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