

CHAPTER 6

China's Aid to Africa's Fight Against Ebola

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6.1 Introduction

Ebola hemorrhagic fever is an acute infectious disease caused by Ebola virus infection. It has one of the highest mortality rates of infectious diseases, up to 90 percent mortality. Since it was found in 1976, it has successively occurred or become prevalent in a dozen countries, though not on a large scale. In 2014, Ebola hemorrhagic fever broke out and became prevalent in Guinea in West Africa, and then spread rapidly to ten countries in Africa, Europe, and the Americas. This is the largest Ebola outbreak in history so far.

6.1.1 Background of China's Aid to Africa's Fight Against Ebola

On 22 March 2014, Guinea confirmed the first case of Ebola, but the world paid little attention and no large-scale foreign assistance was provided. On August 8, 2014, the World Health Organization (WHO) declared the Ebola outbreak as a "public health emergency of international"

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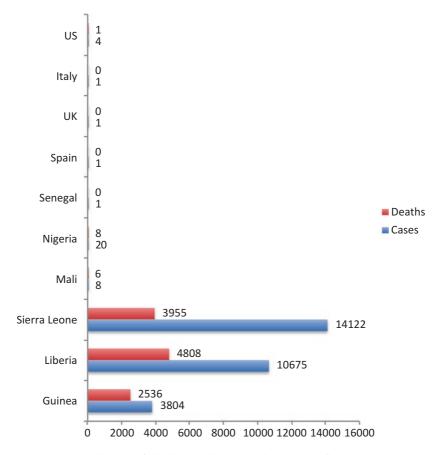


Fig. 6.1 Distribution of Ebola cases by November 22, 2015

concern,"² and large-scale international aid started to pour into the area. As of November 22, 2015, a total of 28,637 (confirmed plus suspected) people were suffering from Ebola, and 11,314 people died of the disease (Fig. 6.1).³ Upholding the approach of "sincerity, delivering outcomes, affinity and good faith" with a sense of responsibility and shared-security, and drawing lessons from its own fight against SARS, the Chinese Government made a quick decision to deliver rounds of large-scale aid packages to safeguard nontraditional security at home and abroad.

6.1.2 Implementation of China's Aid to Africa's Fight Against Ebola

Confronted with this unprecedentedly serious global health crisis, the Chinese Government immediately launched the joint prevention and control mechanism⁴ and took the lead action to provide several rounds of emergency assistance while strictly preventing the epidemic from spreading to its own territories. This became the largest-scale and longest emergency humanitarian aid and development assistance for health in China's history.

6.1.2.1 First Round

In April 2014, the Chinese Government decided to provide emergency aid supplies worth 1 million yuan to Guinea, Guinea-Bissau, Liberia, and Sierra Leone,⁵ mainly comprising protective suits, disinfectants, and rescue-monitoring equipment. All these supplies were transported to the affected countries in mid-May, and were the first batch of foreign aid materials received by the West African countries. At the same time, the Red Cross Society of China provided emergency humanitarian assistance of US\$50,000 in cash to Guinea.⁶

6.1.2.2 Second Round

With the rapid spread of the disease, the Chinese Government launched the mechanism for joint Ebola prevention and control, transporting urgently needed medical supplies worth 30 million yuan via chartered airplanes to Guinea, Liberia, and Sierra Leone in West Africa, which were most affected by the epidemic. The supplies included medical protective clothing, disinfectants, thermometers, and medicines, with a total weight of over 80 tons, setting a precedent for providing foreign aid by chartered airplane. On the afternoon of August 10, the supplies were air-loaded in Shanghai; on August 11 (Beijing time), the supplies arrived in Conakry, the capital of Guinea; then on August 12, they arrived in Freetown, the capital of Sierra Leone, and Monrovia, the capital of Liberia. As the earliest aid in bulk to arrive, these supplies helped calm the public panic.

Meanwhile, following the principle of "special methods for special events," the Chinese Government immediately sent to Africa an epidemic-prevention team composed of nine experts in epidemiology, virology, and testing. The team assisted the local Embassy in allocating supplies; held training on correct use of aid supplies; provided professional technical

guidance for Ebola prevention and control in the affected countries; helped improve the capacity to respond to public health crises; held epidemic prevention and control training for the Embassy, Chinese agencies, peacekeeping forces and medical teams in Africa under the coordination of the Embassy; and communicated with WHO, Doctors Without Borders and other aid agencies and organizations. The medical teams sent by China were also actively involved in the clinical treatment of Ebola patients in the affected areas.

6.1.2.3 Third Round

On September 12, the Chinese Government announced its decision to provide a third round of emergency humanitarian assistance, worth 200 million yuan, to the affected African countries and international organizations and to organize subsequent implementations, ¹¹ as follows.

First, continuing to dispatch expert groups to Guinea, Liberia, and Sierra Leone on a monthly rotation.

Second, transporting a mobile biosafety level 3 laboratory to Sierra Leone, 12 supporting the construction of fixed laboratories, and providing testing and security equipment and the necessary medical staff for the country. Not long before, representatives of the Virus Disease Control and Prevention Office of the Chinese Center for Disease Control and Prevention (China CDC) visited Institut Pasteur to carry out cooperative research on Ebola hemorrhagic fever testing methods at the UBIVE Laboratory, ¹³ completed the verification of the Ebola virus detection kit, 14 and proved through comparison experiments that the fluorescent reverse transcription polymerase chain reaction (RT-PCR) method developed by China for detection of Ebola virus nucleic acid achieved the same results as the Pasteur's detection reagent, with high specificity and sensitivity. 15 The detection reagent was quickly used in the fight against Ebola. On September 16, China sent the CDC mobile laboratory testing team to Sierra Leone. The testing team was composed of two groups of people: the CDC experts who were designated with the task of virus detection; and the medical workers of No. 302 Hospital in Xiaotangshan, which played an important role in China's fight against SARS in 2003 and was responsible for management of the Ebola patients to be observed this time. The laboratory testing team worked mainly in the Sierra Leone-China Friendship Hospital, a Chinese foreign aid project. ¹⁶ The transportation of the mobile biosafety level 3 laboratory to Sierra Leone was launched on September 23 and was put into operation after testing and evaluation work on September 26.17 On October 1, the laboratory was used for the first group of Ebola patients to be observed. ¹⁸ By October 31, the daily testing capacity reached more than 100 cases; the daily testing capacities of the USA, UK, Canadian, and South African laboratories at the same time were 70, 46, 11, and 0 cases, respectively. ¹⁹ The project of the fixed biosafety level 3 laboratory was launched on November 21²⁰ and completed on January 30, 2015. ²¹ The observing center later evolved into a treatment center.

Third, providing necessary financial aid for the seriously affected African countries, the WHO and the African Union (AU), including US\$1 million in cash to each of the three seriously affected countries (Guinea, Liberia, and Sierra Leone) and US\$2 million in cash to the WHO and the AU. The donations to the WHO are incorporated into the Special Fund for fighting Ebola to support implementation of the epidemic response plans of Guinea, Liberia, and Sierra Leone.²²

Fourth, entrusting the World Food Program (WFP) to provide grain and food aid worth US\$2 million to Guinea, Liberia, and Sierra Leone.²³

Fifth, providing protection and treatment supplies to other African countries, including Benin, Democratic Republic of the Congo (DRC), Ghana, Guinea-Bissau, Cote d'Ivoire, Mali, Nigeria, Republic of the Congo (Congo-Brazzaville), and Senegal to prevent Ebola virus from spreading.²⁴

6.1.2.4 Fourth Round

On October 24, meeting with President Kikwete of Tanzania, Chinese President Xi Jinping announced that the Chinese Government would provide the fourth round of assistance to West Africa to fight Ebola, covering six aspects.²⁵

First, sending public health expert advisory groups to Guinea, Liberia, and Sierra Leone to assist and take part in local epidemic prevention and control, and dispatching more public health personnel to help the three affected countries hold medical personnel training. The expert groups were dispatched on November 10 to hold training sessions for medical workers, grassroots management personnel, community leaders, government officials, students, social health workers, and volunteers of the three affected countries and the surrounding countries at risk of Ebola outbreak. The second group of the mobile laboratory testing team was dispatched on November 14.27

Second, continuing to provide urgently needed aid supplies, including hospital beds, ambulances, personal protective equipment, and incinerators, focusing on helping the three affected countries improve their ability to cure and transport patients and strengthening their disinfection and medical waste treatment capacity. The above-described materials were mainly transported by sea and arrived in the affected countries in the first half of 2015.

Third, constructing a 100-bed treatment center for Liberia, dispatching 160 medical personnel to the country, and helping to operate the center. Covering a land area of more than 20,000 m², the treatment center is equipped with 100 beds and was built according to high standards for infectious disease prevention and control hospitals. The center project was launched on October 26 and put into operation on November 25 with a construction period of only 1 month. It is one of Liberia's best medical centers.²⁸ On November 15, the 163-member medical team arrived in Monrovia,²⁹ the capital of Liberia, by air. On January 12, 2015, the first three Ebola patients were cured and discharged from the hospital.³⁰

Fourth, donating US\$6 million to the United Nations multi-trust fund to respond to the Ebola outbreak. On December 2, the China Ministry of Commerce and the United Nations China Office signed the agreement.³¹

Fifth, launching the plan for long-term China-Africa cooperation on public health; holding 12 training courses on public health and epidemic prevention and control for the three affected countries, the AU and the Economic Community of West African States in 2015; carrying out joint research on the prevention and control of infectious diseases; and actively exploring ways to dispatch experts to participate in the establishment work of the AU's CDC.

Sixth, strengthening international cooperation, attending regular meetings of the Core Team of the UN Mission for Ebola Emergency Response, and dispatching relevant persons to serve as senior officials of the United Nations Mission for Ebola Emergency Response. On November 14, CDC Deputy Director Feng Zijian went to West Africa to serve as Senior Advisor to the Head of the UN Mission for Ebola Emergency Response.³²

6.1.2.5 Fifth Round (Post-disaster Reconstruction)

On November 3, 2015, the Chinese Government announced the decision to provide the fifth round of assistance to the African Ebola epidemic area, mainly for post-disaster reconstruction.³³ The components were as

First, supporting the three affected countries to continue Ebola control and consolidate the results of the fight against Ebola toward ending the epidemics. Specific elements of the assistance included continuing to send virus detection teams to Sierra Leone; dispatching rotating personnel to the observation and treatment center of the Sierra Leone–China Friendship Hospital; operating the Liberian Ebola treatment center and transferring it to Liberia after completing the task; continuing to provide necessary medical supplies and hold local training on Ebola virus prevention and control; and actively supporting the relevant work of the United Nations, WHO, and AU and providing the necessary financial aid for them.

Second, supporting post-Ebola economic and social reconstruction in the affected countries to boost their national economic recovery and social development. Based on the three affected countries' demands for post-disaster reconstruction, implementing aid projects in the field of people's livelihoods, capacity-building, and infrastructure construction, and gradually implementing projects after careful consultation with the relevant countries through bilateral channels.

Third, supporting African countries to establish and strengthen public health systems to improve national capacity to fight against major epidemic diseases.

6.1.2.6 Overview

Before the fifth round of assistance for the post-disaster reconstruction was launched, the Chinese Government provided emergency humanitarian aid in the following ways. In terms of financial aid, as of the first half of 2015, the Chinese Government had issued a total of four rounds of emergency humanitarian assistance worth 750 million yuan to the affected countries. In terms of personnel and capacity-building, the Chinese Government dispatched several groups of nearly 1200 medical personnel to support testing, diagnosis, treatment, training, and technical guidance in the affected countries. The vast majority of these experts worked in the field alongside their African counterparts. As for facilities, China provided a mobile level 3 biosafety laboratory, constructed the first fixed level 3 biosafety laboratory in West Africa, and transformed the Sierra Leone-China Friendship Hospital into an observation, diagnosis, and treatment center with the function of curing patients with infectious diseases. Within 1 month. China built a modern infectious disease treatment center with 100 beds for Liberia. In terms of technological innovation, China launched research on Ebola detection and diagnosis technology, drugs, vaccines, and protective equipment, and made a number of technological breakthroughs. And regarding supplies, the Chinese Government provided a full range of material assistance, including individual protective

articles, disinfectants, detection equipment, mobile X-ray machines and other medical equipment, food, beds, incinerators, ambulances, motorcycles, and pickup trucks.³⁴

The first four rounds of aid focused on crisis response, controlling the spread of infectious diseases, and direct support for building emergency response teams for public health emergencies and capacity-building of relevant medical agencies.

In the fifth round of assistance, China adopted a series of measures to tackle the root causes of African public health threats. Currently, in addition to routine health aid projects, such as health facility establishment, health human resource development, long- and short-term medical team dispatch, medical supply provision, and volunteer work, China is attaching more importance to health security issues and a systematic approach to health aid, entering further into the realm of health policy development, disease surveillance, and public health interventions. For example, China and the AU have continued their cooperation to establish an African CDC to strengthen the continent's disease surveillance capacity. This is being done through collaborative efforts with international society, including WHO and other traditional donors. The level 3 biosafety laboratory has also evolved into a platform for cooperation between China and the host country, as well as institutions and organizations from other countries, for research activities and disease control, with ongoing training activities and policy outcomes in the pipeline. With the launch of China's South-South Cooperation Fund, we are expecting to see even more innovative cooperative projects for global health security and the push toward universal health coverage.

6.2 Analysis of China's Aid to Africa's Fight Against Ebola

6.2.1 Embodying the Ideologies, Principles, and Characteristics of China's Foreign Aid

6.2.1.1 Timely Support

In the early stages of the Ebola outbreak, many countries closed flight routes and evacuated citizens,³⁵ and did not attach great importance to the event until imported cases appeared and, 5 months into the epidemic, the WHO officially declared the Ebola outbreak to be a public health

emergency of international concern. The Ebola outbreak led to a huge loss of local and international medical personnel and the medical services system was almost paralyzed.

None of the medical workers based in the affected areas who had been sent by the Chinese Government returned home on the outbreak of the epidemic, and most employees of Chinese enterprises continued to work in their respective positions and participated in the fight against Ebola. The Chinese Government took the lead in transporting aid supplies to the affected countries and sent experts to guide the frontline fight against Ebola jointly with the local medical workers. Following the principle of "equal treatment with sincerity, providing pragmatic and efficient support, and keeping its promise," China provided assistance in a timely manner.³⁶

6.2.1.2 Joint Prevention and Control Through Sectoral Collaboration

China's action against Ebola is a part of a national joint action to prevent and control Ebola hemorrhagic fever. The national joint prevention and control mechanism is composed of 22 departments including the National Health and Family Planning Commission, Ministry of Foreign Affairs, Ministry of Commerce, Ministry of Finance, General Logistics Department of the Chinese People's Liberation Army, General Administration of Quality Supervision, Inspection and Quarantine, General Administration of Customs and Civil Aviation Administration of China, etc. These departments made unified decisions and deployments, building antiepidemic barriers at home and abroad. In domestic epidemic prevention and control, adhering to the principle of "attaching great importance and paying close attention to the epidemic, focusing on epidemic prevention and control and making joint efforts for scientific response," taking "zero imported cases" as the goal, the Chinese Government mobilized medical and health inspection and quarantine departments to strengthen Ebola prevention and control among target populations in key port cities to prevent imported cases.³⁷ In terms of foreign aid, aiming at "winning the fight against Ebola with zero infection," the Chinese Government coordinated the above functional departments and tens of embassies and consulates abroad to jointly complete the selection, production, collection, customs clearance, transport and transfer of thousands of supplies, as well as the selection, organization, training, assessment, and dispatch of more than 1000 professionals, along with project construction in the affected areas.

6.2.1.3 Flexible Measures

Due to the rapid spread of the disease, the Chinese Government took special measures in the process of managing preparation, procurement, transportation, construction, and personnel dispatch, taking into account the current regulatory framework and adhering to the humanitarian principle. To ensure that the first group of experts would enter the affected areas immediately, the Chinese Government broke with routine procedures and sent the experts abroad before completing the formalities. The Government also transported aid supplies to the affected areas by air and sea according to the principle "emergency goods go first, with different transport vehicles deployed as appropriate according to situations." The 100-bed infectious disease treatment center in Liberia was set up in less than 1 month.

6.2.1.4 Learning from China's Experience in Fighting Against SARS

China had accumulated rich experience in the 2003 fight against SARS. Learning from that experience, following the "five-early" principles—early detection, early reporting, early diagnosis, early isolation, and early treatment—and in line with requirements for the construction of infectious diseases hospitals, the Chinese Government implemented the strategy of "three areas, two zones, two routes." The three areas are a clean area, a semi-polluted area, and a polluted area; the two zones are a buffer zone between the clean and semi-polluted areas, and a buffer zone between the semi-polluted and polluted areas; and the two routes are a clean and a polluted route.³⁸ In this way, China paid attention to both epidemic control and medical treatment. While providing protective supplies, holding personnel training, dispatching experts to guide the fight against Ebola in the affected areas, and arranging foreign aid medical teams to work in the affected areas, the Chinese Government also sent medical personnel for epidemic detection, observation, and treatment on the frontline.

6.2.1.5 Comprehensive Aid Packages

China's actions were large scale and complex, breaking silos between traditional aid categories. The Chinese Government not only dispatched expert groups to carry out field activities, provide technical guidance, and hold personnel training, but also provided support for relevant facility construction and urgently needed materials, forming a joint force to fight against Ebola with several rounds of aid decisions. The assistance plan not

only looked at the urgent emergency situation but also took into account long-term health system reconstruction, economic and social development, and global health security.

6.2.1.6 Strengthened International Coordination and Cooperation

The Chinese Government sent representatives to attend the UN Mission to deal with Ebola and the WHO and other international organizations' epidemic prevention and control missions; established a reporting mechanism at all levels with international organizations; and maintained close communication to support the international organizations in fighting the epidemic. Under the coordination of the UN and WHO, upholding the principle of being active, open, and inclusive, and under the premise of aid being demanded, agreed, and participated in by the recipient countries, China cooperated with the USA, the UK, France, and other bilateral donors in communication and coordination, epidemic analysis, staff training, testing and treatment, information sharing, and so on, to promote the needed interactions. In this context, China signed the first memorandum of understanding on development cooperation with the USA³⁹ and the UK⁴⁰ on September 26 and October 21, 2015, respectively, promoting cooperation between China and traditional donors.

6.2.1.7 Attaching Importance to Information Disclosure

In the fight against Ebola, in addition to maintaining communications with the UN, WHO, the recipient countries and other aid agencies, the Chinese Government also responded promptly to public concerns by announcing important decisions and implementation processes on the websites of the State Council Information Office, Ministry of Commerce, Ministry of Foreign Affairs, National Health and Family Planning Commission, and CDC, guiding the public's rational understanding of the epidemic and cultivating the spirit of humanism and internationalism.

6.2.1.8 Broad Participation by Local Enterprises

During the Ebola outbreak, Chinese workers were one of the few foreign groups that did not leave the infected areas, and Chinese companies also made great contributions to the local fight against Ebola. Some Chinese companies, trade associations, the China–Africa Development Fund, and other agencies donated medical equipment, grain, oil, other food items, and motorcycles, as well as cash, to the local governments. Organized by the Economic and Commercial Councilor's Office of the Chinese Embassy,

all the Chinese companies in Sierra Leone, for example, worked for 3 days and nights despite heavy rainfall to jointly complete the transportation of the biosafety laboratory equipment and aid supplies to Sierra Leone. They also voluntarily covered the transport cost of 120 km of mountain roads.⁴¹

6.3 RESULTS AND IMPACTS OF CHINA'S AID TO AFRICA'S FIGHT AGAINST EBOLA

The results and impacts of China's aid to Africa's fight against Ebola are reflected in the following three main areas.

First, China made a significant contribution to curbing spread of the epidemic and to local capacity-building. As of December 2015, the Chinese Government had dispatched several groups of 1200 medical workers to carry out on-site laboratory testing, Ebola case observation, diagnosis and treatment, and public health trainer training in Guinea, Liberia, Sierra Leone, and seven neighboring countries; completed the testing of nearly 9000 sample Ebola cases and more than 900 observation cases; and trained more than 13,000 local health personnel and community epidemic control coordinators for the affected areas. 42 China not only provided urgently needed medical facilities and laboratories for the affected areas (including the level 3 biosafety laboratory and modern infectious disease observation, diagnosis and treatment center), as well as thousands of tons of emergency supplies, but also achieved the goal of "zero infection" of Chinese personnel, laying a foundation for the recovery and longterm construction of the national public health systems of the affected countries.

Second, China made use of the health technologies and organizational advantages of the military, and promoted bilateral relationships of mutual trust. China sent several groups of military medical teams to Sierra Leone and Liberia, who also played essential roles during SARS in 2003 and have rich experience in public health emergency control, to carry out observation, medical treatment, and testing work based in local and Chinese-built medical facilities and laboratories. This established relationships of mutual trust and cooperation between the countries, applied the health technologies and organizational advantages of the military, and contributed to local public health development and personal safety.

Third, China enhanced countries' national biosecurity capability. China's construction of the mobile level 3 biosafety laboratory and the fixed laboratory for Sierra Leone, and progress with the Chinese biosafety

testing sentinel site, provided an important platform for China's scientific research on tropical infectious diseases and real-time monitoring of world-wide epidemics. The laboratory's daily case-detection capacity was a quarter of the national daily detection capacity of Sierra Leone, 44 and the accuracy rate reached 100 percent according to an evaluation of donors' laboratories organized by the WHO and Sierra Leone Ministry of Health. 45 China also developed Ebola hemorrhagic fever diagnostic reagents in a short period of time, and made significant progress in the research and development of antiviral drugs, therapeutic antibodies, and vaccines. The Ebola vaccine entered the second phase of clinical trials in Sierra Leone. 46 China's professional teams for the prevention and control of communicable diseases also accumulated a wealth of laboratory data and clinical experience.

China's fight against Ebola was widely praised by the host governments, the public, and international organizations and institutions. Sierra Leonean President Koroma highly praised China as the first to provide assistance and as not giving up until the last minute, stating that China is Sierra Leone's brother.⁴⁷ Liberian President Ellen Johnson Sirleaf reiterated that at the most critical moment, China took the lead in providing assistance for Liberia and Africa, and made a great contribution to Liberia's fight against Ebola.⁴⁸ UN Secretary-General Ban Ki-moon and WHO Director-General Margaret Chan have repeatedly stated that China played an important role in fighting the epidemic in Africa and set an example for the world.⁴⁹ The African people in all circles of society also gave a sincere response to the friendship of the Chinese people.

Notes

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