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The COVID-19 and China-Europe Health Partnership

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Abstract

Health is a rising issue on the agenda of China-EU relations. Today, both China and EU are key players in global health governance, and a health partnership has been emerging between them. The COVID-19 crisis is a significant test for their health partnership. By now, the two partners have maintained close contact, and European health aid has been delivered to China. The epidemic underlines the global interdependence and the critical role of China and the EU in dealing with such challenges. In the short term, the two partners should continue to maintain close contact on the evolution of the disease and provide assistance to each other. In the long run, China and the EU may consider further lifting the role of health on their political agenda, and the EU may engage with China's health system reform more actively. The "Belt and Road" initiative could serve as a platform for strengthening their health cooperation, so to jointly build a community with a shared future for mankind.

Key words: COVID-19, Development Aid, Health Partnership, "Belt and Road"

Introduction

The COVID-19 epidemic broke out in December 2019, at Wuhan, China. The disease spread across China quickly, and then to the rest of the world. As of 29 Feb. 2020, the virus has been detected in 58 countries, resulted in over 87,000 confirmed cases and nearly 3,000 deaths. Since the outbreak of the COVID-19, China has taken decisive measures to put the epidemic under control. While mobilizing domestic resources to combat the disease, China has been keeping an open mind to international cooperation. Chinese scientists shared data of the virus with the globe, and Chinese government has been collaborating closely with the World Health Organization (WHO), and receiving aid from foreign governments, international organizations, non-governmental organizations and individuals, etc. With the epidemic becoming increasingly serious around the globe, China has offered aid to other countries, such as Japan, South Korea, and Iran.

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China and the EU² are important partners for one another, which is evidenced with the large volume of trade and investment, and frequent people-to-people visits. Today, China and the EU are each other's major trade partners. China is the EU's second largest trade partner, while the EU has remained China's top trade partner for 15 consecutive years, hitting \$680 billion in 2018. Moreover, the two partners witness 8 million visits each year, with a weekly 600 flights linking the two places³. With a huge volume of resources—politically and economically—at disposal, China and the EU are also critical solution providers to a number of global challenges, such as global warming, poverty elimination, as well as public health.

The EU has offered in-time and generous assistance to China to combat the outbreak, and they have maintained close contact on dealing with the crisis, which mirrors the sound friendship and partnership between the two actors. The article examines the health cooperation between China and the EU, as well as selected European countries, including Germany, France, United Kingdom (UK) and Italy, and analyzes the potential impact of COVID-19 to the China-Europe health cooperation.

2 “EU” in this article means “EU institutions and member states”, while European Commission (EC) is applied when “EU” is taken as an independent actor. The United Kingdom withdrew from the EU membership on 31 Jan. 2020, but for simplicity, it is included in the “EU” in the article.

3 Chen Weihua, “China, EU seek to deepen partnership,” *China Daily*, 26 Sep. 2019, <http://www.chinadaily.com.cn/a/201909/26/WS5d8c2428a310cf3e3556d993.html>.



President Xi Jinping checks the treatment of hospitalized patients at the monitoring center and talks to medical staff on duty via a video link at Beijing Ditan Hospital in Beijing, on Feb. 10, 2020. (Xinhua/Ju Peng)

1. Health in China-Europe Relations

1.1 Health in China-EC Relations

In the early years of China-EC relations since they established bilateral diplomatic relationship in 1975, economy and trade remained the foremost concern for the two sides, while health matters were marginalized. The EC and China signed the “Agreement on Trade and Economic Cooperation” in 1985 to guide their relationship. In this document, which has been regulating EC-China commercial and economic relations for decades, health was not even mentioned. The EC released its first policy paper on China in 1995 — “A Long-term Policy for China-Europe Relations”. The EC recognized the potential impact of China’s growth to the globe, and the importance of cooperating with China on health matters in the paper. Although no specific measures were named, it should be been a signal that health has raised the attention of European policymakers.

The two sides witnessed the establishment of the annual summit institution in 1998. With the help of the institution, Chinese and European leaders are able to discuss the issues that concern them most and figure out the direction for future cooperation. Health went missing in their first five summits, and was only listed as an interested sector for future dialogue in their 2003 meeting. The case is also true for the EC's second policy paper on China published in 2001, where no emphasis was given to health cooperation.

The severe acute respiratory syndrome (SARS) broke out and deteriorated in the first half of 2003. The epidemic spread to 30 countries and regions, led to over 900 deaths at last. Although Europe was not heavily influenced by the epidemic, it alerted European leaders with the miserable consequences of such an infectious disease. The SARS served as a watershed of China-EC health cooperation. In December 2004, the seventh annual summit was held in London. At the summit, health was attached unprecedented importance by the leaders. In the joint statement released after the meeting, the two partners recognized the importance of increased cooperation to combat HIV/AIDS as well as other newly emerging infectious diseases, in face of the truly global nature of the epidemic. Since then, health has been included as a regular topic of the summit, although remains marginal.

During the visit of the then EC Commissioner for Health Ms. Androulla Vassiliou to Beijing in 2009, she met Mr. CHEN Zhu, Chinese minister of health, and the two sides agreed to launch a dialogue on health policy. The dialogue mechanism aims to strengthen the public health security in the two partners as well as the capability to safeguard the health of humankind. Five areas were prioritized, including: major infectious diseases and other health threats, noninfectious diseases, preventive medicine, food safety and international health. At the 16th annual summit held in 2013, China and the EC jointly adopted the "EU-China 2020 Strategic Agenda for Cooperation", which charted the roadmap for their cooperation in the seven years. In the agenda, the two sides decided to "expand dialogue and exchange in the field of health, including through cooperation with the WHO, especially the cooperation in antimicrobial resistance, e-health, prevention of cancer and regulatory dialogue on pharmaceuticals, with a view to ensuring the health and safety of citizens."⁴

Although in the early years of China-EC relations, health was not acknowledged as a key matter, it has now been put on the agenda, and a dialogue mechanism has been created for idea exchanges. In the process, the 2003 SARS outbreak played a key role, which reminded China

4 "EU-China 2020 Strategic Agenda for Cooperation," http://eeas.europa.eu/archives/docs/china/docs/eu-china_2020_strategic_agenda_en.pdf.

and Europe that the whole world was under the threat of epidemics, and they could only be contained with mutual trust and international cooperation.

1.2 Health in China's relations with Germany, France, United Kingdom and Italy

1.2.1 Germany

There is a long history of China-Germany health cooperation. It was in 1980 that the two sides reached an agreement on health cooperation, which laid the foundation for their cooperation in the health sector. The German-Chinese Society of Medicine was launched in Germany in 1984, and not long later, a similar institution: Chinese-German Society of Medicine was established in Wuhan, China. These two institutions serve as bridges between Chinese and German scientists, physicians and students. It has organized a number of seminars, workshops and conferences, so to help oil the German-Chinese health cooperation. As of 2019, 33 annual conferences have been organized which are regarded as big events for Chinese and German medical practitioners.

The two sides reached a number of agreements to guide their cooperation in the health sector. For example, the two partners signed a framework agreement on medical economy and biotechnology in 2006; released a joint statement on public health emergency and disaster medicine cooperation in 2012. In addition, they have established a biennial health dialogue mechanism. The third dialogue took place in 2018 in Berlin, attended by the Director-general of China's National Health Commission, and German minister of health, as an activity in parallel with Chinese Premier's visit to Berlin. Taking this opportunity, a new framework convention for China-Germany health cooperation (2018-2020) was signed, which focuses on the challenges of aging population to their healthcare systems.

1.2.2 France

The agreement on health and medical science cooperation was reached by China and France in 1997. According to the agreement, the two sides decided to cooperate with each other in such areas as public health, emergency medicine, and prevention and control of infectious diseases, by fostering people-to-people exchange. In addition, they agreed to establish a working group to meet annually for discussing and formulating action plans and evaluating the implementation of the agreement.

As of now, a number of health cooperation agreements have been reached by China and France. For example, the two sides released two joint statements on cooperating to deal with aging population and gerontological nursing in 2017. In addition, the two sides have organized a number of forums, symposiums, and seminars to foster dialogue and exchange on health

matters. For example, the China-France Forum on Health Cooperation was held in Beijing in 2014; a symposium on health strategy cooperation was convened in Paris in 2014; and a symposium of the prevention and control of Ebola and newly emerging infectious diseases was organized in Wuhan, China in 2015.

Institutions are also established to facilitate health cooperation between China and France. The two actors established the High-Level People to People Dialogue mechanism in 2014, in which health cooperation is seen as a priority. They launched the China-France Symposium on Family Development Policy in 2012, which focuses on the dialogue and exchange on such issues as family development, aging population, and childcare. Five such meetings had been organized by 2017. The third China-France Hospital Conference was convened in Beijing in 2017, where the “China-France Hospital Cooperation Alliance” initiative was introduced.

1.2.3 United Kingdom

China and the UK signed a memorandum of understanding (MOU) on health cooperation in 2007, which has been guiding their cooperation since then. The MOU was renewed in 2010, 2013 and 2016.

Today, three health-related dialogue mechanisms have been established by China and UK: China-UK High-Level People to People Dialogue, China-UK Health Policy Dialogue, and China-UK Global Health Dialogue. The China-UK High-Level People to People Dialogue was first launched in 2012, and has been organized five times by now. The mechanism is regarded as one of the three pillar dialogue mechanisms in China-UK relations, together with Strategic Dialogue, and the Economic and Financial Dialogue. Health was not included in the mechanism until its second meeting held in 2014. Today, it serves as the highest-level institution for China-UK health cooperation. The fifth meeting was held in December 2017 in London, co-chaired by the then UK Secretary of State for Health and Chinese Vice-Premier. The two sides reviewed their cooperation and committed to push it forward at the meeting.

The two partners launched an annual dialogue on health policy in 2015. The dialogue rotates between China and the UK and attended by Director-general of China’s National Health Commission, and the UK Secretary of State for Health and Social Care. The fourth meeting was organized in September 2018 in Beijing. China and the UK launched the Global Health Support Programme in 2013. As one of the projects of the programme, the China-UK Global Health Dialogue was created in 2013, and has been alternatively held in China and the UK annually. The fifth China-UK Global Health Dialogue was convened in London in January 2019. The

partners discussed such issues as WHO reform, epidemic prevention and control, and health cooperation in Africa at the meeting.

1.2.4 Italy

Italy and China reached an agreement to establish an emergency center in Beijing and a radiation medical center in Tianjin in 1983. It marks the inauguration of their health cooperation. Later in 1986, Italy helped set up a first-aid facility in Beijing 301 Hospital, and build a medical center in Taiyuan in 1988.

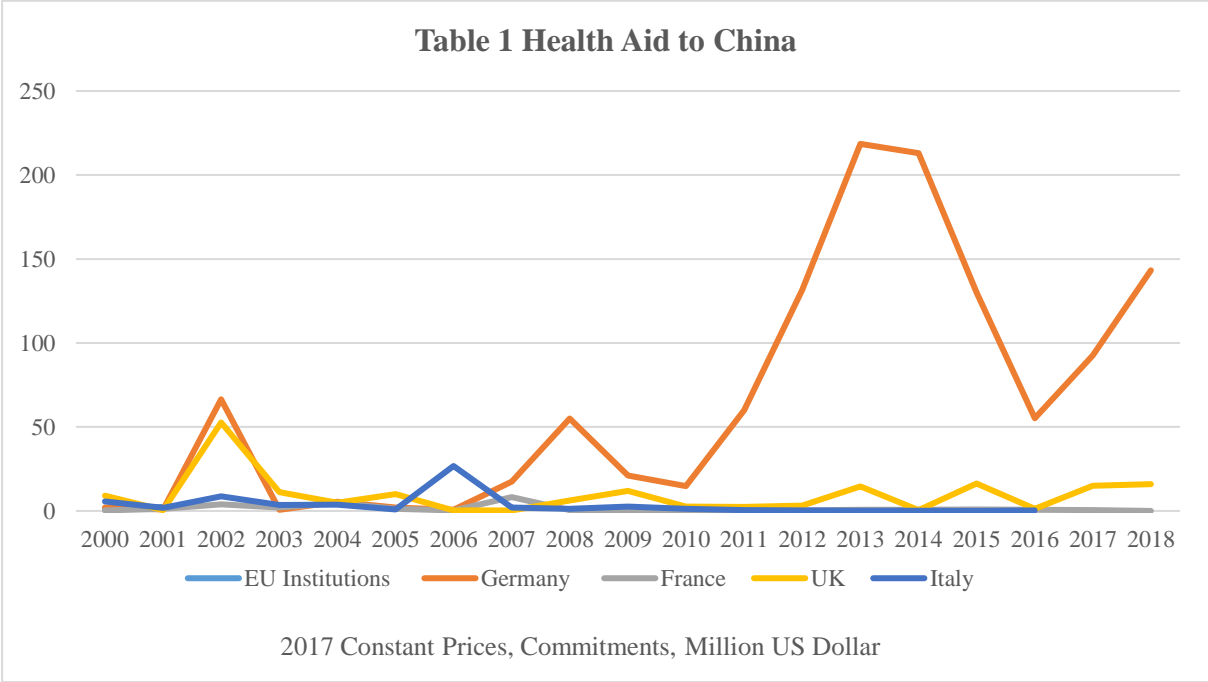
Despite these activities, it was not until 2000 when China and Italy signed their MOU on health cooperation in 2000. Based on the MOU, three rounds of health cooperation action plans were reached and implemented in respective 2004, 2011 and 2016. Under the guidance of the MOU and action plans, the two countries carried out fruitful cooperation in multiple health areas, such as health system, human resources on healthcare, medical science research, clinical technology innovation, public health, and food safety. Health today has been identified as a key sector for cooperation between China and Italy. Using the opportunity of attending the second “Belt and Road” Forum for International Cooperation held in Beijing in 2017, Chinese and Italian leaders signed the action plan for strengthening cooperation (2017-2020). Health is recognized as one of the seven priorities in the plan, together with, for example, agriculture, sustainable urbanization, environment and sustainable energy. Using the opportunity of Chinese President Xi Jinping’s visit to Rome in 2019, the health leaders reached a new action plan on health cooperation which is envisaged to guide their cooperation in three years from 2019 to 2021. The two partners further reached an agreement in late 2019, decided to list cancer prevention, cardiovascular diseases, basic health care, prevention and control of infectious diseases, e-medicine, and health personnel training as priority areas for cooperation. In addition, the two partners strengthened their cooperation on cancer research by signing a MOU in 2018.

In addition to the above mentioned four countries, health cooperation took place between China and some other European countries as well. For example, China signed health cooperation agreement with Austria in 1989, and three rounds of health cooperation action plans have been implemented since then. China and Sweden signed a MOU on health cooperation in 2006, and they have implemented three rounds of health cooperation action plans. An agreement was reached between China and Norway in 2002 to boost their cooperation in the health sector. The Norwegian side pledged to donate 12 million NOK to China’s health projects in three years, and half of the donation was allocated to the prevention and control of

HIV/AIDS. The two sides signed health cooperation plan (2017-2020), during the official visit of Norwegian Prime Minister Erna Solberg to Beijing in 2017.

2. A Health Partnership in the Making

When China decided to open its door in 1979, it found itself in urgent need of international funds and technology to help improve its health capabilities and system. Like most of other sectors, China has been an aid recipient in its health relationship with the EC, Germany, France, UK and Italy. Therefore, the China-Europe health relationship has been featured with the “donor-recipient” paradigm, in which the EU have been assisting China. Overall, health is not a principle sector for the EC, France, UK and Italy to aid China, while Germany is an exception. The German health aid to China boomed after 2010 and peaked in 2013 with a record of \$218 million. Although declined dramatically afterwards, it rebounded to over \$143 million in 2018, which occupied around one quarter of Germany’s total aid to China. In comparison, the health aid from other actors are very small. The aid budget invested by France and Italy to China’s health sector has been long below \$1 million. Although the health finance from the UK is larger, it was around \$16 million only, remarkably smaller than that of Germany (Table 1).



Source: OECD Creditor Reporting System.

With the aid funds, technology and experience from Europe, a number health projects were carried out in China. For example, China and the UK launched the China-UK HIV/AIDS Prevention and Care Project in 2000. The project covered 83 counties/districts in 37

prefectures/cities of Yunnan and Sichuan provinces. It was funded by the UK with around £20 million, as well as know-how. The project was concluded in December 2007, and brought about benefits to the target population of around 130 thousand. Moreover, the project assisted in awakening the awareness on HIV/AIDS among the Chinese public, and fostering China's policymaking on HIV/AIDS.

After the 2003 SARS outbreak, the Chinese and French governments signed a cooperation agreement to improve China's capabilities in the prevention and control of emerging infectious diseases in 2004, and launched the China-France Emerging Infectious Diseases Cooperation Project. The project is the most important strategic cooperation project in the field of medical science and technology since the establishment of diplomatic relations between China and France. Within the framework of the project, China and France established the Institute of Pasteur of Shanghai, which was put into operation in 2005. The two partners also joined hands to build a high-level biosafety laboratory in China. The laboratory was funded by the Chinese government and France provided key technology, personnel training and laboratory management support. The construction broke ground in Wuhan in June 2011, and was completed in January 2015. It is China's first and by now the only P4 biosafety laboratory.

Italy has been focusing its aid to China on the emergency medical service sector, since offering help to build an emergency medical center in Beijing in 1983. In the past decades, Italy has been endeavoring to help improve emergency medical service capacity in a number of Chinese cities, such as Chongqing, Lhasa, Taiyuan, and Guiyang, by providing training and technical support. In addition, Italian government committed around €3 million in 2003, to improve the maternal and child healthcare in China's Inner Mongolia Autonomous Region.

As a result of China's economic boom, it has been increasingly seen as a potential contributor of tackling global challenges, rather than a sheer aid recipient in the 2000s. As an emerging economy that made remarkable economic achievements, China's technology, experience in alleviating poverty, protecting environment, and improving public health, etc. have been regarded more suitable for other developing countries. Against backdrop, some donors, including the EC and UK, announced their termination of aid to China, and started to seek a more balanced and equal partnership with China. For example, although China has been taken as an aid recipient by the EC, a change was recorded in the EC's fifth policy paper on China released in 2006. In the document which entitled "EU-China: Closer Partners, Growing Responsibilities", the EC declared that "as China moves further away from the status of a typical recipient of overseas development aid, the EU must calibrate its cooperation programme carefully and keep it under review. Cooperation must be in both sides' interests, reflect the EU's

own principles and values, and serve to underpin the partnership.⁵” This new vision on China as an aid recipient was reinforced in the EC’s second strategy paper on China (2007 – 2013), where the EC recognized China’s dual identity: both a developing country and a significant player on the world stage. The EC published the “Agenda for Change” in 2011, which lays a new foundation for the EC’s aid policy. The differentiation principle was established in the document, which requires the EC to target its resources where they are needed most and where they could have greatest impact. In parallel with the adoption of the “Agenda for Change”, the EC raised the proposal for the multiannual financial framework (2014 – 2020). In the proposal, the EC excluded China along with other 18 countries from its aid recipient list. Today, for the EC, “China has moved from being a traditional recipient of overseas development assistance to the position of a strategic partner with whom the EU engages on a wide range of policy issues.⁶”

The case also applies to the UK. The UK announced the termination of its traditional bilateral aid programmes with China in March 2011, and soon signed a MOU with China in June 2011, announced the establishment of their partnership on development cooperation. They agreed to work together to deal with global development issues, and identified health as a proper area for cooperation in the MOU. Under the new development partnership, China and the UK launched the Global Health Support Programme in 2012. The programme aims to use China’s best practices in, for example, infant, child and maternal mortality rate reduction, disease prevention and control, and health sector reform, to help the low-income countries. The UK invested £12 million to the programme, while China contributed health expertise and facilities. The programme was concluded in late 2018. Under the programme, the aforementioned China-UK Global Health Dialogue was created, which helped foster their communication and exchange in the sector. Moreover, the two partners worked together with third countries under the programme. For example, they collaborated to help control malaria in Tanzania, to help improve reproductive, maternal and child health in Ethiopia and Burma, and worked together on post Ebola recovery in Sierra Leone.

The Italian aid to China was cut in the 2000s: while China was Italy’s fifth largest aid recipient in terms of 2005-2011 average, it fell out of the top 20 recipients in 2011. Germany and France are exceptions in this case. For Germany, China has always been a major recipient

5“EU-China: Closer partners, growing responsibilities,” <http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:52006DC0631&from=EN>.

6 European External Action Service, “Projects in China,” 11 May, 2016, https://eeas.europa.eu/delegations/china/15407/projects-china_en.

of its aid budget. China was the No.1 recipient of German aid in 2014, and it remained as Germany's third largest aid recipient in 2017 with \$710 million. For the case of French aid to China, China was the third largest recipient in terms of 2010-2011 average, and still ranked at tenth on the list with a record of \$191 million in 2017.

Today, the China-Europe health relationship, which was long shaped by the “donor-recipient” paradigm is transferring to an equal partnership. This does not necessarily suggest that the European health aid to China has been terminated completely, although it has been in small volume. For example, although traditional development assistance has been ended, the UK funded 12 health projects across China in 2016, with a total spending of around £1 million⁷. However, their vision of health cooperation has been moving beyond the bilateral level and is becoming increasingly global. They have piloted in collaborating to deal with health issues in other needed developing countries, which demonstrate the increasingly vital role of China-EU health partnership for global health governance.

3. The Prospect of China-Europe Health Partnership

China has established sound relationship with the EU and its major member states in the field of health. The two sides have formulated cooperation plans, established dialogue mechanisms and launched a number of cooperation projects. At present, China-EU health cooperation is transitioning from aid-recipient pattern to equal partnership, and their focus has gone beyond their respective border and become global.

Since the outbreak of COVID-19, China and the EU have maintained close contact. Chinese President Xi Jinping contacted French President Macron and German Chancellor Merkel via phone call on the epidemic, and Chinese Premier Li Keqiang contacted Ursula von der Leyen, the newly elected President of the European Commission. In Xi's phone conversation with Macron, the two presidents expressed their strong willingness to work together to fight against COVID-19, and agreed to strengthen their health cooperation for the sake of regional and global public health security⁸. The Chinese and European experts also maintained close contact on the evolution of the epidemic. Two video meetings have been

7 British Department of Health, British Embassy (Beijing), National Health and Family Planning Commission of China, “UK-China health dialogue,” Dec. 2016.

8 “Xi says China willing to strengthen health cooperation with France,” *Xinhua*, 19 Feb. 2020, http://www.xinhuanet.com/english/2020-02/19/c_138796396.htm.

organized by now, attended by officials and experts from National Health Commission of China, the Chinese Center for Disease Control and Prevention, the EC's Directorate-General for Health and Food Safety and the European Center for Disease Prevention and Control. In addition, China has received official medical aid from the EC and a number of European countries, such as UK, France, as well as enterprises, civil society organizations, and private foundations.



German Chancellor Angela Merkel (R) meets with visiting Chinese State Councilor and Foreign Minister Wang Yi in Berlin, Germany, Feb. 13, 2020. (Xinhua/Wang Qing) The COVID-19 was discussed at their meeting.

At present, thanks to China's robust measures and the generous assistance of the international community, the number of newly confirmed cases and deaths every day has declined rapidly. China's mainland reported 573 newly confirmed cases, including 565 cases in Wuhan alone, and 35 deaths across the country, including 26 deaths in Wuhan in 29 Feb. 2020. In comparison, the number of reported newly confirmed cases and deaths was 2048 and 105 respectively two weeks ago in 16 Feb. 2020. It indicates that China's battle against the virus has generated favorable outcomes. But at the same time, the virus is spreading fast outside China, including Europe. Reportedly, as of 1 March, 1,520 cases and 31 deaths have been reported in Europe, including Italy (1,128 cases, 29 deaths), Germany (111 cases), and France (100 cases, 2 deaths).



*A staff member sanitizes the facilities on a train at the Garibaldi train station in Milan, Italy, Feb. 28, 2020.
(Photo by Alberto Lingria/Xinhua)*

In face of the epidemic, China and the EU should continue to maintain dialogue and exchanges, share data and information in a timely manner, and continue to help each other. At present, China's epidemic control efforts seem to have made some achievements and accumulated experience. The epidemic is now spreading rapidly in Europe, and the EU can learn from China's practices on controlling the epidemic. In addition, China can also provide aid to the EU and European countries when necessary. In the long run, it is expected that China-EU cooperation in the field of health will be significantly strengthened. The epidemic reminds both parties again that such an outbreak may lead to serious life and economic losses. For the EU, strengthening cooperation with China, a big country with a population of 1.4 billion, which is highly integrated into the global system, is crucial. To a certain extent, helping China prevent and control infectious diseases is helping Europe itself. The EU needs to be more actively engaged with China's health sector, and one of the fields that deserves special attention is health system reform. The outbreak shows that China still faces the severe challenges of epidemic, and loopholes exist in China health system. Chinese leaders take the safety and health of the people as the No.1 priority, and vowed to conduct fundamental reform to build a law-based

epidemic prevention and control, and national public health emergency management system⁹. In this case, the European know-how could be of help for China.



Photo taken on Feb. 17, 2020 with a tilt-shift lens shows a temporary hospital converted from Wuhan Sports Center in Wuhan, Hubei Province. (Xinhua/Xiao Yijiu)

In the past several years, China proposed the “Belt and Road” initiative and the concept of building “a community of shared destiny for mankind”, which demonstrate China’s willingness of playing a more proactive role in dealing with global challenges. The epidemic made the significance of the “community of shared destiny for mankind” even more prominent. In a world so closely connected, the spread of the epidemic can only be contained through multilateral approaches and full cooperation. It is necessary for China and the EU to continue to firmly defend multilateralism, oppose unilateralism, and jointly contribute to safeguarding global public health and safety. As the terminal of the “Belt and Road”, Europe is an important participant in the initiative. China has put forward the idea of building a health “Belt and Road” initiative, to cope with global health challenges such as epidemics. China and the EU can further

⁹ “Xi Focus: Xi’s article on improving epidemic prevention and control to be published,” *Xinhua*, 29 Feb. 2020, http://www.xinhuanet.com/english/2020-02/29/c_138830585.htm.

strengthen cooperation in this area by employing the “Belt and Road” as a platform, so to jointly contribute to the construction of “a community of shared destiny for mankind”.