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IRAN
THE VIRUS OF “CRISIS” IN THE ISLAMIC REPUBLIC OF IRAN

Crisis management has always been a central tool in the survival strategy of Iranian political elites since their rise to power after the Islamic Revolution of 1979. From the First Gulf War (1980–1988) to structural hostility with Washington and Tel Aviv through the recurrent repression of social movements such as the student revolt of 1999 or the Green Movement of 2009, the authoritarian regime of the Islamic Republic seems to be fueled by crises. The management of crisis is designed to justify the restriction of the scope of civil rights of Iranian citizens in the name of Khomeinist ideals. Can the COVID-19 crisis lead to the strengthening of the institutions of the Islamic Republic or, on the contrary, after a short-term anti-protest effect linked to the fear of the spread of the virus within the Iranian population, can we expect a weakening of the regime of the Islamic Republic on the internal and regional fronts? In addition, one should wonder about a possible specificity of the political response of the authoritarian states towards COVID-19 starting from the Iranian example. In other words, are there any ideological convergences between Iran, Russia, and China and to what extent does the health challenge reveal similar questions between authoritarian states and democratic societies?

At the end of Ramadan, it seems that the authorities’ attempt to stop travel inside the country was not followed by the population. Traffic jams were heavy in Tehran for the *eid-e fitr* (celebration of the end of Ramadan). On May 25, 2020, Iran’s Health Ministry spokesman Kianoush Jahanpour announced there were 135,701 COVID-19 cases in Iran with an official death toll of 7,417. During the week before, more than 2,000 new infections were reported, raising fears of a second wave in Iran. As of May 25, 2020, 105,801 patients have recovered from COVID-19 and 2,615 are in critical condition. Jahanpour also announced that that 800,519 tests have been carried out in Iran since the crisis started. Before the end of May the end of restrictions included the reopening of holy sites, museums, tourist attractions, and the reopening of all administrations. Despite official announcements, the average increase of 2,000 new cases per day of COVID-19 during the week May 18-24, 2020 marks the largest increase in the number of infections since the end of the first wave of the spread of the virus, which raises fears of a second wave in particular in the provinces of Khuzestan and Tehran which account for half of all hospitalizations in the country.¹

This situation can be best explained by the economic imperative which pushed the Iranian government to partially leverage the sanitary measures to avoid the economic collapse as well as the return of the popular expression in the public space of a deep dissatisfaction regarding the (mis)management of the crisis by the au-

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Authoritarian response to the pandemic. Cases of China, Iran, Russia, Belarus and Hungary

...authorities. Indeed, their strategy focuses more on the interests of the regime rather than those of the population. This is why the government became the main political force advocating the suspension of restrictions that could further deteriorate the economic situation. The government based its strategy on ending the partial lockdown based on regional differences.² There is also a debate between moderate and hardliners on when to reopen the holy shrines and the Friday prayers.³

In February 2020 the government was trying to convince members of non-elected institutions (the Supreme Leader and Revolutionary guards) to act rapidly. The government had to wait one month to obtain the closure of the shrines and the suspension of Friday prayers. Then, after the nowrouz holidays it appears that the government’s priority has been to avoid the economic collapse of the country and to downplay the consequences of the health crisis. The government is facing a crisis of credibility and the health crisis will not reinforce the state’s credibility in the long term. Indeed, if in the short-term, the spread of the virus is a hurdle for the public expression of social discontent, the level of distrust will remain very high among the Iranian public opinion.⁴

The decision taken by the government at the start of the Iranian year 1399 (starting March 20, 2020) with the announcement of travel restrictions and the allocation of 20% of the state budget to fight against the spread of COVID-19 has not compensated for the initial slow reaction to preserve the official demonstrations commemorating the 41st anniversary of the Revolution (February 11, 2020) and to organize the first round of legislative elections (February 21, 2020). Concealing information about the first cases in January 2020 only reinforced the crisis of confidence between the majority of the population and the political system (nezam). Moreover, from the popular demonstrations of November 2019, which left more than

300 dead, until the firing of missiles on the civilian plane of Ukrainian Airlines, the credibility crisis of the Islamic Republic has compromised its management of the health crisis. Iran quickly became a regional hub for COVID-19 contamination, and the Iranian state’s response shows the limits of its health crisis management based on the interests of the political system rather than those of the Iranian people. This defense of the regime’s interests to the detriment of the imperative of giving priority to the health of the population can be seen through several decisions taken by the authorities of the Islamic Republic: first, the decision to pursue a normal political life and economic activities; second, the refusal to quarantine the religious city of Qom, the epicenter of the epidemic in Iran, and not to close the Friday prayers and pilgrimage locations during the first few weeks of the health crisis; and third, priority was given to security and economic survival issues by the regime rather than developing a strategy with a focus on the protection of Iranian citizens’ health. To study the health crisis in Iran, there is also the question of reliability of statistics and the ideological narrative promoted by the Islamic Republic. For official statistics, they are estimated to be three to five times lower than reality, and the official narrative is part of the broader propaganda war between the Islamic Republic of Iran and the Trump administration.

On the internal political scene, one can consider the rise of tensions between the so-called moderates and the most conservative factions because of their respective attempts to use the health crisis to promote their respective interests. During the legislative elections of February 2020, the non-selection of moderate and reforming candidates by the Council of Guardians of the Constitution was a tool for the most conservative factions to eliminate potential candidates who favored a transformation of the institutions of the Islamic Republic towards more openness to the outside world and more transparency towards Iranian civil society. The low turnout (officially 42% nationally, 25% in Tehran) was one of the main factors behind the Conservatives’ victory. On the other hand, the recognition of this low participation shows that the unelected religious authorities are aware of the massive disaffection of citizens for the institutions of the Islamic Republic. Indeed, the supreme guide, Ayatollah Khamenei, had himself called on the population to vote out of religious and patriotic duty. It is therefore a personal failure for the supreme guide, who was personally involved in the mobilization. In addition, the filtering of the candidates made it possible to eliminate political personalities, who are also oligarchs like the former spokesman of the Parliament Ali Larijani, to better organize the political competition within the most ideological conservative factions of the Islamic Republic.

The Supreme Leader purified the system by strengthening the factions still loyal to him in order to control the process leading to his succession. This includes the group consisting of his son Mojtaba Khamenei, Ebrahim Raïssi, the head of the Judicial Authority who was however defeated during the last presidential election in Iran, Hossen Taeb, who is in charge of the intelligence services of the Guardians of the Revolution, and his brother Mehdi, as well as the new commander of the Al-Quds force, the successor of Qassem Soleimani, Esmaïl Qaani. This is a group of personalities that plays a decisive role for the nomination of the next Supreme Leader. They wish to control the parliament in order to have a group of depu-

ties who reflect their vision and feed their speeches. On the other side, the reformers and moderates want institutional reform to limit the screening of candidates by the Guardian Council and favor either the emergence of a collective religious body to replace the current Supreme Leader or the election of a religious figure who believes that popular legitimacy is just as important as divine legitimacy for the legitimacy of the supreme office in the Islamic Republic.

We can find this very same division between moderate and conservative camps around the question of the relationship between science, superstition, and religion. At the beginning of the health crisis, the government wanted to give priority to health issues at the expense of religious principles but in a theocratic regime it took many weeks to reach the cancellation of Friday prayers, the closure of the main places of pilgrimage and, finally, the restriction of movement of the population between the different provinces of the country. This is why a movement is emerging from civil society, illustrated by the letter released by activists calling for Ayatollah Ali Khamenei, the Islamic country’s supreme leader, to step down as well as the video of the father of Pouya Bakhtiar, killed during the demonstrations in November 2019, demands that Iran’s political priorities be based on scientific arguments and not on political-religious ideology.

At the beginning of the pandemic several young nurses and renowned doctors lost their lives to COVID-19. The news about their death was broadcast through Telegram and unofficial social networks. In some regions (Guilan, Mazandaran) people started to take measures to protect themselves without waiting for any official guidance and in a total distrust of official broadcasters. The situation was very complicated at the beginning of the spread of the virus:

“In the beginning, medical staffers faced the outbreak with very limited equipment. Some washed their own gowns and masks or sterilized them in regular ovens. Others wrapped their bodies in plastic bags they bought at supermarkets.”

Since January 2020, the health sector has been pushing political authorities to avoid an ideological response to the spread of the virus. The popular distrust towards officials was reinforced by the contradictions in the statements of the deputy-health minister. Indeed, the deputy Health Minister Iraj Harirchi also advised against mandatory quarantine and called it a “pre world war era” strategy. But, the day after, Harirchi himself tested positive for the virus. This was a blow for the strategy of the Islamic Republic to minimize the danger of the virus. After this event, we noticed a change of strategy and the recognition both internally and externally of the reality of the health crisis inside Iran. Nevertheless, it was too late and the majority of the population remains defiant regarding the official discourse of the Islamic Republic.

According to semi-official figures, the number of deaths of COVID-19 among the medical profession was 107 while 10,000 Iranian health workers have tested positive for the virus. According to Peyman Foroughi, a 30-year-old doctor working with COVID-19 patients in the northwestern city of Tabriz, the risk of a second wave is high in Iran:

“Considering that the pandemic has not been completely repelled yet, the extensive reopening of businesses, offices and universities, which are venues for the gathering of many people in indoor environments, can distribute the disease in the society at a rapid pace.... It is highly likely that the disease emerges as a heavy weight falling on the healthcare system, which would exceed its capacity.”

Another Iranian doctor working in one of Tehran’s largest hospitals, who prefers to remain anonymous, confirms that his country’s health system may not be ready for a second wave:

“During the two weeks of vacation [Iranian New Year (Nowrouz) holidays], the situation was almost back to normal. Whereas in early March we had dedicated 120 beds to Covid-19 patients, today we have 80 beds with patients with Covid-19 and other illnesses. We are concerned about this resumption of activity which may lead to a return to the catastrophic period of early

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10 https://twitter.com/VOAIran/status/124110443412208384
12 “Doctors And Nurses Died,” Associated Press.
March.”

Despite blaming the US, Iranian officials claimed throughout the crisis that national industries made enough protective material to fight the virus. Therefore, it is not surprising that there have been many calls among Iranian civil society to give priority to a scientific based decision-making process for the Iranian New Year (Nowrouz) rather than a religious-ideological driven agenda. This is also a way to answer the slogan that the Supreme Leader gives every year: “Last year’s slogan was Boosting Production…. This year is the year of Surge in Production. This is the slogan of the year. Officials should act in a way that production will witness a surge, God willing, and that there will be a tangible change in the lives of the people.” This popular demand for a policy focusing on a scientific agenda is a new challenge for the authorities of the Islamic Republic who use religious feeling and sometimes superstitions of some parts of their population as a political tool to remain in power. Consequently, if the virus seems anti-revolutionary in the short-term, it is likely that in the long-term it will further deepen the credibility crisis of the Islamic Republic.

Civil society and the Iranian doctors are doing an effective job to inform and protect the population despite the political mismanagement of the Islamic Republic. Doctors broadcasted videos to confront the fake news and to teach people how to make their own masks. This will have a positive effect in the long-term in raising social awareness among the population on what it means to live under a political rule based on a Khomeinist ideology that is not designed to overcome the challenges of the 21st Century. This crisis will deepen the gap between the hardliners (osulgarayan) that are focusing on the next presidential election (2021) and the succession of the Supreme Leader (who is 81 years old) on the one hand, and the majority of the population who want to live in a normal country on the other hand.

It should however be stressed that, during the first weeks, a debate took place within the Iranian Shiite clergy on the imperative to base health policy on scientific parameters, and on the need to give priority to the health of Iranian citizens rather than the politico-religious ideology of the political system. Here too, we have seen that the state is lagging behind a civil society whose demands in terms of health policy are based on scientific knowledge rather than religious beliefs. The question about the reliability of the statistics (previously mentioned) can be best explained by the politicization of health issues and by the internal power struggles in the Islamic Republic which affect the ability of the system (nezam) to respond effectively and consistently to the spread of the virus.

In addition, there is an internal and external propaganda dimension to this health crisis, the dimensions of which are local, national, regional, and global. On the COVID-19 issue, we find the war of narratives that has opposed Iran to the United States for more than forty years. There is therefore a double problem of reliability with regard to the situation in Iran: reliability of the figures, firstly; reliability of the presentation of events, secondly, because of the inclusion of health policy in the framework of Tehran propaganda, which constantly refers to the martyrs of the Iran-Iraq war (1980-1988) and accuses the Trump administration to use the health crisis to weaken the Islamic Republic. Thus the Islamic Republic presents health personnel as the heirs of the fighters of the Iran-Iraq war and confers on them the role of new saviors of Iran. Following the same logic, the Supreme Leader has proclaimed martyr status for doctors and nurses who die from COVID-19.

**ECONOMIC EFFECT OF THE PANDEMIC**

The Iranian response to the health challenge is part of the original context of a triple economic crisis that precedes it and is worsening at the same time as the health crisis is developing. The first economic crisis began two years ago with the announcement of the US withdrawal from the Nuclear Agreement in May 2018, which then

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17 “Doctors And Nurses Died,” Associated Press.


19 On the clergy’s lack of credibility regarding “Islamic medicine” or in being the leading political force in shaping public health policy at the State level, see Erin Cunningham, “Iran’s clerics have bungled their coronavirus response, stoking doubts about their rule,” The Washington Post, May 16, 2020, https://www.washingtonpost.com/world/middle_east/irans-clerics-have-bungled-their-coronavirus-response-stoking-doubts-about-their-rule/2020/05/15/e85856ba-8898-11ea-80df-d24b35a568ae_story.html.

involved the reimplementation of unilateral economic sanctions by the Trump administration. Two years later, US secondary sanctions made Iran the most punished country in the world. Far from the idea of “smart sanctions” promoted by previous US Presidents (from Clinton to Obama), the Trump Administration’s idea this time is to suffocate the Islamic Republic of Iran to seek regime change. The health crisis is therefore seen by the Trump administration as an opportunity to further weaken the Iranian regime. The extent of the extra-territorial American legal regime complicates humanitarian trade with Iran and therefore the possibility for Iran to import medical supplies to overcome the health crisis. This is visible for barter systems because the US sanctions are aimed more specifically at oil exports from the Islamic Republic, which fell to less than 300,000 barrels per day during spring 2020. As a result, Iran is having difficulty paying for humanitarian goods and even using banking channels like the Swiss channel or the channel set up by the European Union called INSTEX. In fact, the impact of the sanctions on Iran’s health care sector has been a factor that has endangered Iranian health workers and has put the lives of Iranian citizens at risk. Indeed, even if, de jure, humanitarian goods and medical purchases are excluded from the legal scope of secondary US sanctions, the phenomena of over compliance make banking transactions with Iran more difficult even for this kind of product.

The second economic crisis is linked to the fall in oil prices, which stood at around $30 in May 2020. Paradoxically, Iran is one of the oil-producing countries least affected by the fall in oil prices due to the decrease of its oil exports from 2.5 million barrels per day in 2017 to less than 300,000 b/d in 2020 due to the US sanctions. However, the Iranian government’s budget has been directly affected by the collapse in oil revenues. Paradoxically, what is positive is the obligation of the Iranian government to generate non-oil revenues, but the objective for the Iranian year March 2020-March 2021 of $10 billion in oil revenues already seems too optimistic. Five billion seems a more realistic goal while we are witnessing, at the same time, the collapse of regional non-oil trade with the closure of borders in the Middle East. These non-oil exports were, however, central to Tehran’s economic strategy to compensate for the collapse in oil exports. This is what explains Iran’s request for a $5 billion loan from the International Monetary Fund (IMF)—the first Iranian request in 60 years. Finally, the third and final external shock to the Iranian economy is the result of the measures taken by the Iranian authorities to curb the spread of the virus.

In this context of a triple economic crisis, the question of the country’s economic survival is raised. One has to consider that Iran experienced a recession of almost 10% in 2019 and that some estimate a possible recession at almost 25% for the next coming year. Consequently, the government’s hesitations are primarily linked to these economic concerns, while for the Supreme Leader and the Revolutionary Guards questions of identity and political-religious principles are decisive in defining the country’s health priorities. The result of these dissensions is the implementation of a confused and erratic policy for managing disorder. In these circumstances, it is difficult to imagine how a stable and lasting health order could come about.

THE RELATIONS BETWEEN THE AUTHORITARIAN GOVERNMENTS AND OUTSIDE WORLD

As for the conspiracy theory promoted by the guide Khamenei, which highlights the alleged American responsibility in the creation of the virus, we observe here similarities with the official Chinese version: the virus is, according to these perceptions, a geopolitical means for Washington to weaken his rivals. In addition, Ayatollah Khamenei spoke of what he described as the failure of the United States and Europe in the fight against COVID-19:

This failure manifested itself in three areas: managerial capability, social philosophy and morality. The spirit and basis of the social philosophy of the west rests on materialistic motives. For this reason, they have ignored the elderly, the sick, the poor and individuals with various disabilities, because such groups of people do not have the capability to earn money and generate wealth. For this reason, many have died in nursing homes. This reality vividly exhibits the failure of the western social philosophy.

This climate of media confrontation has effects on Iran’s ability to benefit from international cooperation to combat the pandemic. Indeed, because of these conspiracy theories, the Islamic Republic refuses any US humanitarian aid—in principle because of the hostile nature of US actions. And therein lays the Iranian specificity in relation to the Chinese and Russian accounts of the pandemic. Indeed, for Beijing and Moscow the anti-US ideological dimension in the construction of their media narrative does not take precedence over their economic interests. In the case of Iran, it is the ideological vision that determines the nature of relations with Washington and not its geopolitical and economic interests. There is therefore more pragmatism in Chinese and Russian foreign policies despite the same anti-US and even, sometimes, conspiratorial ideological tone.

In addition, there are rivalries between the various centers of power in the Islamic Republic in the management of the pandemic. Each group is trying to recover a legitimacy that has been tarnished in the eyes of the population. This explains why Tehran has created complications for the deployment of a team from the NGO Doctors Without Borders in Iran, accusing MSF of being a “foreign force.” There are therefore apparent contradictions in the Iranian authorities’ vision of the need (or not) for international assistance. On the one hand, the Rohani government calls for cooperation to meet the health challenge: request for a loan from the IMF, request for assistance from the World Health Organization (WHO) and the European Union, acceptance of MSF aid, request for the lifting of US sanctions. These demands are unlikely to succeed at the IMF level because of US opposition, but the European Union supports the idea of cooperation with Iran in this health crisis. But these external obstacles are not the only ones that the Rohani government must overcome. Indeed, the Supreme Leader and the Revolutionary Guards denounce foreign influences and the risk of infiltration if Iran opens up to international aid. These internal tensions and the failed bet of the Europeans to reinforce the so-called moderates within the political es-
establishment of the Islamic Republic explain the inability of Brussels to implement an otherwise smart Iranian strategy in theory and to offer a credible alternative to the confrontational policy of the Trump Administration.30

On the whole, the Islamic Republic is adopting a reactive policy rather than a proactive policy with regards to anticipating the spread of the virus. This can be best explained by the Islamic Republic’s dependency towards China and by the political infighting inside the system (nezam) to use the public health crisis as a means to increase its share of power inside the establishment. Because of the US economic blockade, Iran is forced to rely on China for trade despite the health crisis. Moreover this credibility crisis is also regional because Iranian neighbors such as the Kingdom of Bahrain and Saudi Arabia are accusing Iran of not being a constructive partner in the fight against the pandemic. Nevertheless, the United Arab Emirates, Oman and Kuwait have chosen to cooperate with Iran on this aspect of the health crisis rather than using the spread of the virus as a political tool to challenge the legitimacy of the Islamic Republic. Eventually, the Islamic Republic will face an internal opposition from the hardliners inside the establishment (criticizing the management by the “moderate” government) and from the civil society front because of disinformation regarding the health crisis (reliability of the statistics, management of the health system, etc.). The use of anti-US propaganda (blaming US sanctions and conspiracy theories) will not help the establishment to convince their own population that their management of the health crisis was designed for the protection of the health of their citizens. Rather the authorities are still focusing on the survival of the regime rather than the interests of the population.

After having downplayed the importance of the health crisis, Khamenei accused the US of being responsible of the outbreak of the health crisis inside Iran with the hidden agenda of weakening the Islamic Revolution. This has to be understood in the context of the fear of the Iranian elite of being the target of a US soft war (jang-e narm) against the Islamic Republic. Indeed, there is an intellectual debate on the beginning of the implosion of the Islamic Republic which is a recurring question in the media and Western think tanks. There is the famous reference to “Ayatollah Gorbachev” in comparison with the former Iranian “reformer” president Khatami (1997-2005) that was very popular in the West.31 The comparison with the USSR of the 1980s has been present in Western analyses since the 1990s. The Iranian reform movement is often compared to the attempt to reform the USSR, under Gorbachev, during the years of Perestroika. There is certainly common ground: weakening of ideology, gerontocracy, territorial expansion outside national borders, and weakening of political legitimacy internally, crisis of credibility of the system as highlighted by the Chernobyl crisis in 1986.

These convergences led certain analysts to speak in January 2020 about the “Chernobyl moment” of the Islamic Republic with the official lie about the firing of missiles by the Revolutionary Guards on the Ukrainian Airlines plane that was carrying civilians.32 Nevertheless, there are notable differences between the Islamic Republic of the 2010s and the USSR of the 1980s: first the use of repression and the use of violence to suppress social movements which is more and more recurrent in the Islamic Republic since the Green Movement of 2009; second, the maintenance of a hard core group of political factions which follows the precepts of the Khomeinist ideology with dedication while pledging allegiance to its successor the Supreme Leader Ali Khamenei. Furthermore, while the will to reform emanated from the supreme authority in the USSR, it is carried to the Islamic Republic by a president of the Islamic Republic with increasingly limited power in Iran (From Rafsanjani to Khatami and Rohani). Finally, the ability to censor and the will to carry official propaganda despite the popularity of the Persian language media broadcasting from abroad remains intact among the political elites of the Islamic Republic.

While the Chernobyl moment of the Islamic Republic may not have yet come, the fact remains that internal vulnerabilities clash with the talk of “Iranian hegemony” in the Middle East. We are witnessing an economic crisis and a socio-cultural transformation of the country which widens the gap between the official discourse and the socio-cultural reality of the country. The fact remains that the perception of Iran as a great regional power remains present in the discourse of certain neighboring countries (Saudi Arabia, Afghanistan, or Pakistan for example).

and in the West. This perception was built with the elimination of the Taliban regime after 2001 and the military intervention in Iraq (2003). The Arab Spring of 2011 also reinforced this idea of the rise of non-Arab states in the Middle East: Turkey, Israel, and Iran. However, seen from the Arab world (apart from Saudi Arabia and the United Arab Emirates), it appears that in terms of public opinion, anti-US discourse remains generally more widespread than opposition to regional Iranian or Turkish influence.33

Nevertheless, the internal credibility crisis also has a regional dimension for Iran, perceived by neighboring countries as one of the main sources of the virus spread. It is noted that Saudi Arabia and the Kingdom of Bahrain have designated the Islamic Republic as responsible for the spread of the virus in their country. Manama even accused Tehran of “biological aggression.”34 Conversely, Qatar, the United Arab Emirates and the Sultanate of Oman favor the path of cooperation with Iran on this issue. The greatest risk concerns Iraqi and Afghan societies due to the multiple ties that unite their populations with Iran and the weakness of their respective health systems.

This health challenge is therefore also a reminder: the links between the societies of the region are not reduced to regional geopolitical fractures. Internationally, Iranian conservatives are proposing to increase dependence on China and Russia, further isolating the country from the rest of the world. This policy is built within the slogan of the quest for self-sufficiency (khodkafaei), a principle at the heart of the ideological project of the Islamic Revolution of 1979. But the rapprochement with China and Russia does not ensure this economic development, particularly in the oil and gas sector. In addition, with the implementation of the Trump administration’s “maximum pressure” policy, Iran’s dependence on Russia and China has led the country to a form of powerlessness and loneliness while confronting the health challenge.

This situation caused a controversy in Iran between the Ministry of Health and the Ministry of Foreign Affairs following the statements of Kianush Jahanpur, spokesperson for the Ministry of Health who considered that the Chinese statistics on the COVID-19 pandemic were “a bitter joke.”35 In response, the Iranian spokesman for the Ministry of Foreign Affairs, Abbas Moussavi praised China’s “courage, commitment and professionalism” in its fight against COVID-19.36 This internal controversy shows that beyond the ideological convergences between Iran, China, and Russia, the COVID-19 health crisis is an obstacle to Chinese soft power. Indeed, even if the political and religious elites of the Islamic Republic are looking more and more towards the East (Russia is included in this dynamic), Iranian civil society remains lucid on the negative effects of this political strategy and its limits in times of health crisis. Likewise, the inability of political elites in the Islamic Republic to overcome the crisis of confidence with public opinion, which has worsened since the popular demonstrations in late 2017–early 2018,37 is confirmed by the chaotic management of the health crisis. The will of each power center of the Islamic Republic to instrumentalize the pandemic to promote its own interests comes up against the incredulity of the majority of Iranian public opinion and makes the Iranian authoritarian model based on fragmentation a more fragile model than China’s Unique Political Party System or the Russian model built on the verticality of President Putin’s power.

Even if Russia’s political system is not much stronger as it is centered on the personality of one man—President Vladimir Putin—and is supported by a resource-oriented economy, there is not the same degree of ideologization of the decision making process as is the case in the Islamic Republic of Iran. Moreover, Russia is more a “sultanistic regime”38 rather than a theocratic political system even if there are some similarities between the political discourses regarding the “religious identity” in the two countries.39 The Iranian regime is weaker than the Chinese and Russian ones given that some estimates put the

popular support of the Islamic system (nezam) in Iran as 15% of the population. Last but not least, the use of force to repress popular movements before the spread of the virus was recurrent in Iran since the rise of discontents in the popular class in 2017, 2018 and November 2019.

This lack of popular support and the ideological dimension explain the recurrent reference to the demise of the USSR. Is it plausible to have an Iranian Gorbachev within the next decade? Are there pro-Western, more secular sentiments within the Iranian society? Iranian people, including some among the ruling elites, are losing faith in the khomeinist ideology in a way similar to that of the USSR of the late 1980s. Therefore, strategic patience is a better policy choice for Western leaders rather than containment, Information war and escalation. The “rotten” Islamic Republic of Iran is stronger when under “maximum pressures” of the Trump Administration and weaker under Obama’s smart policy of strategic patience and dialogue. The US factor is also a key factor in the definition of Iranian in Moscow and Beijing. Iran is not vital to their geopolitical interests but rather a little pawn in the current phase of great power competition. This is the result of the confusion among the Iranian political elite since 1979 between “self-isolation” and the quest for independence. It is therefore less than likely that Russia and/or China will help Iran in case of conflict or complete economic collapse. The COVID-19 crisis confirms that Iran came from the “US dependency” before the Islamic Revolution of 1979 to a new foreign policy that increasingly relies on Russian and Chinese support. Since the end of the Cold War, this double dependency is based on two main factors. For Tehran, there is a security-dependency towards Moscow (both in the definition of bilateral relations and at a regional level) and an economic one towards China. With the decline of interdependency in the post-COVID 19 international system, it will be harder for the Islamic Republic to hide this double strategic vulnerability as a result of Khamenei’s quest for defying what he perceives as a US-dominated international system not only in the Middle East but worldwide.

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41 David Patrikarakos, “Coronavirus has exposed Iran’s rotten republic,” Spectator, May 6, 2020, https://www.spectator.co.uk/article/coronavirus-has-exposed-iran-s-rotten-republic?fbclid=IwAR33bK29KgbpVqHrOvpq9ae0AXul3Vc1WPIE7vM4Pu7K75DmAbUg7GH1jQ.
42 See Clément Therme, “Iran and Russia in the Middle East: Towards a regional alliance?” The Middle East Journal, Fall 2018.