China: COVID 19 Control – A Response for Global Emulation?

Lin Chen
Valparaiso University, lin.chen@valpo.edu

Follow this and additional works at: https://scholar.valpo.edu/jvbl

Part of the Business Commons

Recommended Citation
Available at: https://scholar.valpo.edu/jvbl/vol14/iss1/2

This Special Feature is brought to you for free and open access by the College of Business at ValpoScholar. It has been accepted for inclusion in The Journal of Values-Based Leadership by an authorized administrator of ValpoScholar. For more information, please contact a ValpoScholar staff member at scholar@valpo.edu.
LEADERSHIP IN THE TIME OF COVID-19

CHINA: COVID 19 Control – A Response for Global Emulation?

— Lin Chen

December 3, 2020

China has successfully controlled COVID-19, when the world is struggling to control the pandemic.

How did China do it?

China published a set of policies, guidance, and regulations that were strictly and effectively implemented nationwide. To prevent and control the spread of virus, the government required
people to wear masks when they are in close contact with others and to stay at least 1 meter apart in crowded and enclosed places. Those individuals deemed essential workers including healthcare workers at medical institutions, salespersons, security guards, janitors, police, drivers, and public transportation service staff are all required to wear masks. At the same time, the government restricts non-essential gathering activities, limits the number of people participating in collective activities, and recommends the opening of windows regularly for proper ventilation and indoor air circulation. Additionally, thorough cleaning and disinfecting activities are performed in public places, stations, terminals, and in public transportation on a daily basis.

**Policy Creation and Implementation**

China implemented what has been titled the “Four Early/ Four Concentrated” measures to fight the coronavirus. More specifically, the government’s policy is delineated as follows:

1. **Early Detection**: The “early detection” facet of the government’s comprehensive policy relates to performing body temperature screening measures in public places, enhancing pre-inspection triage methods, erecting fever clinics to investigate symptomatic complaints, establishing early detection of confirmed cases, suspected cases, and asymptomatic infections, and requiring early reporting and full transparency.

2. **Early Isolation**: The “early isolation” component refers to completing the epidemiological investigation within 24 hours of active case confirmation in order to identify the possible source of infection as quickly as possible as well as to trace to all close contacts, conduct early isolation measures, isolate confirmed and suspected cases with centralized medical observation for a period of no less than 14 days, and disinfect all possible contaminated places completely.

3. **Early Reporting**: According to national laws and regulations, the “early control” element relates to dividing control areas into the smallest unit possible (e.g., individual buildings, residential communities, and apartments). Thereafter, certain actions are immediately undertaken (such as restricting the size of gatherings, limiting the number of participants or attendees, and establishing an isolation period pertinent to the circumstances involved) to control the sources of infection, cut off the channels of transmission, and reduce possible risk of infection. Upon the successful implementation of this phase, officials promptly announce the relevant information related to the actions taken and the control area is formally established.

4. **Early Treatment**: The “early treatment” component of the government’s COVID-19 comprehensive control policy focuses on early intervention in the country’s dedicated hospitals. Patients exhibiting even mild symptoms are treated in a timely and effective manner in order to prevent further progression of the disease. These healthcare facilities also engage in the exercise of multidisciplinary treatments with respect to patients with severe symptoms to maximize the recovery rate as well as reduce the overall mortality rate. After the patient is cured and discharged from the hospital, then s/he must continue to isolate for 14 days while under medical observation.¹

---

¹ Summary of national policy in controlling the spread of the coronavirus [in Chinese], found at http://www.gov.cn/zhengce/content/2020-05/08/content_5509896.htm www.news.cn
In the words of Sun Weidong, China’s Ambassador to India, these four measures used by China to control the spread of the coronavirus have achieved the multifaceted objective of “testing all who need to be tested, hospitalization of all who need to be hospitalized, isolating and treating all who need to be isolated and treated.” In a webinar conducted in May, 2020, Sun explained that “more than 340 medical teams of 42,000 medical workers across the country and half a million volunteers” traveled to the Chinese province of Hubei – where the virus originated – to combat the epidemic under the governance of China’s centralized government.2 The city of Wuhan, the provincial capital where the first cases were reported, was subject to a massive lockdown while the entire nation mobilized to ensure delivery and distribution of medical supplies and daily necessities to those residing there.

Acknowledging the recent release of what has been called the “Wuhan Files” – documents revealed showing a potential late start in actually identifying the disease and the potential underreporting of numbers of confirmed cases3 – China has appeared to have implemented measures which have efficiently prevented and controlled targeted groups and areas. With respect to public areas – and in accordance with recommendations, regulatory information, medical guidance, and technical assistance and in alignment with the implementation of centralized prevention and control measures – shopping malls, supermarkets, hotels, restaurants, and other entertainment places were opened gradually. For essential institutions and facilities, personnel entry and exit points in elderly care institutions, welfare homes, jails, and mental health facilities were carefully restricted and routine cleaning and disinfecting activities were provided.

For high-risk individuals – particularly seniors, children, pregnant women, disabled people, and patients with co-morbidities and severe chronic diseases – special prevention and treatments have been administered. Psychological counseling, critical and palliative healthcare services, and financial assistance tools have additionally been provided. For all schools, a daily report system has been activated which monitors and records the health conditions of all faculty, staff, and students. Each school must routinely clean and disinfect high-impact areas, implement an infectious disease control plan, provide guidance for disease prevention, and report on health management and classroom ventilation measures undertaken. With the assistance of volunteers, members of residential communities are educated and trained in disease prevention, COVID-19 symptom recognition, and treatment options. Virus screening in high-trafficked areas continues to be administered and a comprehensive public area sanitation and disease mitigation plan implemented. Communities where the epidemic has occurred are given the charge to conduct the investigation, administer an isolation plan, and provide ongoing disinfection.

The early intervention response by the government has been crucial in prevent and control the spread of COVID-19 in China. At the same time, people viewing COVID-19 seriously and are willing to cooperate with the government in its control. The question of negative impact on individual freedoms has been offset by the need to treat and control a devastating pandemic, now impacting the world. While such restrictions might be eschewed in many western countries, this directed response has proven critical to preserve the collective and

---


control the pandemic within national borders – allowing the country to open up its economy once again.

**Concluding Remarks**
China provides hope for the rest of the world and reminds other countries that even the most severe situations can be turned around. The national response to the COVID-19 epidemic and the high level of collective action in a modern city with more than 11 million people have stunned the whole world. China’s decision to remove lockdowns has been controversial and met with skepticism by some, inevitably the results will become clearer after the full effect of its application is demonstrated. Ostensibly, the success of this move is wholly dependent on the precautionary measures taken by the government.

With close to 1.4 billion people, China has demonstrated a firm resiliency to a devastating pandemic that continues to destroy other economies. Countries may want to emulate China’s response to COVID-19 and begin implementing better prevention and control strategies immediately as each one is at risk of becoming the new viral epicenter. Considering that each nation is unique, individual assessments should be performed of the possible benefits and negative consequences of each potential strategy proposed for adoption. In addition, countries should work on enhancing their response systems and emergency personnel in order to be more prepared for future outbreaks and reduce crippling impact when they strike.

---

**About the Author**

**Vivian Chen, PhD**

Dr. Chen is an assistant professor of accounting at Valparaiso University’s College of Business in Valparaiso, Indiana. She received her Ph.D. in accounting from the University of Texas at Arlington and her MBA from Pittsburg State University in Pittsburg, Kansas.

Dr. Chen can be contacted at: linn.chen@valpo.edu