

The Chaos of Trump: Instabilities, Scenarios, Strategies

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WORK IN PROGRESS

On 20 Jan 2025, Donald Trump:

- [revoked](#) the Biden revocation of Trump's 2020 notice of withdrawal from the World Health Organisation (WHO) and ordered US officials to cease all cooperation with WHO and to cut off US financial transfers to WHO ([\\$643m in 2023 or 16% of WHO's ordinary budget](#)); in the same order he announced plans to set up alternative structures to replace WHO;
- [announced](#) the US "withdrawal from any agreement, pact, accord, or similar commitment made under the United Nations Framework Convention on Climate Change"; and
- [announced](#) a "90-day pause in United States foreign development assistance"; affected health programs include polio eradication (\$160m in 2023), Gavi (\$400m in 2023), the Global Fund (\$2b in 2023) and PEPFAR (\$7b in 2023; reinstated days later but still disabled by USAID staffing cuts).

The advent of Trump is a shake-up, an unfreezing of established institutions, norms and global relationships. It is both a window of opportunity for progressive forces, but also a possible tipping point towards disaster, including a deepening health crisis, runaway global heating and devastating conflict.

Coloniality in global health

The antecedents of WHO (from 1851 to 1948) were created by and designed to serve the interests of the colonial powers (UK, Europe and the USA); to protect trade from disease outbreaks and to protect the colonial masters from exotic contagion. These colonial origins leave traces in the norms and practices of WHO (the International Health Regulations in particular) and in the attitudes that the Western powers bring to WHO; the disregard of the peoples of the South.

Western governments, led by the US, have sought to hobble WHO since the early 1980s when Western control of WHO was challenged by the influx of newly decolonised countries into the World Health Assembly.

This project, to hobble WHO, was motivated by decisions taken in the World Health Assembly (WHA) which the Western governments, the USA in particular, didn't like. These included the [essential medicines list](#), the [ethical marketing of pharmaceuticals](#), the [Code of Practice on the Marketing of Breastmilk Substitutes](#), the [rational prescribing initiative](#), and the [Commission on Innovation, Intellectual Property and Public Health](#).

The hobbling of WHO has been implemented by imposing a freeze on assessed contributions (ACs), tight earmarking of voluntary contributions (VCs), and the shifting of programs away from the World Health Assembly (an assembly of member states) into '[multistakeholder public private partnerships](#)' (the Access to COVID-19 Tools Accelerator (ACT-Accelerator) being the most recent). This strategy of 'multistakeholderism' replaces member state deliberation in the WHA with decision-making by G7 governments, corporations and philanthropies.

These strategies have impacted negatively on global health:

- Inadequate total funding of WHO has had consequences at the country office level and in the reach of various technical programs;
- The underfunding of programs seen as antipathetic to US corporate interests (eg, opposition of ultraprocessed foods, pressure for lower prices and price transparency for big pharma) has slowed action on the structural determinants of global health;
- The WHO Secretariat has carried a significant transaction costs burden associated with seeking, managing and acquitting grants from hundreds of donors, many quite small;
- The pressure on departments and units across the Secretariat to compete for donor attention (producing publications, organising conferences, developing resolutions and launching new programs) has led to fragmentation and incoherence in program implementation;
- The proliferation of special purpose multistakeholder partnerships has added to the transaction costs borne by governments (applying for, managing and acquitting grants from various agencies); has led to duplications and gaps across vertical siloed programs; and has weakened health systems owing to local brain drain to donor organisations.

The hobbling of WHO was part of a wider attack on multilateralism. The same methods of control, freezing flexible funding and multistakeholderism, have been applied to the UN and other specialised agencies. The threat to transnational capitalism represented by the 1974 UN General Assembly declaration of a [New International Economic Order](#) epitomises why the Western powers needed to hobble multilateralism. The NIEO sought to reform the 'rules based order' in various aspects, working through the structures of multilateralism.

Why the Trump withdrawal?

Corporate complaints about various WHA resolutions remains a continuing irritant for the US. However, there are factors arising from Trump's relationship with his MAGA constituency which are also driving the withdrawal from WHO and Paris and the attacks on the UN. Conspiracy theories regarding the threat of 'world government' flared during Covid, across the Trump constituency. The prospect that other countries, operating in various intergovernmental forums, might impose limits on US sovereignty clashed with pretensions of US exceptionalism and threatened to undermine the global domination of US imperialism.

Trump's MAGA constituency blames globalisation for the hollowing out of US manufacturing. However, it is important to distinguish between globalisation - the global reach of transnational corporations - and multilateralism. Globalisation, the liberalisation of trade and investment, was implemented through a carefully constructed (multilateral) 'rules-based order', centred on the WTO agreements and rationalised through the Washington Consensus (policed by the IMF).

The weakening of multilateralism and affirming American exceptionalism is core to Trump's program but, even while he drives a 're-shoring' of manufacturing through tariffs, he is also pursuing a globalist agenda, in particular, on behalf of US technology corporations.

Trump's undermining of the globalist 'rules-based order' goes back to 2019 when he disabled the WTO Appellate Body by refusing to agree to new appointments. This was to prevent the Appellate Body from confirming that the US's use of the so-called 'security exception' to justify trade restrictions against China was illegal.

There are important contradictions between the theatre of the beautiful tariff (promising the return of manufacturing, particularly automobiles, and decent jobs) and the alliance between Trump and the tech bro globalists, led by Elon Musk. The most obvious is the contradiction between Tesla on one hand and the legacy car manufacturers (and big oil) on the other. Not

just Musk but all of the tech bros are committed globalists but they are facing threats of taxation and regulation in many regions and jurisdictions. Creating and deploying multilateral norms to defend the globalising interests of the US tech bros faces growing barriers as the pressures for taxation and regulation grows in many regions including Europe. Transactional bullying looks more promising.

An older strategy for industry protection involves military procurement (the 'military industrial complex'). The Pentagon has directed large scale subsidies to US tech corporations through price inflated contracts, welcomed with growing enthusiasm by the technology corporations.

The technology corporations are not a stand-alone industry, they are also facilitators, they offer a conduit for a wide range of other industries to develop new products and services and to reach new markets. These other industries include health care: laboratories, imaging, pharma, diagnostics and more.

Two items before the recent WHO Executive Board meeting give some insight into the contradictions between globalisation and multilateralism. Item 9, which emerged with the support of big tech (Google in particular), promises digital interventions as the solution to global loneliness (a clear case of using WHO to support the marketing of big tech). Item 24.3 included WHO's 'global strategy for digital health' which could doors to new markets and/or impose regulations including to contain the harms of social media.

Globalisation (the liberalisation of trade and investment) is a challenge for US manufacturing (hence the tariff wars) but an opportunity for the technology corporations. But multilateralism is a challenge to both.

China figures prominently in the Trump narrative, in relation to both manufacturing and technology. China's GDP (calculated on a purchasing power basis) already exceeds that of the US. Playing up the 'China threat' pushes up military procurement of both hardware and IT although China has only one foreign military base (in Djibouti) compared with 800 US bases in 70 countries. Denigrating China in relation to Covid plays to the racism, disempowerment and alienation of the Trump constituency.

The continuing [global disparities in the SDG health indicators](#) (eg maternal mortality, under-fives stunting, weak health systems) jeopardises the legitimacy of the global regime in which they arise; certainly from the perspective of the global South. The removal of USAID removes a curtain which has up until now helped to obscure the imperial disregard for the health of the peoples of the global South. USAID has disbursed over a hundred billion dollars for medicines and health care since its creation in 1961. As well as promoting a positive image for the US globally it has also promoted disease-focused perspective on global health while holding off any recognition of the upstream drivers which reproduce the disproportionate morbidities of the global South (and the wealth of the imperial North).

The new Trump regime appears unconcerned about its public appearance in the eyes of the global South. The soft power that helped to establish the 'rules based order' is no longer needed as multilateralism is dismantled, in favour of the bilateral bullying of Trump 2.0.

The ambivalence of transnational capital beyond the US

The collapse of multilateralism and the rise of America-first policies (de-globalisation of manufacturing and hyper-globalisation for the tech sector) presents challenges for transnational capital beyond the US. On one hand they will be looking to home governments for protection from Trump's trade wars. On the other hand they may look to the Trump administration to protect them from a [new NIEO](#) sponsored by the G77 and China and perhaps adopted by the BRICS.

Trump has already warned the BRICS against any move towards the dedollarisation of trade. Such threats would be backed up by tariffs but may require new covert interventions and military adventures. This scenario is likely to be associated with a rise of fascism, racism, casteism, and patriarchy; with a weakening of the institutions and norms of liberal democracy.

Immediate impact of US withdrawal

WHO has already imposed restrictions on travel, and a pause on new hires. There will probably be retrenchments from some programs in Geneva and in some regional and country offices.

Some other HICs (perhaps Norway, perhaps France) may agree to modest increases in their voluntary contributions.

China has expressed reservations regarding an (already agreed) increase in assessed contributions. While WHO remains subject to disproportionate Western influence (through earmarked donations) China may judge that it gets more diplomatic bang for its bilateral assistance spending (such as through the Belt and Road Initiative) than from increasing its contribution to WHO.

All programmatic resolutions were held up at the recent Executive Board meeting owing to uncertainty about how they would be paid for. The governing bodies will need to urgently agree on guidelines for re-prioritisation of programs and country support. Any cuts will have health consequences that will disproportionately affect poor people in poorer countries.

Domestic opposition in the US could lead to a Trump reversal

There are interest groups in the US which are also pushing for a reversal of at least some of Trump's reforms. These include:

- US officials and commentators are arguing that the withdrawal of the US from WHO will give LMICs space to adopt policies prejudicial to the interests of US imperialism (such as new policies on ultraprocessed foods); perhaps facilitated by the loosening of the Western alliance within the WHO governing bodies;
- US officials and commentators are arguing that the damage to US standing in the global South will empower China, the G77 and the BRICS to push through policies such as dedollarisation and the new NIEO;
- US global health think tanks and academics are arguing for a return to WHO and for a continuation of development assistance particularly where they have been primary recipients of [boomerang foreign aid](#);
- US based transnational pharma is likely arguing that the US withdrawal has jeopardised high level IP protection and threatens to weaken their profitability (and the rent flowing to big finance which owns big pharma);
- Gradual disillusioning of the MAGA constituency, with inflation and high interest rates due to tariffs, may lead to a rethink in the White House.

The impact of these forces, if they prevail, would be a return to the status quo. Alternatively, they precipitate further conflict and chaos in the US system.

WHO could collapse

Trump's attacks on WHO could succeed, leading to slashing of jobs, no increased funding, further criticism, and further funding sanctions. The US plan for 'alternatives' could succeed, leading to accelerated transfer of WHO programs to MSPPPs.

The consequences would include a further proliferation of vertical programs, marketised health care, individual-centred prevention and further neglect of the structural determination of health.

Global governance could move toward more progressive positions

A more hopeful scenario might include:

- Growth in influence of progressive social and political movements, nationally and globally, alarmed by the Trump threat, demanding action for equity, sustainability and a new NIEO;
- A rising movement for meaningful democracy within countries countering the diplomatic and corporate pressures to preserve the privileges of capital;
- Remaining countries in the Paris Accord adopting more radical mitigation policies (eg carbon border adjustment mechanisms and action on Tier 3 emissions) and increasing support for adaptation in LMICs;
- BRICS countries led by China, taking advantage of US isolationism to proceed with TNC regulation, tax reform and dedollarisation.

WHO could survive and even thrive

This more hopeful scenario might be associated with positive trends in relation to WHO and global health:

- Increased global understanding of the threats to global health, arising from America-first imperialism, contributes to growth in the wider phalanx of progressive social and political movements;
- Funding to WHO is boosted from other sources (Europe, BRICS, philanthropy);
- Removal of the US yoke enables WHO to take stronger positions on pharmaceuticals (IP, prices, distributed production), food systems, and global health security;
- Wider appreciation of WHO and democratised global health governance contributes to stronger movements for equity, sustainability, and inclusion.

Strategic campaigning

The Trump chaos has unfrozen the institutions and norms which have sustained transnational neoliberal capitalism over the last forty years. We are now in a period of heightened geopolitical fluidity. It is a complex adaptive system which could return to its previous stability, or which could transition to a new and more hopeful geopolitical regime (or to a new and worse regime).

This 'windows of opportunity' perspective points to the need to identify the instabilities and adopt strategies which apply maximum pressure around those instabilities directed to opening the pathways to progressive scenarios and blocking reactionary outcomes.

This perspective is complicated by the fact that the instabilities generated by the Trump shake-up may be different for different constituencies, in different countries and at different levels. Accordingly, the strategies which need to be developed may need to be somewhat different for those constituencies, countries and levels.

This diversity of 'windows' highlights the risk of incoherence, even conflict, across and between different constituencies working towards similar ends but in different settings. The key to coherence across a converging phalanx of progressive forces is the macro micro principle: addressing local and immediate issues in ways which are also directed to confronting the larger scale, more macro forces.

Achieving such coherence and convergence depends upon a rich conversation across borders, across difference about those larger scale macro forces, how they are constituted, how they may be transformed.

These conversations will include:

- Building pressure for more equitable and healthy policies, converging with other progressive social and political movements and working with aligned governments; defending WHO; making it work better;
- Promoting action on global warming, including meaningful support for adaptation in the global South; building support for ecosocialism;
- Prioritising living well over materialism, consumerism, individualism; rebonding with Mother Earth;
- Promoting anti-imperialist economic policies, including: a new NIEO, dedollarisation, tax reform, regulation of TNCs, and a new approach to international debt; restoring national economic sovereignty;
- Defending real democracy; including democratic control over key economic controls;
- Building a multipolar world including regional cooperation and an equitable multilateralism;
- Resisting fascism, racism, casteism, sexism and division; naming the role of these divisive ideologies in dividing the opposition to capitalism.