

RSIS Commentary is a platform to provide timely and, where appropriate, policy-relevant commentary and analysis of topical and contemporary issues. The authors' views are their own and do not represent the official position of the S. Rajaratnam School of International Studies, NTU. These commentaries may be reproduced with prior permission from RSIS and due recognition to the author(s) and RSIS. Please email to Mr Yang Razali Kassim, Editor RSIS Commentary at RSISPublications@ntu.edu.sg.

China's Response to Coronavirus Outbreak: Implications for ASEAN

By Zi Yang

Synopsis

Almost two decades after the severe acute respiratory syndrome (SARS) outbreak, the Chinese government is again confronting a mysterious illness caused by an agent similar to the SARS coronavirus. How China responds to the outbreak have implications for ASEAN states, especially in anticipation of an influx of Chinese visitors during the coming Lunar New Year holiday.

COMMENTARY

WUHAN, A municipality of 11 million in Central China, reported its first case of viral pneumonia on 12 December 2019. Later confirmed to be caused by a novel coronavirus with 89 percent similarity to the SARS coronavirus, those with the illness show symptoms such as lung lesions, fever, fatigue, dry cough, and difficulty in breathing.

According to most recent official Chinese statements, a total of 319 people have been infected with the novel coronavirus and six fatalities have been reported. On 19 and

20 January 2020, Chinese officials announced that Beijing and Guangdong have confirmed novel coronavirus cases have spread beyond Wuhan to 17 regions across China. The actual source of infection remains unknown.

Human-to-human Transmission?

An earlier World Health Organisation (WHO) announcement, based on information coming out of China, underlined that the disease did not appear to be spreading and there was no sustained human-to-human transmission. On 21 January, China officially confirmed the deadly coronavirus can spread from human to human.

A 17 January report by the MRC Centre for Global Infectious Disease Analysis at Imperial College London showed an estimate of up to 1,700 infected individuals in China, indicating possible underreporting by local governments.

So far, six confirmed novel coronavirus cases have been detected outside of China. Two in Thailand and one each in Japan, South Korea, Taiwan, and the US. In Singapore, seven travellers have been quarantined. All have tested negative. From 22 January onwards, Singapore will isolate all travellers from China with pneumonia.

China's Response to the Outbreak

The Chinese government's response to the outbreak has been swift. Chinese state media publicised information regarding the unexplained pneumonia on 31 December, two and a half weeks after the first case was reported. On 1 January, a Wuhan seafood market, said to have sold wildmeat linked to the outbreak was shut down for clean-up and disinfection.

922 people who had close contacts with affected individuals are being closely monitored. On 9 January, Chinese state media announced that scientists have generated a full genetic sequence of a novel coronavirus through samples from infected individuals. The genetic sequence of the coronavirus was publicly released two days later. In mid-January, foreign specialists were invited to Wuhan to exchange information on the situation.

Yet despite the quick response, transparency remains a serious issue. As mentioned previously, there is a severe underreporting regarding the number of infected persons. Information control has been tight. Chinese authorities issued warnings to those spreading online “rumours” regarding the disease and police have questioned individuals about this issue.

In total, China’s containment effort has been proactive but opaque. International partners are kept informed, but the quality of information is dubious. Although the release of a trove of information in recent days indicate a possible turn towards transparency, legacy of the SARS outbreak 18 years ago still shadows responses of today.

Responding to SARS 2002–2003

The first case of what later became known as SARS was reported in mid-November 2002. However, news of the case was quickly silenced. In the meantime, the disjointed Chinese bureaucracy spent enormous amount of time figuring out what to do. Bureaucratic differences led to slow and ineffective response, while the disease spread.

Information about the outbreak was hidden from the world until the following February, 2003 when the Chinese government reported the outbreak to WHO and its own citizenry for the first time. However, WHO specialists were not allowed to visit the site of the initial outbreak until early April 2003.

As growing outside pressure and insider revelations forced the government to act, it finally agreed to full cooperation with WHO in April 2003, and a concerted nationwide effort went underway to contain the spread of SARS.

Although the outbreak came to a close in August 2003, SARS eventually spread to 26 countries, infecting a total of 8,437 people, and led to 813 deaths. China and Hong Kong suffered the most deaths, respectively 348 and 298 victims. ASEAN nations suffered as well.

There were 206 confirmed SARS cases and 32 deaths in Singapore, 63 cases and five deaths in Vietnam, five cases and two deaths in Malaysia, nine cases and two deaths in Thailand, and 14 cases and two deaths in the Philippines.

The Chinese government's handling of SARS was roundly criticised as clumsy and irresponsible. In the years following the crisis, the government invested heavily in public health infrastructure, a modern disease reporting mechanism, and promised greater transparency regarding contagious diseases.

Implications for ASEAN

In sum, China's approach to the outbreak has been different from its response to SARS, but transparency remains a major issue that could undermine international containment effort. In recent days, the Chinese government has released more information regarding the disease, perhaps responding to pressure from the MRC Centre report and domestic critics who fear a SARS redux.

ASEAN nations, taking a cue from the past, are upping the monitoring of travellers coming from Wuhan, China. With the approaching Lunar New Year holiday season, a large influx of Chinese visitors to Southeast Asia is expected.

The confirmation of human-to-human transmission means greater precaution is needed. Besides strengthening health checkpoints at border entries, ASEAN states must urge China to be more transparent in its response to the coronavirus outbreak.

To protect their citizens, ASEAN states should do the following. First and foremost, clearly communicate to the Chinese government the need to regularly share outbreak information. Specifically, the Chinese government must provide truthful information on the number of infected individuals and cities in China where outbreaks have been reported, so ASEAN states can properly prepare countermeasures.

Second, seek cooperation with Chinese health counterparts through existing channels in containing the disease. There are several established public health cooperation mechanisms between China and ASEAN that can be utilised for this purpose.

Finally, work closely with international organisations on the issue and draw upon their expertise. Such cooperation between ASEAN, China, and international organisations are very much needed, given that the transnational flow of Chinese visitors to Southeast Asia will soon increase dramatically in the coming days.

Zi Yang is a Senior Analyst with the China Programme at the S. Rajaratnam School of International Studies (RSIS), Nanyang Technological University (NTU), Singapore

Nanyang Technological University

Block S4, Level B3, 50 Nanyang Avenue, Singapore 639798

Tel: +65 6790 6982 | Fax: +65 6794 0617 | www.rsis.edu.sg