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Paulina MICHAŁOWSKA
University of Białystok
ORCID: 0009-0000-5792-8529

The United States of America in the face of the SARS-CoV-2 coronavirus pandemic

Abstract: The United States experienced an abundance of significant events in the year 2020 – the crisis of Donald Trump's administration and the presidential election, mass racial protests, economic problems, and above all, the emergence and spread of the SARS-CoV-2 coronavirus pandemic. The USA was one of the first countries where cases of COVID-19 were confirmed. Moreover, the number of patients quickly reached alarming levels. The coronavirus pandemic has left its mark on American society, the economy, and international relations.

The aim of this article is to present the problem of the development of the coronavirus pandemic in the United States of America and its impact on politics and policy. In addition, we will analyze the problem of the US maintaining its superpower status in the context of the image crisis caused by the COVID-19 pandemic. The article adopts research methods based on tracking events, their evaluation, qualitative and critical analysis of texts, and conducting comparative evaluations. The following research questions will make it possible to achieve this goal: what was the course of the coronavirus pandemic in the United States? What problems did it cause, and what problems have been exacerbated? What actions did the Trump and Biden administrations take to combat the spread of the virus? What were the effects of the government's actions? How has the pandemic affected the international position of the U.S.?

Key words: USA, pandemic, COVID-19, Donald Trump, Joseph Biden, Superpower

The course of the SARS-CoV-2 coronavirus pandemic in the USA

Epidemics have accompanied man since ancient times. Behaviors such as leading a settled lifestyle, the popularization of trade, especially setting out on trade routes to more exotic places around the globe, and finally the development of civilization contributed to the spread of contagious diseases at a much faster pace and on a larger scale, and thus – often leading to the deaths of millions of people. The SARS-CoV-2 coronavirus was detected at the turn of November and December 2019 in the central part of the People's Republic of China (Hubei province, Wuhan city), where an outbreak of severe pneumonia of unknown origin occurred. On January 9, 2020, the world was informed that the disease was caused by a novel coronavirus, characterized by high transmission (Duszyński et al., 2020, p. 12). The pandemic rapidly developed from a local problem in Central and East Asia to a global one. Similar to previous epidemics, as in the case of the spread of the SARS-CoV-2 virus pandemic, the mobility of society played a major role. Despite the introduction of the first restrictions and controls at airports, it was not possible to stop the spread of the new disease and within weeks the coronavirus appeared in Europe and then in the Americas.

The first officially recorded case of SARS-CoV-2 coronavirus infection in the USA took place on January 20, 2020. Despite the specter of a real threat to public health, the Trump administration downplayed the problem for weeks, which contributed to the rapid development of the pandemic in the country. It is worth noting that when Trump took office in 2017, his administration ended the program to produce cheaper respiratory support equipment and to increase the stock of reusable masks. In addition, the Office of Pandemic Preparedness was eliminated. It is worth noting that the political system prevailing in the United States significantly determined the actions taken – the high sovereignty of individual states and the attachment of Americans to a broad conception of personal freedom. These actions had serious consequences at the time of the spread of the COVID-19 pandemic (Fiedler, 2021). In the span of two months (to March 31, 2020), more than 170,000 U.S. residents were diagnosed with COVID-19, of whom more than 4,000 died. The relatively high percentage of deaths due to coronavirus compared to other countries was mainly due to life expectancy (people over 70 years of age, with *comorbidities*), the degree of urbanization, internationalization, and the cultural factor – the degree of integration and contact (Kuźniar, 2020).

March 2020 was the month when the epicenter of the coronavirus pandemic was the East Coast of the USA, with New York at the forefront. At that time, there were recorded increases in cases of up to 50,000 per day, which resulted in an increasing number of deaths. Governor Andrew Cuomo’s decisive actions helped stabilize the situation. The governor proposed a public health recovery plan[1] due to the many shortcomings that the pandemic revealed (Fiedler, 2021). COVID-19 cases in the U.S. affected an increasing percentage of the population, and a steadily increasing number of deaths was observed. In June 2020, there was a significant increase in coronavirus infections in the southern states (Florida, South Carolina, Missouri and Nevada). In addition, there was an increase in cases in the West and Midwest of the USA, where COVID-19 was not as much of a problem as on the East Coast. The intensification of coronavirus transmission in the south and west did not subside in the following weeks. According to data from The New York Times, a total of 1.9 million people fell ill with COVID-19 in the US in July 2020 – 42% of all confirmed cases at the time (Taylor, 2021).

In August and September 2020, a decrease in the number of cases was recorded compared to previous months. However, the holiday season and the subsequent Thanksgiving holiday caused a drastic increase in new cases. This situation impacted the healthcare system, with a significant reduction in the number of available hospital beds, which resulted in an increase in the percentage of deaths (Mitropoulos, 2020). The autumn wave of cases shifted predominantly to the West Coast with an epicenter in California, in contrast to the spring of 2020, when the East Coast was the main center of the pandemic. In California, nearly 50,000 new daily cases were confirmed, making it impossible for health centers to function properly. The Christmas period contributed to a sharp increase

[1] The proposals in the recovery plan included: defined responsibilities and powers between levels of government in the event of a public health crisis, the development of a system for the early detection of public health threats, the leadership team responsible for public health must be free from political pressure, the federal government should be guided by research-based knowledge, the need for the federal government to set up a public health emergency response team and a program for rapid coordination when health crises are detected (Cuomo, 2020).

in COVID-19 cases. A number of institutions issued recommendations regarding conduct during this time, urging people to stay at home. Similar to the Thanksgiving holiday period, US residents travelled en masse, leading to a striking deterioration of the epidemiological situation – on January 8, 2021, as many as 313,000 new cases were recorded. It was at this time when new, dangerous mutations of the virus were reported – the British and South African variants, which were characterized by a greater transmissibility. However, on 14 February, after three months of high infection rates, there was a decisive decline in daily cases. Despite the downward trend, the daily increase in new cases was still a serious threat. On February 23, 2021, it was announced that a total of more than 500,000 people had died of COVID-19 in the United States (Thebault et al., 2021).

When analyzing the epidemiological situation in the United States, it is worth emphasizing that the highest number of cases was recorded at the turn of 2021 and 2022, when the number of sick people reached over 5.7 million. After this period, there was a perceptible decisive decline in the number of infected people. As of August 30, 2023, the total number of confirmed cases of COVID-19 was over 103.4 million and the number of deaths reached over 1.1 million. However, it is worth remembering that the U.S. leads the way in the number of coronavirus tests performed, which is inseparable with a higher detection rate of infections. As of June 2023, approximately 668.9 million doses of COVID-19 vaccine have been administered (WHO, 2023).

U.S. Problems and Challenges in the Face of the Pandemic

The emergence of a new coronavirus triggered a series of different problems and significantly deepened existing ones that the United States had to face – a slowdown in the GDP growth rate in recent years, increasing social stratification, problems with infrastructure, education and the health care system, as well as tense situations regarding race relations. The prevailing situation was influenced by the presidency of Donald Trump[2] and the November elections, which resulted in a change of power at the highest level in the USA. The most important problem related to the spread of the coronavirus in the USA was the significant number of cases and deaths. The development of the pandemic led to a *lockdown*, as a result of which a considerable part of the population lost their jobs and, as a result, their health insurance. In addition, the difficult epidemiological situation led to the inefficiency of medical facilities. There are two main causes for this – an increase in demand for emergency medical services brought about by COVID-19, as well as a decrease in interest for routine examinations, which previously had generated significant revenue. According to the authors of the article *Covid-19 – Implications for the Health Care System*, the United States struggled with the lack of an adequate system for responding to pandemics at the national level. This was especially noticeable

[2] The main assumptions of the Trump Doctrine were based on the following: “America’s national interest first, resignation from unfavorable international agreements, a more assertive U.S. attitude towards other countries and organizations, elimination of threats to U.S. security at their source, a dominant role for the military, U.S. economic power = U.S. military power, fighting hostile regimes and terrorists, striving to maintain military dominance, rivalry with other superpowers” (Waśko-Owsiejczuk, 2018, p. 105)

at the beginning of the spread of the coronavirus, when adequate steps were not taken to control and stop the development of the pandemic. A substantial challenge was the racial distribution in coronavirus infections. As research shows, the Black and Latino populations are more susceptible to infection and death from COVID-19. This is because people of *color* in the U.S. have less access to medical care, leading to the development of chronic diseases that are conducive to the spread of a new virus. Statistically, they also have worse housing conditions as well as economic problems, resulting in malnutrition and hunger, which in turn is responsible for an inferior state of health. Another factor influencing the higher incidence of COVID-19 among people of *color* is that they perform high-risk work, and in the event of illness, they receive assistance in facilities where there are insufficient health care workers in relation to the number of patients (Blumenthal et al., 2020).

Late and ambiguous decision-making was a serious challenge. A striking example is the fact that the first COVID-19 infection was confirmed in the USA and South Korea on the same day, but the two countries chose completely different operational models. In Korea, mass testing and contact tracing of sick people began, while the U.S. government remained passive for almost two months. This is evidenced by the number of tests carried out in the first six weeks: about 65,000 were performed in Korea compared with about 500 in the United States. A vital issue was that in some states there were definitely insufficient basic necessities in the fight against the COVID-19 pandemic, which is why individuals were obliged to buy them on the open market. This contributed to a shortage of indispensable items and a drastic increase in their prices (Fiedler, 2021). In addition, it was evident that there was a divergence between institutional actions and the behaviour of the highest authorities. Despite taking certain actions, President Trump proclaimed in his statements and *tweets* information that was far from the truth, such as claiming that the epidemiological situation was under control and harmless, and that decisions about personal protection, including the wearing of protective masks, should be left to individuals. Donald Trump repeatedly undermined the facts presented by specialists, and as a consequence, significant social divisions and politicization of the threat arose – skeptical Republicans questioning the recommendations of specialists and rationally acting Democrats complying with guidelines (Jarczewska, 2021, pp. 221–242).

The problem that caused the coronavirus pandemic to develop on such a large scale in the US was the lack of concrete contact tracing information of infected people. This data was necessary to reduce the risk of further transmission of the disease, to determine behavior in everyday life, and also allow scientists to analyze the problem more extensively. Amy Maxmen emphasized that contact tracing in the U.S. would have been an extremely important activity, especially taking into account the behavior of Americans – an increasing number of meetings in large groups, mass migrations between cities, states, open educational institutions, and enterprises. The system of mapping transmission during the development of the COVID-19 pandemic encountered serious difficulties, as a result of which the data was incomplete and made public only to a small extent so as not to affect the outcome of the November elections. For example, in Singapore, researchers analysing cases in August 2020 were able to determine the percentage of new infections that were associated with known cases and this amount was around 94%, while at the same time in the US, only 5% of new infections were linked to already

known infections. This shows a lack of appropriate control over the prevailing situation (Maxmen, 2020).

Optimistic economic forecasts in the US for 2020 disappeared with the onset of the SARS-CoV-2 coronavirus pandemic. Small and medium-sized enterprises from industries such as gastronomy, hospitality, entertainment, and aviation have all been significantly affected by the *lockdown*. It is worth highlighting that the pandemic was favourable for businesses that take advantage of virtual space or provide life’s necessities, including among others, pharmaceutical companies, the food industry, and online retailers. The second quarter of 2020 brought large declines in GDP – as much as negative 32.9% relative to the previous year. Huge losses were observed in the US stock markets and there was a significant increase in unemployment levels, large enough to require state intervention to ensure the livelihoods of citizens. Despite the gradual resumption of activity in other industries and a noticeable improvement in the second half of 2020, the US economy eventually shrank by 3.5% compared to the previous year, and the unemployment rate in January 2021 oscillated around 6.3%. The necessity to introduce aid packages led to a significant increase in the budget deficit level to USD 3.1 trillion, which in turn resulted in an increase in public debt (Jarczewska, 2021, pp. 221–242).

The COVID-19 pandemic also affected the U.S. military, especially its operations abroad. In February 2020, U.S. military bases in Afghanistan, Iraq, Japan, South Korea, Germany, and Italy were subject to a number of restrictions, including a ban on leaving their places of residence and sanitary protection measures. In addition, the Secretary of Defense of the United States, Mark Esper, issued a document to stop the relocation of soldiers and military personnel. The epidemiological threat had an impact leading to the cancellation of planned military exercises, both of the country’s own units and those of the allies, as well as the reduction of the number of participants in the *Defender Europe 20* exercises. This situation had a negative impact on the deterrence potential towards Russia and the PRC. The manoeuvres in Europe were intended to be a signal to Russia that the U.S. is ready and has the ability to quickly transfer military aid to NATO’s eastern flank. Similar tactics were adopted by the United States in the Indo-Pacific region, where the exercises were intended as a show of force (Piotrowski, 2020). The threat of a large-scale spread of the pandemic resulted in the freezing of military activity in the Middle East, especially in Libya, Syria and Iraq, resulting in a picture of the inability of the United States to pursue its policy of superpower force projection around the world. Moreover, Donald Trump’s adoption of a policy of isolationism, which was exhibited even in the announcement of the withdrawal of military forces from Iraq,[3] strengthened such an image (Orłowski, 2020).

There is no doubt that the lack of success in the fight against the SARS-CoV-2 coronavirus pandemic contributed to criticism in international opinion towards the superpower position of the US. Long before the outbreak of the pandemic, the perception of the United States in the international arena was influenced by the unconventional presidency of Donald Trump and his style of conducting foreign policy.[4] As a result of the spread of the coronavirus, there was a significant deterioration in relations between the US and Europe. This is seen as a result of Trump’s decision on March 12, 2020, when he sus-

[3] See. Waśko-Owsiejczuk, 2022, pp. 256–257.

[4] See. Kleszczyńska, 2020, pp. 51–62.

pended flights from Europe without prior consultation with allies. In addition, the U.S. president offered the German company CureVac $1 billion to take over the exclusive rights to a vaccine that was being developed to immunize the body against COVID-19. The European side saw this as an expression of the selfishness of the United States in the face of the fight against the pandemic. President Trump’s actions also extended to the World Health Organization – after initial attempts to push the idea of calling the new virus the *Wuhan Virus*, which was supposed to show that the People’s Republic of China was entirely to blame for the situation in the world, in April 2020 it was decided to suspend funding to the WHO, arguing that the decision was due to the organization having a pro Chinese stance. Eventually, the U.S. left the World Health Organization (Kiwerska, 2022, pp. 23–36). Thus, Donald Trump’s actions in the field of foreign policy have clearly shown that no agreements or partnerships play an important role, and there is uncertainty and a lack of trust in mutual relations. The former President focusing solely on the domestic situation and business moves meant that the United States was perceived as uninterested in playing a leadership role in the international arena. As a consequence, questions have arisen about the re-evaluation of the global order and the functioning of the world in the post-pandemic reality.

Initiatives taken and effectiveness of actions

The outbreak of the threat posed by the SARS-CoV-2 coronavirus pandemic led to taking appropriate steps, which were primarily to minimize the level of infections and deaths, and secondarily to stabilize the economic and social situation in the country. The specificity of the American system made it unclear whose responsibility it was to fight the pandemic. In the U.S., federal authorities are responsible for responding to emergencies, including public health emergencies. In addition, the federal government has a responsibility to manage crises at the national level, as no state could handle such a situation on its own.[5] At the federal level, however, in many cases, the response to the epidemiological crisis went beyond the competence of departments, and as a result, many institutional problems arose. In addition, measures against COVID-19 should be considered in two stages – during the presidency of Donald Trump and after his successor Joseph Biden takes office.

The federal authorities first decided to increase travel controls, especially in the case of countries with an unstable epidemiological situation. Initially, on January 31, 2020, foreigners who had been in China within the past two weeks were banned from entering, and U.S. citizens were required to undergo a fourteen-day quarantine after returning from China’s Hubei province. As the pandemic progressed, people who had been in Iran (decision of March 2, 2020), the Schengen Area (March 13, 2020), the United Kingdom and the Republic of Ireland (March 16, 2020) and Brazil (May 26, 2020) were banned from entering the United States. In addition, the State Department issued recommendations that U.S. residents avoid international travel, and those abroad were advised to return to the country (Tharakan et al., 2020).

[5] For a key role of the federal government in the Bush administration’s National Strategy, see *National Strategy for Pandemic Influenza: Implementation Plan*, 2006, pp. 27–33.

An important aspect of the measures taken were the aid bills passed during the course of the pandemic, aimed at combating the effects of the virus more effectively. The first of the bills (see *Coronavirus Preparedness and Response Supplemental Appropriations Act*, 2020, Public Law, 116–123) was signed by Donald Trump on March 6, 2020, and according to its provisions, government agencies were to receive $8.3 billion to fight the coronavirus on a national and international scale. On March 27, the U.S. president signed another bill that was primarily aimed at providing quick and direct financial assistance to employees, families, small businesses, and branches of industry. The document implemented programs that aimed to address the problems with the spread of the COVID-19 pandemic. It included proposals such as: a one-time payment of $1,200 for adults earning up to $75,000 a year and an additional $500 per child, expanded unemployment insurance, covered COVID-19 prevention and treatment expenses by private insurers and Medicare, increased funds for hospitals and health care workers who were taking up the fight against the coronavirus, as well as provided financial support for schools and universities that were supposed to help in the transition to remote learning. The activities of the state authorities focused mainly on the distribution of financial resources and equipment that were designed to help in the fight against the increasingly spreading pandemic – to minimize the increase in the number of cases through restrictions on movement and to support people who lost their jobs as a result of the closure of businesses (*Coronavirus Aid, Relief, and Economic Security Act (CARES Act)*, Public Law, 116–136).

Nevertheless, the actions taken by the Trump administration were definitely too late, which translated into a significant increase in cases and a lack of any control over the epidemiological situation. It is worth highlighting that at the time of Trump’s taking office, he received from the previous president, Barack Obama, the document *Playbook for Early Response to High-Consequence Emerging Infectious Disease Threats and Biological Incidents*, which, following the example of G. W. Bush, instructed the incoming administration as to what steps should be taken in the event of a pandemic. In addition, it included a catalogue of available resources, the entities involved, a list of questions and a list of decisions to be taken. However, Donald Trump rejected his predecessor’s proposal, and in 2018 a new handbook was developed that included completely different content from the pandemic action plan. Moreover, a year later, a simulation of the influenza pandemic was carried out, which proved that the proposal of the Trump administration was not effective, especially in the sphere of coordination between separate entities and the range of competencies of a specific level of government. The COVID-19 pandemic confirmed the assumptions from 2019. The authorities were slow to act, focusing on short-term solutions, without a definite long-term plan. Coordination and cooperation in combating the threat failed, and there were many conflicts within the White House. Trump’s lack of decisive and effective responses to COVID-19 was also seen in his focus on the fight for re-election in the November 2020 elections and the impeachment process that took place at the turn of January and February 2020. In addition, it was a time of trade war and difficult negotiations between the U.S. and the PRC (Parker, Stern, 2022).

Joseph Biden’s assumption of the presidency in January 2021 was primarily related to taking up the fight against the ongoing COVID-19 pandemic.[6] The goal for the first 100

[6] During his inaugural address, Joseph Biden identified seven priorities for the new administration: COVID-19, climate change, racial equity, the economy, health care, immigration, and restoring the

days of his presidency was to vaccinate 100 million citizens because the United States was struggling with a low percentage of people who had taken the COVID-19 vaccine at the time. As a result of the campaign, within six months of Joseph Biden taking office, the effectiveness of vaccinations was significantly increased. In addition, the focus was on the introduction of a clear legal regulatory framework. A series of regulations were created and the *National Strategy for the COVID – 19 Response and Pandemic Preparedness* document was issued (see *National Strategy for the COVID-19 Response and Pandemic Preparedness*, 2021), which formed the basis for actions to combat the pandemic. In addition, the newly sworn-in president decided to return the United States to the structures of the World Health Organization, from which his predecessor had departed. Nevertheless, the emergence of new variants of the coronavirus, the spread of misinformation, especially in social media, and the strong anti-vaccination movement have led to a significant decrease in interest in prevention and an increase in coronavirus cases in the delta and omicron variants. It is worth noting that the Biden administration’s numerous mistakes in issuing recommendations led to mass criticism and a decline in the American public’s trust in the president. Undoubtedly, the deterioration of Biden’s image was influenced by the fact that after a year in office, more than 900 thousand people died of COVID-19 or comorbidities (Jarczewska, 2022, pp. 264–265).

An important area of the new administration’s activities was the economic sphere. On March 11, 2021, President Biden’s *American Rescue Plan* was signed into law. The document mainly concerned the extension of the payment of aid benefits and financial support for state and local authorities. Under the bill, millions of Americans could receive financial assistance and take advantage of many tax breaks, and the unemployed would be able to collect benefits for the following six months. In addition, the plan allocated about $30 billion to help restaurants that had to suspend operations as a result of the *lockdown* (*American Rescue Plan Act*, 2021). Undoubtedly, the stimulus package was one of the first steps that were helpful in rebuilding the American economy, which was stricken by the crisis of the COVID-19 pandemic.

It is worth noting that despite the initial successes of the Biden administration in the fight against the COVID-19 pandemic, the expected results have not been achieved – the number of people infected with the coronavirus and the percentage of dead have been steadily increasing. In addition, the economic situation has deteriorated significantly, especially after the Russian military invasion of Ukraine in February 2022. The Biden administration’s economic programs to combat the effects of the COVID-19 pandemic and aid programs for Ukraine have contributed to an increase in debt by more than $4 trillion over the course of the year. Nevertheless, the introduction of such programs generates new jobs in the US, and as a result, unemployment has fallen significantly to the level of 3.5%. However, the problem that hit American society hard was inflation, which oscillated at the highest level in forty years (Jarczewska, 2023, pp. 225–228).

President Biden’s stance sparked controversy when he announced the end of the pandemic on September 18, 2022, on a television show, despite the fact that the public health emergency in force since January 2020 was extended in August 2022. Despite the im-

global standing of the U.S. White House, *The Biden–Harris Administration Immediate Priorities*, 2021, https://www.whitehouse.gov/priorities/, 24.10.2023.

provement in the decline in deaths, it was still high, and advisers affiliated with the National Institute of Allergy and Infectious Diseases urged caution. Critical opinions were expressed primarily by members of the Republican Party, including former Secretary of State Mike Pompeo, who in his speech referred to the president’s decisions to remove soldiers from the army who had not been vaccinated against COVID-19[7] (Debusmann, 2022).

According to a survey conducted in the second half of January 2023, the attitude of Americans to the threat of the coronavirus has changed – only 26% of respondents considered COVID-19 to be a priority as regards actions taken by Congress and the president. It is worth noting that in both 2021 and 2022, this was the main area of interest of the American society (Pew Research Center, 2023). These studies show that many of the decisions made by Congress and the President to counter the spread of COVID-19 were inadequate to the needs of the U.S. population. Moreover, as the months passed, the American public grew weary of the abundance of contradictory information and the spread of disinformation, which the Biden administration failed to stop. Finally, on April 10, 2023, Joseph Biden signed a bipartisan resolution of Congress (H.J. Res. 7), ending the public health emergency. With the state of emergency in place, federal authorities were able to take a range of measures, including supporting the country’s economic, health, and welfare systems (Miller, 2023).

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The COVID-19 pandemic has been one of the biggest challenges in recent decades. The new situation forced decisive action, exacerbated the weaknesses of states and brought problems whose effects we are still observing today. An undeniable essential issue has been the lack of emergency preparedness of the United States, especially in the context of a public health emergency. President Trump’s decisions and downplaying the problem from the beginning of the spread of the new disease brought enormous problems that the new authorities, led by President Biden, had to face when they took office. The time of the pandemic revealed many weaknesses and significantly deepened the existing problems of a world power such as the United States. In addition to the economic problems that will affect the coming years, social problems, especially racial ones, are important. There is no doubt that the United States is going through a difficult time, full of challenges and requiring appropriate decisions to not only overcome the crisis and maintain its position as a global leader, but above all to prove to the international community that it is still capable of leading the world.

This raises the question of the impact of the pandemic on the functioning of states and the existence of a specific international order. Undoubtedly, the COVID-19 pandemic has demonstrated a crisis regarding democratic ideas and multilateralism. It revealed the shortcomings of the state apparatus, as it proved ineffective in the face of the spreading coronavirus. The duration of the COVID-19 pandemic was also a moment of crisis as

[7] Mike Pompeo’s statement from 19.09.2022 posted on Twitter: “Biden now says ‘the pandemic is over’ as he’s kicking tens of thousands of healthy soldiers out of the military with his COVID vaccine mandate.”

regards the superpower position of the United States, when internal problems became significantly visible and international relations became imbalanced as a result of the unconventional presidency of Donald Trump.

Author Contributions

Conceptualization (Konceptualizacja): Paulina Michałowska

Data curation (Zestawienie danych): Paulina Michałowska

Formal analysis (Analiza formalna): Paulina Michałowska

Writing – original draft (Piśmiennictwo – oryginalny projekt): Paulina Michałowska

Writing – review & editing (Piśmiennictwo – sprawdzenie i edytowanie): Paulina Michałowska

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Stany Zjednoczone Ameryki w obliczu pandemii koronawirusa SARS-CoV-2

Summary

Rok 2020 w Stanach Zjednoczonych obfitował w ważne wydarzenia – kryzys administracji Donalda Trumpa i wybory prezydenckie, masowe protesty rasowe, problemy gospodarcze, a przede wszystkim rozwój pandemii koronawirusa SARS-CoV-2. USA były jednym z pierwszych krajów, w których potwierdzono przypadki zachorowań na COVID-19. Ponadto liczba chorych szybko osiągnęła poziom alarmujący. Pandemia koronawirusa odcisnęła piętno na amerykańskim społeczeństwie, gospodarce i stosunkach międzynarodowych.

Celem artykułu jest przedstawienie problemu rozwoju pandemii koronawirusa w Stanach Zjednoczonych Ameryki i jej wpływu na politykę. Ponadto zostanie przeanalizowany problem utrzymania

statusu supermocarstwa przez USA w kontekście kryzysu wizerunkowego wywołanego pandemią COVID-19. W artykule zastosowano metody badawcze oparte na śledzeniu zdarzeń, ich ocenie, jakościowej i krytycznej analizie tekstów oraz przeprowadzaniu ocen porównawczych. Osiągnięciu założonego celu umożliwią następujące pytania badawcze: jaki był przebieg pandemii koronawirusa w Stanach Zjednoczonych? Jakie problemy wywołała, a które pogłębiły? Jakie działania podjęła administracja Trumpa, a później Bidena, aby zwalczyć rozprzestrzeniającego się wirusa? Jakie efekty przyniosły działania władz? Jak pandemia wpłynęła na międzynarodową pozycję USA?

Słowa kluczowe: USA, pandemia, COVID-19, Donald Trump, Joseph Biden, supermocarstwo

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