How WHO Became China's Coronavirus Accomplice

Beijing is pushing to become a public health superpower—and quickly found a willing international partner.

BY **HINNERK FELDWISCH-DRENTRUP** | APRIL 2, 2020, 11:27 AM

While the novel coronavirus is changing the world, China is trying to do the same. Already a serious strategic rival of the United States with considerable international clout, it's now moving into a new field—health.

After initial denials and cover-ups, China successfully contained the COVID-19 outbreak—but not before it had exported many cases to the rest of the world. Today, despite the falsehoods it initially passed on, which played a critical role in delaying global response, it's trying to leverage its reputed success story into a stronger position on international health bodies.

Most critically, Beijing succeeded from the start in steering the World Health Organization (WHO), which both receives funding from China and is dependent on the

regime of the Communist Party on many levels. Its international experts didn't get access to the country until Director-General Tedros Adhanom visited President Xi Jinping at the end of January. Before then, WHO was uncritically repeating information from the Chinese authorities, ignoring warnings from Taiwanese doctors—unrepresented in WHO, which is a United Nations body—and reluctant to declare a "public health emergency of international concern," denying after a meeting Jan. 22 that there was any need to do so.

After the Beijing visit, though, WHO said in a statement that it appreciated "especially the commitment from top leadership, and the transparency they have demonstrated." Only after the meeting did it declared, on Jan. 30, a public health emergency of international concern. And after China reported only a few new cases each day, WHO declared the coronavirus a pandemic March 11—even though it had spread globally weeks before.

[Mapping the Coronavirus Outbreak: Get daily updates on the pandemic and learn how it's affecting countries around the world.]

WHO was keen to broadcast Beijing's message. "In the face of a previously unknown virus, China has rolled out perhaps the most ambitious, agile and aggressive disease containment effort in history," WHO experts said in their February report on the mission to China. The country had gained "invaluable time for the response" in an "all-of-government and all-of society approach" that has averted or delayed hundreds of thousands of cases, protecting the global community and "creating a stronger first line of defense against international spread."

China's "uncompromising and rigorous use of non-pharmaceutical measures" provides vital lessons for the global response, the WHO report said. Beijing's strategy "demonstrated that containment can be adapted and successfully operationalized in a wide range of settings." However, while recommending China's epidemic control policy to the world, WHO neglected the negative externalities—from economic damage to the failure to treat many non-coronavirus patients, psychological woes, and human rights costs.

It's not surprising that China's containment strategy was effective, said Richard Neher, virologist at the University of Basel. "The big lockdown, centralized quarantine, and contact tracing for sure accelerated the decline," Neher said. Lawrence O. Gostin, director of the WHO Collaborating Center on National and Global Health Law at Georgetown University, points to "major human rights" concerns with the lockdown techniques pioneered in China and now—to a different degree—adopted in many

nations. Gostin recommends standard public health measures like testing, treatment, contact tracing, and isolation or quarantine "as scientifically justified."

While the rising number of cases elsewhere shows that China isn't alone in failing in the initial stages of an outbreak, the full story of the Chinese loss will probably never be known—and certainly not recognized by WHO or other bodies.

One reason is that official data from China is often highly dubious—which can lead to ill-advised health policies in other countries, since studies based on information from China are the first used to understand COVID-19. Countless cases of people dying at home in Wuhan—some being described in social media posts—will probably never go into the statistics. And while a report by Caixin on the Chinese province of Heilongjiang said that a considerable percentage of asymptomatic cases has not been reported—which amounts to about 50 percent more known infections in China, according to a *South China Morning Post* report on classified government data—WHO takes numbers reported by Beijing at face value.

"I thought the greatest success of the Chinese party-state was in getting the WHO to focus on the positive sides of China's responses and ignore the negative sides of the responses," said Steve Tsang, director of the China Institute at the SOAS University of London. "With the WHO presenting China's responses in a positive light, the Chinese government is able to make its propaganda campaign to ignore its earlier mistakes appear credible and to ignore the human, societal, and economic costs of its responses."

Indeed, WHO closes its eyes to such problems. "China reported and isolated ALL individuals with laboratory-confirmed COVID-19," Christian Lindmeier, a WHO spokesperson, said in mid-March. However, Chinese authorities only in the beginning of April started to make current numbers of asymptomatic cases with lab-confirmed infections public—which also are included in the WHO case definition for COVID-19. "Every country has its own self-reporting processes", Lindmeier said. WHO epidemiologist Bruce Aylward, who headed the visit, said in an interview that China

was not hiding anything. When asked how many people have been put in quarantine, isolation, or residential restriction, Lindmeier referred to numbers from China's National Health Commission—which are much smaller than the numbers calculated by the *New York Times*. "WHO works with these data," he said.

Yet it is unclear whether the WHO experts who traveled to China sufficiently understood the situation on the ground. For example, based on numbers from the South China province of Guangdong, WHO argued that undetected cases are rare. However, a screening program for COVID-19 only included patients seen at fever clinics; most of them probably showed at least a fever. In Germany, most of the people who tested positive did not show a fever. It is easily possible that there has been a substantial number of undetected cases, Neher said, which is the "big unknown" in calculations of the death rate.

WHO also left many questions open about how exactly public engagement was managed in its report. Chinese people have reacted "with courage and conviction," it says; they have "accepted and adhered to the starkest of containment measures." While this is probably true for many, others were likely motivated by a statement of the Supreme People's Court: People carrying the virus who don't follow quarantine restrictions "face jail terms ranging from three to 10 years if the consequence is not serious," it says. Otherwise, they could face a life sentence or death.

"The community has largely accepted the prevention and control measures and is fully participating in the management of self-isolation and enhancement of public compliance," the WHO report says. In China, no measures have been implemented that could not also be used elsewhere, Aylward claimed in an interview. Apparently, the WHO mission didn't have the chance to speak with people with opposing views. Many Chinese people told him that they all have been attacked together and need to react in a united fashion, Aylward said.

The very uniformity of this narrative should have been a wake-up call, said Mareike Ohlberg from the Berlin-based Mercator Institute for China Studies. Indeed, the whole trip of both foreign and national experts seems to have been organized along Potemkin-esque lines for a team where most of its international members lacked linguistic skills and familiarity with China. "We really didn't have much interaction until after all the site visits," said Clifford Lane, a deputy director at the U.S. National Institute of Allergy and Infectious Diseases and a member of the delegation. It was his first trip to China, he told *Science*. "I was really surprised with how modern the cities were."

Ohlberg said the statements of the WHO have clearly been heavily influenced by the Chinese Communist Party. She says she was surprised that, from the start, many experts uncritically repeated information from Beijing and "preached confidence in the WHO and the Chinese government." The WHO report rightly emphasized the heroic commitment of the population of Wuhan. "But it's important that the WHO does not degrade itself to an instrument of the Chinese government—which does not want to make transparent how the population suffered," she said.

Osman Dar, global health expert at Public Health England and the Royal Institute of International Affairs, said that China is no different from other countries that seek to exert influence. WHO had evolved out of colonial-era international sanitary conferences convened by the European powers and expansionist U.S. policy, he said. Since WHO was controlled and largely influenced by the national interests of Western powers before, in the past 20 years, countries like China "have started to have more influence in the global health space."

Beijing's say is growing not only at WHO, but also in the health policies of more and more countries. This also is an important area in China's Belt and Road Initiative and its activities in African countries. It may be doubted whether Beijing always acts in the best interests of its partners. "Chinese health aid allocation is poorly related to direct health needs of African countries," French researchers last year concluded.

The same is true for the current outbreak, which is politically important, said Tankred Stöbe, former president of MSF (Doctors Without Borders) Germany and a former member of the International Board of MSF International. In February, he traveled to Southeast Asia (SEA) as a COVID-19 emergency coordinator for Doctors Without Borders. Countries like Laos, Cambodia, and Thailand "cannot escape the influence of China," he said. "I know about meetings where representatives of China have said: Dear friends in Southeast Asia, we're interested in continuing good cooperation. It is clear for us that you must let your borders open—otherwise we would have to rethink our friendship." The countries "cannot refuse," Stöbe said. Countries like Cambodia and Pakistan kept accepting flights from China during the outbreak.

For political reasons, "Vietnam can't close its border with China," physician Rafi Kot told the Israeli newspaper *Haaretz*. He founded several medical centers in the country. "The Chinese have put immense pressure on everyone: the Koreans, Vietnam, everyone," he told the newspaper. "Asian countries cannot act as they want vis-a-vis China because it's the big power in the neighborhood." While Cambodia closed its

borders to several Western countries in mid-March, it started military drills together with hundreds of Chinese soldiers, which concluded this Monday.

China itself temporarily closed its border to Laos almost completely during its COVID-19 outbreak, Stöbe said, forcing the north of the country into a critical economic crisis. And last weekend Beijing closed its borders to almost all foreigners—a move that it had criticized other countries for during the outbreak within its own borders.

"The fact that the Chinese government can persuade some SEA countries to keep their borders open to Chinese visitors, whereas it locks down a province with a population larger than most SEA countries shows how influential it is in the region," said Tsang of the China Institute.

Brian Eyler, Southeast Asia program director of The Stimson Center, said he was surprised to see China follow through with sending its foreign minister and an entourage of high-level officials to a Lancang-Mekong Cooperation ministerial meeting in Vientiane on Feb. 20. That was "a day in which the rest of China was on lockdown and cases of new viruses were increasing," Eyler said. The U.S. State Department had "prudently postponed" a similar high-level meeting on the same day in Bangkok. "So at the end of February, it seems China would rather project a business-as-usual stance to its backyard, rather than to err on the side of caution to safeguard those who attended."

From a human rights perspective, "authoritarianism is bad for your health," said Sophie Richardson, China director at Human Rights Watch. "We may never have a clear picture how the virus spread out and who died and why and who is denied access to treatments."

The world is now living with the consequences of the Chinese government's censorship, Richardson said. "Not only do we have this problem now, we might have it again in the future."

Hinnerk Feldwisch-Drentrup is a Berlin-based freelance journalist and co-founder of the online-magazine MedWatch, covering science, bioethics, and China-related topics. Twitter: @hfeldwisch