



United States Department of State

Washington, D.C. 20520

January 23, 2023

Case No. FL-2022-00076

Mr. Sainath Suryanarayanan, PhD
U.S. Right to Know
4096 Piedmont Ave. #963
Oakland, CA 94611

Dear Mr. Suryanarayanan:

As noted in our letter dated December 9, 2022, we are processing your request under the Freedom of Information Act (“FOIA”), 5 U.S.C. § 552. Thus far, the Department of State has located 29 responsive records subject to the FOIA. Upon review, we have determined 7 records may be released in part and 22 records must be withheld in their entirety.

An enclosure explains the FOIA exemptions and other grounds for withholding material. Where we have made redactions, the applicable FOIA exemptions are marked on each record. The records that were withheld in full are exempt from release pursuant to FOIA Exemptions 1 and 5, 5 U.S.C. § 552 (b)(1) and (b)(5). All non-exempt material that is reasonably segregable from the exempt material has been released and is enclosed.

We will keep you informed as your case progresses. If you have any questions, your attorney may contact Savith Iyengar, Assistant U.S. Attorney, at savith.iyengar@usdoj.gov. Please refer to the case number, FL-2022-00076, and the civil action number, 22-cv-04359, in all correspondence about this case.

Sincerely,

A handwritten signature in black ink, appearing to read 'Diamonece Hickson', written in a cursive style.

Diamonece Hickson
Chief, Litigation and Appeals Branch
Office of Information Programs and Services

Enclosures: As stated.

The Freedom of Information Act (5 USC 552)

FOIA Exemptions

- (b)(1) Information specifically authorized by an executive order to be kept secret in the interest of national defense or foreign policy. Executive Order 13526 includes the following classification categories:
- 1.4(a) Military plans, systems, or operations
 - 1.4(b) Foreign government information
 - 1.4(c) Intelligence activities, sources or methods, or cryptology
 - 1.4(d) Foreign relations or foreign activities of the US, including confidential sources
 - 1.4(e) Scientific, technological, or economic matters relating to national security, including defense against transnational terrorism
 - 1.4(f) U.S. Government programs for safeguarding nuclear materials or facilities
 - 1.4(g) Vulnerabilities or capabilities of systems, installations, infrastructures, projects, plans, or protection services relating to US national security, including defense against transnational terrorism
 - 1.4(h) Weapons of mass destruction
- (b)(2) Related solely to the internal personnel rules and practices of an agency
- (b)(3) Specifically exempted from disclosure by statute (other than 5 USC 552), for example:
- | | |
|----------------|---|
| ARMSEXP | Arms Export Control Act, 50a USC 2411(c) |
| CIA PERS/ORG | Central Intelligence Agency Act of 1949, 50 USC 403(g) |
| EXPORT CONTROL | Export Administration Act of 1979, 50 USC App. Sec. 2411(c) |
| FS ACT | Foreign Service Act of 1980, 22 USC 4004 |
| INA | Immigration and Nationality Act, 8 USC 1202(f), Sec. 222(f) |
| IRAN | Iran Claims Settlement Act, Public Law 99-99, Sec. 505 |
- (b)(4) Trade secrets and confidential commercial or financial information
- (b)(5) Interagency or intra-agency communications forming part of the deliberative process, attorney-client privilege, or attorney work product
- (b)(6) Personal privacy information
- (b)(7) Law enforcement information whose disclosure would:
- (A) interfere with enforcement proceedings
 - (B) deprive a person of a fair trial
 - (C) constitute an unwarranted invasion of personal privacy
 - (D) disclose confidential sources
 - (E) disclose investigation techniques
 - (F) endanger life or physical safety of an individual
- (b)(8) Prepared by or for a government agency regulating or supervising financial institutions
- (b)(9) Geological and geophysical information and data, including maps, concerning wells

Other Grounds for Withholding

- NR Material not responsive to a FOIA request excised with the agreement of the requester

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(5)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1); (b)(6)

Withheld pursuant to exemption

(b)(1); (b)(6)

From:	(b)(6)@state.gov>
To:	(b)(6)@state.gov>; Feith, David (b)(6)@state.gov>; Gibbs, Jeffrey J (b)(6)@state.gov>; (b)(6)@state.gov>
CC:	(b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>
Subject:	WHO Global Study of the Origins of SARS-CoV-2 : " Terms of References for the China Part"
Date:	Sun, 20 Dec 2020 23:54:58 +0000

Attached: Full text of the tortuously titled, "WHO-convened Global Study of the Origins of SARS-CoV-2: Terms of References for the China Part" [https://www.who.int/docs/default-source/coronaviruse/20200802-tors-chn-and-who-agreed-final-version.pdf?sfvrsn=5323728d_2&download=true]

Of note:

PRC calls the shots: "The final composition of the international team should be agreed by both China and WHO."

The terms of reference seem to go out of their way to not mention the possibility of another lab outbreak while at the same time ironically pointing out:

Current findings show that the virus has been remarkable stable since it was first reported in Wuhan, with sequences well conserved in different countries, suggesting that the virus was well adapted to human transmission from the moment it was first detected. This is also corroborated by the epidemiology and transmission patterns seen since the start of the COVID-19 pandemic.

Two of the genetically closest known coronaviruses, RaTG13 and RmYN02, were discovered in bat populations in Yunnan province of China (Zhou et al. 2020). RaTG13, which was identified in 2013 shares 96.2% sequence homology with SARS-CoV-2 (Zhou et al. 2020, Li W. et al 2005) while RmYN02, has 93.3 % homology. However, with a genome size of about 30,000, the genetic distance between the genetically closest virus, RaTG13, still corresponds to a difference of nearly 1,200 nucleotides, remaining a distant ancestor of SARS-CoV-2

The ToR's statement, "The approach will be open-minded, iterative, not excluding any hypothesis that could contribute to evidence generation and help narrow the focus of research" ring particularly hollow given the choice of the very conflicted and avowedly close-minded Peter Daszak to be on the small team of investigators, to wit:

Democracy Now interview of Peter Daszak 4/16/20:

"...the idea that this virus escaped from a lab is just pure baloney. It's simply not true. I've been working with that lab for 15 years. And the samples collected were collected by me and others in collaboration with our Chinese colleagues. They're some of the best scientists in the world. There was no viral isolate in the lab. There was no cultured virus that's anything related to SARS coronavirus 2. So it's just not possible... These are biosecure labs with very high-tech, sophisticated security systems. Even if you showed all the notebooks, the conspiracy folks would continue to say, "Well, it's a cover-up. Clearly

something happened, and these are doctored notebooks, doctored videotapes. The point is that, let's look at a balance of probability. That's what you have to do. We have a few hundred technicians and scientists working in these labs. They do not have a problem with staff or with security or with loose controls. These are very well-run labs. They've been inspected by the U.S. CDC, by people working in BSL-4 labs, high-security labs, in the U.S., in France and internationally. They're accredited by the U.S. So, it's ironic that now we're saying they're not very well organized. We actually inspected them properly and allowed them to open." [https://www.democracynow.org/2020/4/16/peter_daszak_coronavirus]

Daszak's "The Lancet" correspondence 2/19/20

"The rapid, open, and transparent sharing of data on this outbreak is now being threatened by rumours and misinformation around its origins. We stand together to strongly condemn conspiracy theories suggesting that COVID-19 does not have a natural origin."

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(20\)30418-9/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30418-9/fulltext)]

And as the "Organic Consumers Association" points out in their article, "Scientists Outraged by Peter Daszak Leading Enquiry Into Possible Covid Lab Leak" 9/23/20:

There is also the issue of conflicts of interest. Although Daszak declared in The Lancet that he has "no competing interests" on Covid-19, and likewise told the Washington Post he has "no conflicts of interest", Alina Chan, a molecular biologist at the Broad Institute, points out that he is a "long-time friend, collaborator and funder of the Shi lab" – the Wuhan Institute of Virology (WIV) lab led by Shi Zhengli that is most often identified as the probable source of any lab leak.

In fact, Daszak's EcoHealth Alliance has helped finance both the WIV's bat coronavirus surveillance and its bat coronavirus gain-of-function research (research aimed at making a virus more infective), with the help of multi-million dollar grants from the US government. This, of course, means Daszak's own activities are material to the subject he is investigating: the origins of a bat-derived coronavirus pandemic that broke out in the very city to which he helped lab workers bring bat coronaviruses for storage, analysis and experimentation.

As Richard Ebright has noted, "For persons who were directly involved in funding, promoting, and/or performing bat coronavirus research and bat coronavirus gain-of-function research at WIV, avoiding a possible finding of culpability for triggering a pandemic is a powerful motivator." And Daszak would be at the very top of the list of those involved in funding, promoting and collaborating in that research.

More broadly, as Ebright also notes, Daszak's EcoHealth Alliance has received over \$100 million in funding from US government agencies for a variety of virus surveillance and virus gain of function work – the kind of work that could be brought into serious question if Daszak found any evidence it contributed to causing the pandemic.

How did The Lancet manage to overlook such an enormous conflict of interest, Ebright wonders, while Dr Filippa Lentzos, an expert on biological threats at King's College London, tweeted, "Goodness. I can't imagine a lead investigator with more vested interests!"

Sender:	(b)(6)@state.gov>
Recipient:	(b)(6)@state.gov>; Feith, David (b)(6)@state.gov>; Gibbs, Jeffrey J (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>

From: (b)(6)@state.gov>
To: (b)(6)@state.gov>
CC: (b)(6)@state.gov>; Feith, David (b)(6)@state.gov>; (b)(6)@state.gov>
Subject: USG and COVID research (worth reading)—recommend proceed undeterred on article V
Date: Sun, 25 Oct 2020 01:51:51 +0000

Please read.

(b)(5)

(b)(6)

From:	"Feith, David"
To:	(b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>
CC:	Buangan, Richard L (b)(6)@state.gov>; Stilwell, David R (b)(6)@state.gov>; Atul Keshap (b)(6)@state.gov (b)(6)@state.gov>; (b)(6)@state.gov>
Subject:	Urgent clearance: COVID declass
Date:	Wed, 13 Jan 2021 20:48:02 +0000

Colleagues –

Seeking urgent D, P, and T clearance on the attached S statement and fact sheet. You’ve seen versions before, but we wanted to re-send the latest.

We’d be grateful for clearance by 4:45pm if at all possible.

Thanks much.

--
David Feith
Deputy Assistant Secretary
Bureau of East Asian and Pacific Affairs (EAP)
U.S. Department of State

(b)(6)
(b)(6)@state.gov

~~SENSITIVE BUT UNCLASSIFIED~~

Sender:	"Feith, David"
Recipient:	(b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; Buangan, Richard L (b)(6)@state.gov>; Stilwell, David R (b)(6)@state.gov>; Atul Keshap (b)(6)@state.gov (b)(6)@state.gov>; (b)(6)@state.gov>

Withheld pursuant to exemption

(b)(5)

Withheld pursuant to exemption

(b)(5)

From:	(b)(6)@state.gov>
To:	ISN-BPS-DL <ISN-BPS-DL@STATE.GOV>
Subject:	FW: Mission China COVID-19 Update February 20
Date:	Thu, 20 Feb 2020 19:14:56 +0000

In addition to the Chinese changing their counting metrics (again), this stood out:

24. (U) Zhong Nanshan, the Guangzhou Institute of Respiratory Health, and Shenzhen-based Evergrande property developer has joined forces with Harvard Medical School (HMS) to establish the "Sino-U.S. New Coronavirus Scientific Research Expert Group," according to press reporting. The group held its second video conference February 19 to exchange and discuss cooperation on rapid detection and diagnosis, clinical treatment, drug screening, and vaccine development, according to separate reporting. HMS participants included George Q. Daley, MD, PhD, Dean; David Golan, MD, PhD, Dean for Research Operations and Global Programs; Arlene Sharpe, MD, PhD, Director of the Department of Immunology (HMS) and Co-Director of the Evergrande Center for Immunologic Diseases at Harvard Medical School and Brigham and Women's Hospital; Bruce Walker, Director of the Ragon Institute of Mass General, MIT, and Harvard. Evergrande committed 800 million RMB (118 million USD) over five years to support the research. Over the long-term, the group will focus on virus traceability, infection and pathogenic mechanisms, rapid immunological detection methods, scientific research cooperation in ten major fields including genomic mutation and evolution.

~~SENSITIVE BUT UNCLASSIFIED~~

From: SMART Core <svcsmartbtsewssprec2@state.gov>
Sent: Thursday, February 20, 2020 6:14 AM
Cc: (b)(6)@state.gov>(b)(6)@state.gov>; Park, Christopher J (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>
Subject: Mission China COVID-19 Update February 20

UNCLASSIFIED

~~SBU~~



Info Office: BIO_STAFF

MRN: 20 BEIJING 340
Date/DTG: Feb 20, 2020 / 201107Z FEB 20
From: AMEMBASSY BEIJING
Action: WASHDC, SECSTATE ROUTINE

E.O.: 13526
TAGS: SHLH, PGOV, PREL, CASC, AMGT, AMED, ASEC, ELAB, ECON, EINT, KPAO, KHIV, KFLU, KFLO, KFPC, KGHI, KHLS, KSCA, CDC, HHS, NIH, OSHA, AID, CN
Captions: SENSITIVE
Reference: A) 20 BEIJING 308, 296, 292, 282, 276, 264, 248, 234, 226, 222, 218, 216, 214, 206, 204, 202, 200, 198, 188, 186, 174, 172, 166, 164, 142, 122, 108, 74
B) 20 BEIJING 260
C) 20 BEIJING 250
D) 20 BEIJING 256
E) 20 BEIJING 254
F) 19 WUHAN 112
G) 20 BEIJING 272
Subject: Mission China COVID-19 Update February 20

1. ~~(SBU)~~ **Summary and comment:** China's National Health Commission (NHC) released new case definition guidelines, reverting the confirmed case definition for Hubei province to no longer include "clinically diagnosed" cases in its confirmed case count and will only include lab-confirmed cases, consistent with other provinces. As a result, all provinces in China will now use a "lab-confirmed" case definition for reporting purposes. The change, which resulted in a decline in officially reported national cases, was made without explanation in the official documents. The NHC reported 394 new cases on February 19, bringing the total number of officially reported cases to 74,576. The number of newly reported cases on February 19 dropped to 394, or 1,490 fewer than the average for the previous three days, due to the change. President Xi Jinping said in public remarks that there exists a greater need to protect and care for medical workers to ensure they stay healthy and are not infected with COVID-19. Contacts at several ministries informed the Embassy that national government offices had reopened and were operating under rotating shifts.

2. ~~(SBU)~~ **Summary and comment, cont.:** Businesses throughout China continue to reopen, though many face labor shortages, logistics challenges and a lack of personal protective equipment (PPE). More municipal and provincial governments continue relaxing restrictions on intra-city and intra-provincial transport, though strict movement restrictions continue in many cities. A CG Wuhan contact reported the arrival of military guards at residential communities in Wuhan has resulted in stricter quarantine enforcement. A number of government officials outside of Hubei have cautioned against overzealous implementation of epidemic response measures. China's *Global Times* reported that the PRC government has donated COVID-19 nucleic acid testing kits to Japan. The Peoples' Bank of China (PBOC) listed the control of the epidemic as its top priority and asserted, perhaps optimistically, that the impact of the coronavirus on the economy will be limited "as the epidemic has not changed the country's economic fundamentals." PBOC stated it will help companies affected by the epidemic by lowering lending rates, increasing credit support, and providing more loans. Social media users continued to criticize a propaganda video released by authorities in Gansu province showing female health workers crying as their heads are shaved; central government authorities have allowed this criticism of overzealous Gansu officials to continue for two days without obvious censorship of most comments. **End Summary and comment.**

(U) LATEST UPDATES

~~3. (SBU)~~ **New Coronavirus Guidelines Released, Case Definition Changed Again.** The PRC National Health Commission (NHC) and National Administration of Traditional Chinese Medicine February 19 released the *6th Edition of the Diagnosis and Treatment Scheme for Pneumonia from Novel Coronavirus (Trial Version)*. Under the updated guidelines, Hubei province will no longer include “clinically diagnosed” cases in its confirmed case count and will only include lab-confirmed cases, consistent with other provinces (figure 1). The Hubei Provincial Health Commission announced February 13 that it had amended case definitions for COVID-19 to include the new “clinically diagnosed” category which did not require lab-confirmation but did require clinical characteristics and radiographic evidence of pneumonia. As a result, the total number of confirmed cases reported from Hubei province initially increased significantly, with 14,840 new cases (of which 13,332 were clinically diagnosed and 1508 were laboratory confirmed) on February 13. The inclusion of clinically diagnosed cases for Hubei followed the guidelines set forth in the *5th Edition of the Diagnosis and Treatment Scheme for Pneumonia from Novel Coronavirus (Trial Version)* issued February 5. The NHC said at the time that it had changed the case definition for Hubei to allow more patients to receive earlier treatment, as there was a lag in lab-tested confirmation. The NHC did not state in the new *6th Edition* guidelines why they had changed the confirmed case definition for Hubei back to only including lab-confirmed cases. According to Professor Feng Zhanchun, of the School of Medicine and Health Management of Tongji Medical College of Huazhong University of Science and Technology, reasons for the change included considerations such as chest imaging alone not being the standard for diagnosis and limited availability of testing kits and testing capabilities in Hubei province [NOTE: It is unclear if he is speaking in a capacity as someone who had a role in the changing of these guidelines or if this is related to the official reason for the change].

(U) Updated NHC Case Definition Guidelines

	All Provinces
Suspected case	<p>A: Epidemiological history 14 days before the onset</p> <p>A1: travel to or resident in Wuhan or area nearby, or an affected community</p> <p>A2: exposed to infected person who has tested positive</p> <p>A3: exposed to person with fever or other respiratory symptoms and who is from Wuhan or an area nearby, or an affected community</p> <p>A4: cluster</p>
	<p>B- Clinical criteria</p> <p>B1: fever and / or respiratory symptoms</p> <p>B2: radiographic pneumonia</p> <p>B3: Normal or decreased white blood cell count in the early stages of onset; or decreased lymphocyte count</p>

	<p>Suspected case if:</p> <ol style="list-style-type: none"> 1. Meets any one of the epidemiological histories and any two of the clinical criteria <p>OR</p> <ol style="list-style-type: none"> 2. Meets all three clinical criteria
<p>Confirmed case</p>	<p>Suspected case + one of the following test results:</p> <p>Respiratory or blood specimens test</p> <ol style="list-style-type: none"> 1. RT-PCR positive for SARS-CoV-2 2. Viral gene sequencing is highly homologous with known SARS-Cov-2

Data source: *The 6th Edition of the Diagnosis and Treatment Scheme for Pneumonia of New Coronavirus Infection issued by the National Health Commission*

<http://www.nhc.gov.cn/yzygj/s7652m/202002/54e1ad5c2aac45c19eb541799bf637e9.shtml>

<http://www.nhc.gov.cn/yzygj/s7653p/202002/8334a8326dd94d329df351d7da8aefc2.shtml>

4. (U) Decline in Officially Reported Nationwide Cases As Definitions Changed Again: China’s National Health Commission (NHC) reported 394 new cases in Mainland China on February 19 as of 24:00, bringing the total number of officially reported cases to 74,576 ([link](#)). The number of newly reported cases on February 19 dropped by 1,490 compared to the average for the previous three days. **[Note:** The sudden drop appears to reflect yet another change in the definition of confirmed cases, introduced by the NHC on February 19 ([link](#)). Per the newly revised guidelines for diagnosis and treatment (the sixth edition), only cases confirmed in the laboratory through a respiratory or blood sample test will be counted as “confirmed,” thus removing the difference in the definition for confirmed cases between Hubei and other provinces. Hubei Health Commission’s latest case report issued on February 20, after the publication of the new NHC guidelines, does not mention the change, however ([link](#)). **End note.**] Total deaths rose to 2,118, an increase of 114 over the previous day. In addition, 1,277 new suspected cases were reported on February 19, with the total number of currently suspected cases now down to 4,922. The number of close contacts under medical observation declined to 126,363.

Table 1: Total and Active Cases in Mainland China as of End of February 19

Province/City/Region	Active Cases	Total Cases	New Cases	Total Deaths	New Deaths	Total Discharged	Newly Discharged
Anhui	557	987	1	6	--	424	63
Beijing	238	395	2	4	--	153	8
Chongqing	281	560	6	5	--	274	20
Fujian	180	293	--	1	1	112	16
Gansu	24	91	--	2	--	65	3
Guangdong	708	1,332	1	5	--	619	48

<i>Guangxi</i>	156	245	1	2	--	87	11
<i>Guizhou</i>	73	146	--	2	--	71	2
<i>Hainan</i>	80	168	5	4	--	84	5
<i>Hebei</i>	150	307	1	5	1	152	16
<i>Heilongjiang</i>	341	476	6	12	--	123	15
<i>Henan</i>	632	1,265	4	19	--	614	62
<i>Hubei*</i>	49,665	62,031	349	2,029	108	10,337	1,209
<i>Hunan</i>	424	1,010	2	4	--	582	36
<i>Inner Mongolia</i>	64	75	--	--	--	11	2
<i>Jiangsu</i>	306	631	--	--	--	325	29
<i>Jiangxi</i>	501	934	1	1	--	432	70
<i>Jilin</i>	50	91	1	1	--	40	4
<i>Liaoning</i>	62	121	--	1	--	58	3
<i>Ningxia</i>	29	71	--	--	--	42	--
<i>Qinghai</i>	2	18	--	--	--	16	1
<i>Shaanxi</i>	139	245	3	1	1	105	16
<i>Shandong</i>	304	546	3	4	1	238	23
<i>Shanghai</i>	145	333	--	2	1	186	9
<i>Shanxi</i>	63	131	--	--	--	68	7
<i>Sichuan</i>	319	520	6	3	--	198	21
<i>Tianjin</i>	73	130	2	3	--	54	6
<i>Tibet</i>	0	1	--	--	--	1	--
<i>Xinjiang</i>	55	76	--	1	--	20	6
<i>Yunnan</i>	111	172	--	1	1	60	--
<i>Zhejiang</i>	566	1,175	2	--	--	609	65
Total (Provincial Reports)	56,298	74,576	396	2,118	114	16,160	1,776
Total (NHC Reported)	56,303	74,576	394	2,118	114	16,155	1,779

Note: * Per the new NHC diagnosis guidelines (6th edition), clinically diagnosed cases for Hubei are no longer included in the total number of confirmed cases. Only lab-confirmed cases are included for all provinces; "Active cases" are total confirmed cases net of deaths and the number of patients treated and discharged from the hospital. Sources: NHC and provincial health commissions.

Beijing

5. (U) **Xi Calls for Greater Protections for Healthcare Workers:** President Xi Jinping said in public remarks that there exists a greater need to protect and care for medical workers to ensure they stay healthy and are not infected with COVID-19. Xi made the remarks at a recent event to train military medics participating in the COVID-19 prevention and control.

6. (U) **Chinese Academy of Medical Sciences President Warns Coronavirus May Be Here to Stay:**

Chinese Academy of Medical Sciences president Wang Chen February 19 told CCTV in an interview that COVID-19 “may become a long-term disease that coexists with humans, just like flu.”

7. (U) **Government Offices Resume Partial Operation:** Contacts at China’s Ministry of Science and Technology (MOST), Ministry of Commerce (MOFCOM), and Ministry of Ecology and Environment (MEE) told Embassy Beijing that national government offices had reopened and are currently operating under rotating shifts, with only some staff reporting to work each day.

Chengdu

8. (U) **Chongqing** municipal health authorities report that in recent days, **most newly confirmed cases have been asymptomatic carriers** identified through epidemiological studies.

Guangzhou

9. ~~(SBU)~~ Guangdong will make all-out efforts to promote economic stability and development, first by pushing forward the safe resumption of production, Party Secretary Li Xi said during a February 19 party meeting, echoing Governor Ma Xingrui’s February 15 and 16 calls for the same. In this spirit, more Guangdong municipalities announced companies could resume operations without special approval, including Zhongshan, Jiangmen, and several more districts in Shenzhen and Zhuhai. In an early sign that Guangdong cities may be moving to ease monitoring of inter-city travel, Zhongshan announced February 19 it would remove 41 checkpoints on inter-city highways and roads, and Shenzhen announced loosened procedures for frequent travelers. In Guangxi, Jinjing town (Mashan county, Nanning municipality) has closed all inbound and outbound vehicular traffic effective February 18 following a confirmed cluster of nine COVID-19 cases. To date, Post has not noticed easing of residential closed management procedures in South China.

Shanghai

10. ~~(SBU)~~ Active cases of COVID-19 continue to track downward across East China, according to official statistics. Businesses across Shanghai and the region continue to reopen, though many face labor shortages and logistics challenges. Local governments across East China are using chartered trains, buses, and planes to bring back workers from low-risk regions to address the labor shortage. More public transportation routes and roads are resuming operations across the region.

11. (U) In a February 19 briefing for Consuls General organized by the Shanghai FAO, officials provided the following updates:

- (U) **According to the Shanghai Health Commission, Shanghai has not experienced sustained person-to-person transmission.** Shanghai has received permission from the National Health Commission to develop its own treatment protocols, which are not identical with the National Treatment Guidelines but have proven to be equally effective. The demographics of Shanghai’s cases are statistically the same as the national averages.
- (U) **Shanghai Party Secretary Li Qiang has noted it is urgent to verify the reliability of COVID-19 tests** and has instructed officials to strengthen capabilities to detect new infections by linking epidemiology studies with testing and with the efforts of the district, local, and neighborhood units. Checkpoints in the city will focus on identifying people from high-risk areas to ensure they follow the required quarantine protocols. Local and neighborhood units will provide assistance in

sterilizing, ventilating, and cleaning public spaces.

- ~~(SBU)~~ A Shanghai Civil Affairs Office official acknowledged that **some neighborhood committees have taken measures much more stringent than required by official guidelines**, so the Civil Affairs Bureau is reminding them not to go beyond the official guidance. Only foreigners returning to Shanghai who have traveled to high-risk areas are required to self-quarantine. (Note: As reported previously, some neighborhoods are barring all outsiders from entering a residential area, are requiring quarantines for individuals beyond those recommended by the city, are requiring passes for residents to enter or leave, etc. End note.) Officials noted neighborhoods should establish checkpoints at the point of entry; measure the temperature of anyone seeking to enter, optionally registering people seeking to enter or depart; and enforce contactless deliveries of food and goods. Anecdotal information from American citizens and other foreigners who have returned to Shanghai suggests that despite municipal officials directing neighborhood committees to not implement measures stricter than required by the guidelines, many neighborhood committees continue to do so. When FAO has been contacted about these cases, they have continued to advise that while self-quarantine is not required, residents should follow the directions of neighborhood committees.
- (U) A senior official with the Development and Opening Commission said **Beijing has issued instructions to boost the growth of the construction sector and consumption**. As a result, the Commission is actively looking for shovel-ready construction and infrastructure projects that can be commenced as soon as possible after the crisis.

12. (U) The Zhejiang Health Commission updated its Five-color Risk Map on February 19, **moving Yueqing from red (“high-risk”) down to orange (“relatively high-risk”)**. There are currently no areas categorized as high-risk. The total number of areas categorized as high- or higher-risk was reduced from 11 to seven.

13. ~~(SBU)~~ **More municipal and provincial governments continue relaxing restrictions on intra-city and intra-provincial transport**. Additional public bus routes in Wenzhou and Ningbo in Zhejiang, and Lu’an, Anhui, and Yancheng, in Jiangsu resumed on February 20. Additional expressways opened in Hangzhou and Suzhou. Suzhou announced some local parks are reopening on February 20, with additional parks opening on February 26.

Shenyang

Heilongjiang

14. (U) **Officials caution against blanket closed management:** Heilongjiang’s People’s Congress held a meeting to discuss the closed management mechanisms currently implemented throughout the province. While the People’s Congress emphasized that Heilongjiang must continue to apply stringent measures to control the spread of the virus, members also cautioned that officials do not have a blank check to implement any and all measures that could potentially impact economic activities and infringe upon peoples’ livelihoods. Rather than applying blanket measures city-wide, members of the People’s Congress encouraged officials to strategically implement measures only in key areas of concern.

15. (U) **Heilongjiang Focuses on Supporting Four Types of Enterprises Resuming Operations:** On February 18, the Department of Industry and Information Technology of Heilongjiang conducted a video conference meeting to promote the resumption of industrial enterprises in the province to minimize the impact of the epidemic on the industrial economy. The top priority discussed was to highlight the support of four types of enterprises to resume operations: 1) Prevention and control material production enterprises, 2)

Basic needs production enterprises, 3) Agricultural and animal husbandry production enterprises, and 4) Enterprises that support regional economic growth. Officials also noted that masks, disinfectant, and other protective equipment is “stabilizing” and medical supply reserves are expanding as the province continues to increase funding for PPE production.

16. (U) **Harbin dispatches robots to hospitals:** Harbin announced that the city has dispatched “highly intelligent” robots to Harbin’s People’s Hospital and the Central Isolated Hotel in Pingfang district to be used for delivering food and medicine to patients. Developed by Lingyuan Technology Co. of the Institute of Automation of the Chinese Academy of Sciences, officials said that using robots for patients’ basic needs would greatly reduce the risk of medical personnel contracting the virus and improve quality of treatment.

Jilin

17. (U) **Development of COVID-19 Antibody Detection Kit in Jilin Enters Clinical Trial Stage:** A new COVID-19 antibody detection kit was recently developed by Jilin Shuang Zheng Medical Technology Company and the Joint Research Institute of Transitional Medicine at Jilin University. Clinical evaluation was completed in relevant medical institutions and is currently in the application stage for emergency approval through green channels of the State Drug Administration. The detection kit provides a simple, accurate and rapid tool that can be complemented with nucleic acid reagents to shorten the detection of COVID-19, accelerate the diagnosis of suspected cases and fast-track screening of close contacts.

Liaoning

18. (U) **Liaoning Party Secretary visits foreign companies:** Liaoning Party Secretary Chen Qiufa on February 19 visited South Korean companies POSCO Auto Parts Manufacturing and CJ Biotechnology, as well as German-owned Mubea Auto Parts Company to thank South Korea and Germany for supporting Liaoning and to learn about how foreign companies are preparing to resume operations. Both the ROK and German Consul Generals thanked Chen for his support and expressed confidence in Liaoning’s effort to control the spread of the virus.

19. ~~(SBU)~~ **Dandong contacts relieved businesses are reopening but concerned about PPE shortage:** After a 22-day suspension, eight bus routes in Dandong city in Liaoning have resumed operations (Note: Dandong is the focal point for China-DPRK commerce that sits at the mouth of the Yalu River and across the border from North Korea. End Note). According to officials, each bus will have a police officer on board to ensure every passenger is wearing a mask and to prevent overcrowding and close contacts between riders. Media reported that senior citizen cards and cash were no longer acceptable forms of payment; therefore, elders were forced to either download WeChat or obtain a metro card—the only two accepted methods of payment. Dandong officials also announced that large department stores were permitted to resume operations, but cautioned that all businesses must take proper precautions to ensure safety of all customers and employees. Dandong contacts told ConGenOffs that while they are relieved to see more businesses and transportations resuming operation, Dandong residents’ primary concern is PPE shortage. Some contacts asked ConGenOffs if Consulate Shenyang could provide medical supplies or help purchase PPEs online.

20. (U) **Liaoning has not yet decided when schools can return:** *Correction regarding yesterday’s sitrep: CG Shenyang reported February 19 that “Liaoning authorities released a statement that high school and middle school students who are taking entrance exams this summer may resume classes on March 2, while rest of the high school and middle school students could not return until March 9. Elementary students from*

grades 4-6 could resume classes on March 16 but authorities have not yet announced a specific date for grades 1-3 and kindergarten. Liaoning officials noted that having students return in different stages would help minimize the risk of students and teachers contracting the virus." Liaoning has not/not released any statement detailing when students can return to school. Liaoning Department of Education on January 31 said schools were not allowed to reopen before February 17, and that specific dates for resuming classes would be announced later. While international schools in Shenyang are planning to resume classes in March, since January 31, Liaoning has not released any information on when schools could reopen. CG Shenyang LES said that they also have not heard from schools when their children would be able to return to class.

21. (U) **Shenyang's First Batch of Automatic Mask Production Lines to Launch Soon:** Shenyang Xinsong Group formed a project team to streamline automatic mask production lines in order to meet the current mask supply demands in the market. The company successfully developed fully automated medical and surgical mask production lines using state-of-the-art technology. The first batches of masks will be off the production lines soon and are expected to assist greatly with mask supply needs in the area.

Wuhan

22. (SBU) **Military Enforcing Wuhan Residential Quarantines:** A contact of an evacuated CG Wuhan officer reported that the arrival of military guards at residential communities in Wuhan has resulted in stricter quarantine enforcement. The contact, a PRC citizen, said military guards augmented the housing development's private guard force on February 17. She previously could only leave her house once every three days but could still freely move from one part of the large housing development to another (the housing development was built in stages, with each stage housing thousands of people). However, starting February 17, the newly arrived military guards began strictly enforcing the rule on leaving your house once every three days.

23. (SBU) (b)(6) **Drop in Nearby Wuhan City Cases:** (b)(6) (b)(6) in a satellite city one hour outside of Wuhan said (b)(6) city's strict 21-day home quarantine is coming to an end. (b)(6) new cases in the city had dropped from dozens a day to two a day and (b)(6) hopeful that the quarantine (b)(6) would end soon. (b)(6) (b)(6)

(U) COVID-19 DEVELOPMENTS

Guangzhou

24. (U) Zhong Nanshan, the Guangzhou Institute of Respiratory Health, and Shenzhen-based Evergrande property developer has joined forces with Harvard Medical School (HMS) to establish the "Sino-U.S. New Coronavirus Scientific Research Expert Group," according to press reporting. The group held its second video conference February 19 to exchange and discuss cooperation on rapid detection and diagnosis, clinical treatment, drug screening, and vaccine development, according to separate reporting. HMS participants included George Q. Daley, MD, PhD, Dean; David Golan, MD, PhD, Dean for Research Operations and Global Programs; Arlene Sharpe, MD, PhD, Director of the Department of Immunology (HMS) and Co-Director of the Evergrande Center for Immunologic Diseases at Harvard Medical School and Brigham and Women's Hospital; Bruce Walker, Director of the Ragon Institute of Mass General, MIT, and Harvard. Evergrande committed 800 million RMB (118 million USD) over five years to support the research. Over the long-term, the group will focus on virus traceability, infection and pathogenic mechanisms, rapid

immunological detection methods, scientific research cooperation in ten major fields including genomic mutation and evolution.

25. (U) Guangdong provincial health authorities said February 19 at the daily press conference that about 89 percent of patients taking traditional Chinese medicine (TCM) medications have either recovered or exhibited improvements in their condition. The application of TCM in Hubei by a team of 312 Guangdong TCM medical professionals has shown that - combined with Western medicine - TCM shortens the treatment process, increases recovery rates, and reduces mortality. In Guangdong, TCM treatment combined with Western medicine has been applied to 93 percent of COVID-19 patients to help lower fevers and relieve fatigue. TCM treatment is reportedly most effective in early and mid-stages of infection.

Chengdu

Sichuan

26. (U) From February 17-18, **Sichuan Party Chief Peng Qinghua conducted an inspection tour** in rural areas surrounding Leshan and Liangshan, during which he focused on epidemic response, poverty reduction, resumption of business, and aid for migrant workers returning to their places of employment. Peng directed local authorities to focus on the following issues:

- Preventing social gatherings.
- Improving local capacity to receive suspected COVID-19 cases.
- Improving “health-data systems” to review migrant workers’ health status.
- Managing charter buses for migrant workers returning to work.

27. (U) Peng also said that local officials should “resolutely prevent and correct” extreme behaviors, including the overzealous implementation of epidemic response measures and excessive use of law enforcement. Peng said that local governments should continue to protect people’s legitimate interests and rights; gain the people’s understanding and support; proactively deal with employment issues arising from the COVID-19 epidemic; and further ideological education and propaganda work.

28. (U) On February 19 the **Chengdu Municipal COVID-19 Epidemic Response Command issued a notice announcing the resumption of some passenger train lines** previously shut down as a result of the epidemic.

29. (U) On February 19, **Sichuan’s provincial government issued guidance on the reopening of enterprises in key sectors.** Districts and counties without confirmed COVID-19 cases should begin pushing for private enterprises to reopen, particularly companies in sectors focusing on energy, transportation, and the production of essential commodities, so long as they maintain a well-controlled and safe work environment. SOEs should take the lead in returning to work, according to the guidance. Owners of enterprises will assume full responsibility for a safe and healthy work environment. All facilities which plan on reopening should implement epidemic prevention measures and emergency reaction plans. The provincial government said it will closely work with other stakeholders to provide transportation to migrant workers.

30. (U) **Kardze (Ganzi) Tibetan Autonomous Prefecture in Western Sichuan remains the most severely impacted region of the province outside of metropolitan areas.** On February 19, Tawu (Daofu) County in Kardze had 60 confirmed cases, 34 suspected patients, and 391 close contacts are under medical observation. Local health officials reportedly administered 8,309 viral RNA tests among close contacts of persons associated with the two initial cluster outbreak sites between February 12-18. The Sichuan provincial and Kardze prefectural CDC offices have sent 660 personnel to Daofu, along with PPE supplies, according to official statements. Authorities have designated the Kardze Prefecture People's Hospital and Daofu County People's Hospital as appropriate facilities for receiving COVID-19 patients, with technical support provided by Chengdu-based Huaxi Hospital. The county has also renovated another hospital and a government facility in Daofu, and reportedly has 129 beds on standby. The county is also planning to build another makeshift hospital using other facilities.

31. (U) Health authorities in Nanchong city have reported no further cases of H5N6 avian flu outbreak since February 9. While the outbreak of avian flu impacted several thousand poultry stock in the area, there were no reported cases of human transmission.

Chongqing

32. (U) **All residents of Chongqing continue to face strict movement controls** and are only permitted to leave their residential areas to procure basic supplies every few days or to report for essential work, according to Canadian diplomats. All people entering Chongqing are required to self-isolate for 14 days or report to a government isolation center if they do not have a permanent Chongqing address. Diplomats are exempt only if they arrive directly from another country. The vast majority of businesses remain closed, and the process to receive approval to reopen is strict and unclear. Hotels are closed to short-term guests, with a possible handful of exceptions among luxury hotels.

33. (U) **Chongqing Party Secretary Chen Min'er chaired an extended meeting of the Chongqing municipal party standing committee on February 18, during which he said the city has achieved "positive results"** in previous phases of epidemic response, and is now moving into a new phase of "combining epidemic response with the resumption of production." Districts and counties should make sound judgements on the risk level that they are facing to avoid unnecessarily onerous restrictions and one size fits all approaches, Chen said.

34. (U) During the same February 18 meeting of the municipal party standing committee, Chen Min'er announced that Chongqing will initiate preferable tax policies, ensure the sufficient supply of energy and utilities, and facilitate project financing for enterprises affected by the virus outbreak. The municipal government also will support migrant workers returning to their places of employment and match workers with local job opportunities, he said. Chen again emphasized the importance of Xi Jinping's leadership in the combat against the epidemic.

35. (U) On February 18, Chongqing Mayor Tang Liangzhi met with a visiting State Council Epidemic Response Group. Tang thanked the group for its guidance in the prevention and control efforts in

Chongqing. Sun Xinhua, head of the visiting group, praised Chongqing for its quick action.

36. (U) Following a similar announcement by the Sichuan government on February 19, the **Chongqing municipal government said that it will roll out a “four-tiered, risk-based assessment system” to advise firms on resumption of normal operations.** According to the classification system, firms in “low-risk zones” that have had no COVID-19 cases in the last 14 days can resume work. Firms in “medium-risk” zones with fewer than 50 COVID-19 cases can reopen in a “quick but orderly” manner. Firms in high-risk zones with more than 50 cases or in zones with clustered outbreaks in the last 14 days can only resume production “gradually and on a case by case basis.”

37. (U) Following similar moves in Yunnan, the Chongqing government announced on February 19 that it will introduce a health QR code system to monitor citizens’ health status. Residents will be required to swipe a QR code when entering or exiting public spaces and communal workspaces. Foreign residents are being advised to register on Chongqing’s official WeChat account. The system will be piloted by a series of companies starting February 22.

38. (U) On February 19 Chongqing’s Finance Bureau noted that the municipal government had spent 1.9 billion RMB (\$270 million) on epidemic response so far, an increase of 350 million RMB (\$50 million) over the last 11 days.

Yunnan

39. (U) Yunnan Party Secretary Chen Hao, who so far has maintained a low profile during the COVID-19 epidemic, visited the Yunnan Central Water Diversion Project Administration Bureau on February 19, during which he highlighted the importance of resuming major infrastructure projects.

40. (U) According to a February 19 press release, **Kunming municipality will continue rigid closed management practices in rural areas** and re-issued a list of 12 epidemic control measures.

41. (U) On February 19, **Yunnan province announced the gradual resumption of inter-provincial bus services** starting February 21, with the exception of lines to Hubei or destinations over 800 km.

42. (U) The Yunnan government announced on February 19 that it will roll out the same four-tiered, risk-based assessment system recently announced in Chongqing and Sichuan, in which authorities will allow enterprises to reopen depending on whether they are located in low-risk, medium-risk, or high-risk areas. Risk levels are determined by the number of COVID-19 cases in a given area during the preceding 14-day period.

Guizhou

43. (U) **Traffic in Guizhou has reportedly tripled after the removal of road blockades on February 16** and is expected to continue growing rapidly, according to a statement issued by the Guizhou Provincial Transportation Department on February 18. The Department’s current priorities include preventing individuals infected with COVID-19 from entering the province, containing the spread of the virus, and normalizing traffic to ensure logistics and supply chains.

(U) INTERNATIONAL ASSISTANCE

44. (U) **China Sends Testing Kits to Japan:** China's *Global Times* reported that the PRC government has donated COVID-19 nucleic acid testing kits to Japan ([link](#)). A spokesperson at the PRC Embassy in Japan told press that BGI in Shenzhen and Shenzhen MengMa Charity Foundation had donated the kits to National Institute of Infectious Diseases of Japan.

45. (U) Fosun Pharma's Vice President announced they ordered 140 non-invasive ventilators, with a total value of RMB 15 million (USD 2.1 million), from their affiliate Breas Medical Group in Sweden for donation to 14 Hubei hospitals. (*CG Shanghai*)

46. (U) Essilor Group, a French visual health company, donated RMB 1.5 million (USD 210,000) and 200,000 pairs of goggles to medical staff in Hubei Province, fever clinics in other parts of the country, and traffic and medical staff at Shanghai's highway checkpoints. (*CG Shanghai*)

47. (U) Shanghai-headquartered video sharing site Bilibili is donating RMB 10 million (USD 1.4 million) to Wuhan, together with RMB 300,000 (USD 42,200) worth of medical supplies. The company is also offering free monthly subscriptions to 100,000 housebound viewers in Hubei and Sichuan provinces. (*CG Shanghai*)

(U) THIRD COUNTRY RESPONSE EFFORTS AND INTERNATIONAL TRAVEL

48. (U) Nothing to report.

(U) ECONOMIC AND SUPPLY CHAIN IMPACT

49. (U) **PBOC Claims Strong Fundamentals and Limited Impact of Virus on the Economy:** In a report release by PRC's central bank the PBOC (People's Bank of China) February 19, the PBOC listed the control of the epidemic as its top priority and asserted that the impact of the coronavirus on the economy will be limited "as the epidemic has not changed the country's economic fundamentals." PBOC stated it will help companies affected by the epidemic by lowering lending rates, increasing credit support, and providing more medium- to long-term loans. It urged national and local banks to take full advantage of the liquidity released through the central bank re-lending program to provide targeted credit support for companies that directly participate in epidemic control effort. The central bank said it would monitor short-term fluctuations in the consumer prices, adding that "there is no basis for long-term inflation or deflation."

50. (U) **SMEs Struggle to Stay Afloat Despite Government Relief Policies** To address the plight of SMEs, local authorities have reduced or exempted rents and payment of social insurance. PRC's State Council announced it would eliminate or reduce required corporate contributions to employee social, medical, and unemployment funds for a period of time. However, many SME owners said these policies alone will not help address their immediate cash flow issues.

51. (U) **Closed Schools and Self-Quarantined Teleworkers A Boon for Alibaba and Tencent APPs:** Closed schools and homebound office workers have created a huge demand for virtual office tools, with Chinese tech firms Alibaba and Tencent being the main service providers. Alibaba's DingTalk is the most download free App in China's iOS App store, followed by Tencent Conference. DingTalk has been

particularly swift in spotting the emerging need in the education sector. Nearly 600,000 teachers reported using DingTalk to conduct their online classes. According to media reports, some international schools have had to moved away from foreign online platforms due to slow Internet speed or VPN problems and instead have been using “more local friendly” online tools such as DingTalk and Tencent Conference. On February 17, PRC’s Ministry of Education launched a national cloud learning platform for millions of students who are restricted to their homes over safety concerns arising from the Covid-19 outbreak.

52. (U) Covid-19 Outbreak Reduced Spring Festival Travel by Half: Passenger trips during the Chinese New Year Spring Festival period dropped by more than 50 percent this year, the country's top transport authority said on Wednesday. In December 2019, the National Development and Reform Commission (NDRC) forecasted 3 billion trips during the holiday travel period from January 10 to February 18, however the actual figure was approximately 1.48 billion. The country recorded 210 million rail trips during the period—196 million fewer than during the same period a year ago, a decrease of 48.3 percent, according to China State Railway Group.

53. (U) Heavily indebted private-sector conglomerate HNA Group will be taken over by the Hainan provincial government and its assets divided, according to international [press reports](#). The Hainan-based HNA operates Hainan Airlines – which has 13 China-U.S. routes, all of which were suspended amid COVID-19. HNA Group has been shedding foreign assets since 2018.

54. (U) State-owned Guangzhou Auto Corp. (GAC) announced it would begin mass production of facemasks on February 20 using five production lines. GAC said the masks would be distributed by Guangzhou authorities to medical personnel and public transit workers. The firm on February 12 had said it wanted 12 production lines running by February 22, with eventual goal of 30.

55. (U) Hainan Governor Shen Xiaoming visited Qionghai city February 18, home of the [Bo'ao Forum for Asia](#), to observe epidemic-control efforts on the site, according to [press reports](#). The Forum, which annually convenes senior Chinese officials and high-level foreign attendees, is currently scheduled for March 24-27.

56. (U) Officials at a State Council press conference on February 19 announced more than 50 percent of large enterprises in Shanghai and Jiangsu had returned to work, while small and medium-sized enterprises faced more challenges resuming work and production. Meanwhile, the Shanghai Commerce Commission also reported on February 19 that of 697 companies surveyed, 86 percent had received permission to restart. Breaking the numbers down, approximately 93 percent of service sector businesses surveyed are working, including retail, food, delivery, and accounting firms. Deloitte and UPS are among the firms that authorities highlighted as open. However, officials noted that the service sector, which they said accounts for 70 percent of GDP, has been hit very hard in the short-term (though online grocery shopping more than doubled). Eighty percent of manufacturing firms surveyed have received approval to restart, including Tesla and J&J. Fortune 500 companies are doing better than average – over 90 percent surveyed have received permission to restart. (Note: It is unclear how representative surveyed companies are of the overall business landscape in Shanghai. End note.) Shanghai and State Council officials both acknowledged problems related to a shortage of returning workers, poor transportation and logistics, and difficulty in supporting the industrial chain. Officials in Shanghai encouraged eligible companies to take advantage of 28 business support policies issued by the city on February 5.

57. (U) Shanghai law enforcement officials announced on February 19 that 14 percent of small

vendors that have reopened (approximately 12,000) have been ordered to improve virus prevention measures. These measures include registering health information for all employees, ensuring those returning from key areas complete a 14-day self-quarantine, wearing facemasks, performing daily temperature checks, and disinfecting the business every day.

58. (U) **Shanghai officials announced on February 19 that chartered trains and buses can be used to bring workers back to the city.** These trains will transport migrant workers from areas where the epidemic has been brought under control and remains stable, such as Sichuan, to the Yangtze River Delta region through March 31. The Municipal Road Transportation Management Bureau announced businesses can apply to arrange chartered buses to bring back employees. Since Sunday, trial trains ran from Guizhou, Henan, Anhui, and Sichuan provinces to transport migrant workers to Hangzhou and Ningbo in Zhejiang. Local governments in Shanghai, Jiangsu, and Zhejiang provinces can apply for such trains and buses. Similarly, Taizhou, Zhejiang announced February 16 it will charter flights to bring workers from Chongqing, Guiyang, Chengdu, Kunming, and Xi'an back to Taizhou.

59. ~~(SBU)~~ **The Shanghai and Ningbo ports are facing a shortage of reefer plugs, leading to delays and additional costs for importing items in refrigerated containers.** These challenges are leading international container and shipping companies to suggest customers change the destination of shipments, especially for fresh and chilled commodities. One dairy importer reported to CG Shanghai's Agricultural Trade Office that supply chain challenges associated with coronavirus had caused recent shipments from Europe to be diverted or delayed due to labor shortages.

60. (U) **Ningbo launched China's first epidemic prevention insurance policies for small and micro enterprises.** The policies will pay up to RMB 100,000 (USD 14,200) for enterprises that stop work or stop production due to infectious diseases. The government will subsidize half of the RMB 2,000 (USD 285) premium for each enterprise.

61. (U) **Suzhou on February 18 announced additional measures to help businesses resume operations,** including employment subsidies per worker, subsidizing unemployment insurance, deferring payment of social security premiums, reducing interest rates on loans, etc.

62. ~~(SBU)~~ **COVID-19 Impact on JD.com Shenyang:** A delivery personnel at JD.Com Shenyang branch told ConGenOff that COVID-19 has had a significant impact on the company's operations. JD Shenyang's inventory is rapidly decreasing since many manufacturing companies have not yet resumed operations, and those that have resumed were behind schedule. Additionally, delivery service and supply chain continue to be a challenge, as JD trucks from other provinces face difficulty entering Shenyang due to roadblocks and highway closures. He lamented that delivery service within Shenyang has also slowed down because trucks are stopped multiple times at checkpoints for body temperatures and questioning by the authorities. Moreover, customers take longer time to pick up their packages due to closed management, forcing delivery personnel to wait much longer than usual at residential complexes. Checkpoints and movement restrictions combined with dwindling inventory has led JD Shenyang to reduce its daily delivery schedules.

63. ~~(SBU)~~ **Contact says company's delivery process significantly impacted by COVID-19 and closed management:** A contact at the Zhengsheng Husbandry Co, a Shenyang-based animal feed production company, told ConGenOff that one of the biggest challenges the company faces is transportation and delivery. The contact noted that in addition to roadblocks and highways, another major problem for the

company is that some truck drivers are unwilling to drive across provinces to deliver the products because they think they are at higher risk of contracting the virus driving long distances through multiple provinces (Note: CG Shenyang was told by other business contacts that their operations have also been impacted due to workers' fear of the virus. For example, Walmart Liaoning said that nearly half of Sam's Club Shenyang employees have resigned since COVID-19 outbreak, and a contact in Dalian told ConGenOff that seafood processing companies are concerned about resuming their businesses because many of their workers are hesitant to return due to growing fear of the virus. End Note). Additionally, contact noted that delivering products to rural areas are even more problematic since authorities there are generally stricter about allowing entry to outside trucks and personnel. In some rural areas, authorities require delivery personnel to drop off supplies at the border and force the customers to come pick up the packages themselves which slows down the overall delivery process that is already delayed due to roadblocks and checkpoints.

64. (U) While the central government has introduced a series of measures to ensure an adequate supply of **animal feed** to help agricultural companies restore production as soon as possible, in Sichuan local contacts report **their business operations remain at 70 percent of their normal capacity**. The national Ministry of Transport and Ministry of Agriculture and Rural Affairs have reportedly instructed local governments not to intercept or detain vehicles transporting feed, live animals, or animal products if they have a necessary traffic permit.

65. (U) According to CG Chengdu contacts at China Xiangtai Food Co., Ltd., the company has seen a 300 percent increase in supermarket sales over the 2020 Chinese New Year season compared to the same period last year, despite the COVID-19 outbreak. Headquartered in Chongqing, China Xiangtai is a new food company primarily engaged in pork processing, as well as selling beef, lamb and poultry products.

~~(SBU)~~ SUPPORT FOR U.S. CITIZENS

Chengdu

66. ~~(SBU)~~ As of February 20, Chengdu ACS has received no new information of American citizens who have been ordered to self-quarantine or been sent to a controlled quarantine facility. Chengdu ACS has observed more discussions on AmCit WeChat groups about people planning their return to China. As AmCits return, they will likely face a 14-day period of self-quarantine in most major cities in Southwest China. Many AmCits who have remained in China throughout the epidemic note that their residential communities have implemented "closed-management" restrictions. Many Americans in Chengdu are only allowed to leave their apartment once per day or once every two day to get supplies.

Shanghai

67. ~~(SBU)~~ The Consulate continues to reach out to the FAO to get clarity on **self-quarantine regulations in Shanghai** on behalf of returning American citizens who have been ordered by their neighborhood committee to complete a 14-day quarantine. As reported above, while Shanghai only requires this for those who have traveled to high-risk areas, in practice, many locations are requiring an in-home quarantine for anyone returning to Shanghai, regardless of from where.

Wuhan

68. (U) Wuhan Maternity Hospital **Unable to Provide Birth Certificate to U.S. Citizen**: An American citizen reported that a private maternity hospital in Wuhan was unable to provide a birth certificate after she gave birth. The hospital said they had too few staff to handle administrative tasks such as birth records.

The hospital could not give a date for when they would be able to provide a birth certificate.

69. ~~(SBU)~~ **U.S. Citizen in Changsha Reports Free Movement:** A U.S. citizen in Changsha reported that he was able to move around freely as long as he carried a resident's card. He reported that American Citizen WeChat groups in the city were largely concerned with how to get paid for missed work, how to work from home, and, in some cases, more restrictive housing policies. He noted that he had not heard of any problems from U.S. citizens in Changsha and that those who have stayed in the city to this point are not planning on leaving.

~~(SBU)~~ POST OPERATIONS

Chengdu

70. (U) Civil aviation is still operating from Chengdu, **though with decreased viable flights for USG personnel to depart Chengdu for the United States.** Viable transit destinations remaining include Bangkok, Kuala Lumpur, Seoul, and Hong Kong. Only two international flights from Chongqing, to Bangkok and Hong Kong, remain in operation.

Guangzhou

71. ~~(SBU)~~ **Post Medical Provider returned to Guangzhou February 19 with medical equipment that can test for a variety of respiratory viruses and bacteria.** While it cannot test for COVID-19, it can test for 22 other respiratory pathogens and give medical personnel a better picture of any illnesses that occur at Post.

(U) MEDIA ROUNDUP

72. ~~(SBU)~~ **South China PAS media contacts posted satirical comments on the government's response to COVID-19.** The manager of an online media outlet in Guangzhou noted that with the increasing closed management policies of cities and provinces in the COVID-19 campaign, there has also been an uptick in the blocking of WeChat groups, Weibo posts, and other websites. A leader of a WeChat public account in Guangzhou posted commentary that the government should gain respect and authority to govern by not completely squashing rumors. A Guangzhou-based blogger had written about a January order given by the Director of the Wuhan Institute of Virology to the staff in January to not discuss COVID-19. This post has since been blocked on social media. *(CG Guangzhou)*

73. (U) Guangzhou netizens shared comments made by Wang Chen, the Vice-President of the Chinese Academy of Engineering who said that **society should prepare for long-term co-existence with COVID-19** after this year, with commenters expressing concern. They also discussed reports that nine individuals are being investigated by the Guangzhou police for obstructing the COVID-19 epidemic prevention and control measures, including deliberate concealment of symptoms and refusal to quarantine, with some netizens commenting that these individuals should be severely punished for their actions. *(CG Guangzhou)*

74. (U) On February 16, **Wuhan authorities announced that a medical team from Liaoning will take over management of 17 of the 32 wards at Leishenshan Hospital,** one of two emergency hospitals built in Hubei in response to the COVID-19 outbreak. Since early February, Liaoning province has sent more than more than 1,000 workers to Hubei to assist with relief efforts. Media reports and updates regarding the news quickly went viral on social media platforms in Northeast China under the hashtag #Liaoning Medical Team

Takes Over Management at Leishenshan Hospital#. By February 20, it had become a top trending topic with a viewership of 15 million and more than 11,000 comments. Chinese netizens in the region expressed mixed opinions on the issue. Most praised the high-caliber medical skills of Liaoning medical personnel and welcomed the inspiring and positive news, however some netizens complained about underreporting of the actual contribution of relief efforts from Liaoning and national bias towards people from Northeast China. Others voiced concerns about the impact sending medical workers to Hubei would have on local medical services and unequal access to medical treatment in the country. The following additional topics were also trending on social media sites in Northeast China: 1) Over 100 patients cured and discharged in Heilongjiang, 2) 1,100 milliliters of plasma donated by healed patients in Jilin, and 3) Changchun medical waste treatment plant runs around-the-clock. (CG Shenyang)

75. (U) **Social media users continued to criticize a propaganda video released by authorities in Gansu province showing female health workers crying as their heads are shaved**, ostensibly to reduce the risk of COVID-19 transmission. Social media users questioned whether such measures were necessary and urged local government officials to remember that health workers are still human beings.

~~SENSITIVE BUT UNCLASSIFIED~~

Signature: Branstad

Drafted By: BEIJING:Multiple Mission China Drafters

Cleared By: HHS/CDC/IRD
 HHS/OGA
 POL-ECON
 POL-ECON
 POL
 POL
 POL-ECON
 USDA/FAS
 ESTH
 MGT/MED
 RSO
 PD
 ESTH
 ECON
 MGT
 ESTH
 POL
 BEIJING

(b)(6)

Approved By:

Released By:

Info:

SEOUL, AMEMBASSY ROUTINE; TAIPEI, AIT ROUTINE; HANOI, AMEMBASSY ROUTINE; SINGAPORE, AMEMBASSY ROUTINE; ULAANBAATAR, AMEMBASSY ROUTINE; PHNOM PENH, AMEMBASSY ROUTINE; BANGKOK, AMEMBASSY ROUTINE; HONG KONG, AMCONSUL ROUTINE; MANILA, AMEMBASSY ROUTINE; PARIS, AMEMBASSY ROUTINE; VLADIVOSTOK, AMCONSUL ROUTINE; TOKYO,

AMEMBASSY *ROUTINE*; ATLANTA GA, CDC *ROUTINE*; CIA
WASHINGTON DC *ROUTINE*; WHITE HOUSE NATIONAL SECURITY
COUNCIL WASHINGTON DC *ROUTINE*; PACOM IDHS HONOLULU
HI *ROUTINE*; ENVIRONMENT SCIENCE AND TECHNOLOGY
COLLECTIVE *ROUTINE*; CHINA POSTS COLLECTIVE *ROUTINE*
XMT: CARACAS, AMEMBASSY; ST PETERSBURG, AMCONSUL

Action Post: NONE
Dissemination Rule: DIS_BIO_STAFF

UNCLASSIFIED

~~SBU~~

Sender: (b)(6)@state.gov>
Recipient: ISN-BPS-DL <ISN-BPS-DL@STATE.GOV>

From: (b)(6)@state.gov
To: ISN-BPS-DL <ISN-BPS-DL@STATE.GOV>
Subject: FW: Mission China COVID-19 Update February 18 (U)
Date: Tue, 18 Feb 2020 13:38:55 +0000

China's use of technology and big data during this epidemic continues to be very very interesting. Somebody is going to have to write a book on this topic after this is all over, would be a fascinating read. The data below seems to be some of the more useful reporting they've done yet.

~~SENSITIVE BUT UNCLASSIFIED~~

From: SMART Core <svcSmartBtsEwsHPrec@state.gov>
Sent: Tuesday, February 18, 2020 5:55 AM
Cc: (b)(6)@state.gov; (b)(6)@state.gov; (b)(6)@state.gov; (b)(6)@state.gov; Park, Christopher J (b)(6)@state.gov; (b)(6)@state.gov
Subject: Mission China COVID-19 Update February 18 (U)

UNCLASSIFIED
~~SBU~~



Info Office: BIO_STAFF

MRN: 20 BEIJING 296
Date/DTG: Feb 18, 2020 / 181032Z FEB 20
From: AMEMBASSY BEIJING
Action: WASHDC, SECSTATE *ROUTINE*
E.O.: 13526
TAGS: SHLH, PGOV, PREL, CASC, AMGT, AMED, ASEC, ELAB, ECON, EINT, KPAO, KHIV, KFLU, KFLO, KFPC, KGHI, KHLS, KSCA, KTB, CDC, HHS, NIH, AID, OSHA, CN
Captions: SENSITIVE
Reference: A) 20 BEIJING 292, 282, 276, 264, 248, 234, 226, 222, 218, 216, 214, 206, 204, 202, 200, 198, 188, 186, 174, 172, 166, 164, 142, 122, 108, 74
 B) 20 BEIJING 260
 C) 20 BEIJING 250
 D) 20 BEIJING 256
 E) 20 BEIJING 254
 F) 19 WUHAN 112
 G) 20 BEIJING 272
Subject: Mission China COVID-19 Update February 18 (U)

1. ~~(SBU)~~ **Summary and comment:** China's National Health Commission reported 1,886 new cases of COVID-19 in Mainland China on February 17, bringing the total number of recorded cases to 72,436. Updated analysis by ESTHOFF shows the epidemic has continued to intensify across much of Hubei, while trends in the other provinces have been mixed. The Ministry of Emergency Management requested information on how the United States manages emergency stockpiles and reserves. China CDC released the largest epidemiological analysis to-date February 17. The report provides the first epidemic curve that shows onset dates; however, future investigation by PRC health authorities is required to answer outstanding questions. Government officials continue to send conflicting messages about protecting against the virus and returning to work. The Ministry of Foreign Affairs confirmed publicly and for the first time February 17 that U.S. experts are participating on the WHO-China joint mission. The joint team conducted a DVC with Wuhan public health staff and clinicians; they also visited a Beijing community health center as well as a Ditan infectious disease hospital prior to beginning their in-country travel February 18. Multiple media outlets reported that the National People's Congress Standing Committee would meet on February 24 to consider postponing this year's "two meetings" (lianghui), which have been held in early March for many years. Renewed focus is also being placed on controlling online narratives about the PRC's efforts, including a concerted effort to retrofit President Xi's involvement in leading the charge against the virus. In a Qiushi article, one of the CCP's authoritative mouthpieces, Xi's involvement was traced back to a January 7 meeting of the Politburo CPC Central Committee, an assertion somewhat at odds with President Xi's notable public absence during the first few weeks of the epidemic. Meanwhile, the International Air Transport Association updated its list of countries with China-related travel restrictions to 56 countries. **End Summary and comment.**

(U) LATEST UPDATES

2. (U) **Nationwide Cases:** China's National Health Commission (NHC) reported 1,886 new cases in Mainland China on February 17 as of 24:00, bringing the total number of reported cases to 72,436 ([link](#)). [Note: This includes clinically diagnosed cases in Hubei in addition to lab-confirmed cases in Hubei and the other provinces, though Hubei Health Commission has stopped providing disaggregated figures for clinically diagnosed and lab-confirmed cases. **End note.**] Another 98 deaths were reported on February 16, including 93 in Hubei, as total deaths in Mainland China reached 1,868. The number of patients treated and released from the hospital, meanwhile, rose to 12,552. The total number of currently suspected cases (6,242) and close contacts under medical observation (141,552) continued to decline.

Table 1: Total Officially Reported Cases in Mainland China as of End of February 17

Province/City/Region	Total Cases	New Cases	Total Deaths	New Deaths
Cases in Hubei Province (Lab-Confirmed and Clinically Diagnosed Cases)				
<i>Subtotal</i>	59,989	1,807	1,789	93
Cases in Other Provinces (Lab-Confirmed Cases Only)				
<i>Anhui</i>	982	9	6	--
<i>Beijing</i>	387	6	4	--

<i>Chongqing</i>	553	2	5	--
<i>Fujian</i>	292	2	--	--
<i>Gansu</i>	91	1	2	--
<i>Guangdong</i>	1,328	6	4	--
<i>Guangxi</i>	242	4	2	--
<i>Guizhou</i>	146	1	1	--
<i>Hainan</i>	163	1	4	--
<i>Hebei</i>	302	1	4	1
<i>Heilongjiang</i>	464	7	11	--
<i>Henan</i>	1,257	11	19	3
<i>Hunan</i>	1,007	1	4	1
<i>Inner Mongolia</i>	73	1	--	--
<i>Jiangsu</i>	629	3	--	--
<i>Jiangxi</i>	933	3	1	--
<i>Jilin</i>	89	--	1	--
<i>Liaoning</i>	121	--	1	--
<i>Ningxia</i>	70	--	--	--
<i>Qinghai</i>	18	--	--	--
<i>Shaanxi</i>	240	--	--	--
<i>Shandong</i>	543	2	2	--
<i>Shanghai</i>	333	2	1	--
<i>Shanxi</i>	130	1	--	--
<i>Sichuan</i>	508	13	3	--
<i>Tianjin</i>	125	1	3	--
<i>Tibet</i>	1	--	--	--
<i>Xinjiang</i>	76	1	1	--
<i>Yunnan</i>	172	1	--	--
<i>Zhejiang</i>	1,172	1	--	--
Total Cases (From Provincial Reports)				
<i>Total lab-confirmed cases</i>	No Report	No Report	No Report	No Report
<i>Total clinically diagnosed cases</i>	No Report	No Report	No Report	No Report
Total cases	72,436	1,888	1,868	98
Total Cases (From NHC Report)				
<i>Total lab-confirmed cases*</i>	No Report	No Report	No Report	No Report
<i>Total clinically diagnosed cases</i>	No Report	No Report	No Report	No Report

Total cases	72,436	1,886	1,868	98
--------------------	---------------	--------------	--------------	-----------

Notes: -- zero cases. Source: NHC and provincial health commissions

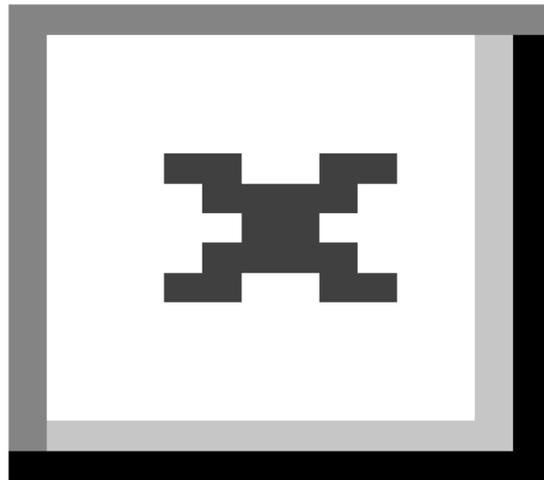
3. ~~(SBU)~~ City-Level Trends: Updated analysis by ESTHOFF of reports of lab-confirmed cases of COVID-19 in China's cities from February 9 to 14 shows that the epidemic has continued to intensify across much of Hubei, while trends in the other provinces have been mixed (figure 2). Wuhan City experienced the fastest increase in the current prevalence of COVID-19 cases among Hubei's cities, with a rate of 98 new cases per million residents per day (net of the number of deaths and patients released from the hospital), followed by Ezhou, with a rate of 54 new cases per million per day, and Suizhou, with an increase of 14 new cases per million per day. Despite the worsening trend for the province overall, a few of Hubei's cities recorded substantial *decreases* in the prevalence of lab-confirmed COVID-19 cases. In Tianmen and Xianning, the number of current cases per million residents declined at a rate of 6 and 9 per day, respectively.

4. ~~(SBU)~~ [Note: February 14 is the last day for which Hubei Health commission provided disaggregated statistics for lab-confirmed versus clinically diagnosed cases. The new category of clinically diagnosed cases was introduced into the province's and the country's daily case reports on February 12 (see Ref A, 20 BEIJING 282). Other provinces only report lab-confirmed cases. For the sake of comparability, only data up to February 14 from Hubei and the other provinces have been included here. Also note that ESTH has made two changes to data and methods since the previous analysis of city-level case data presented in the Mission China sitrep for February 10 (see Ref B, 20 BEIJING 260). First, to capture improving and worsening trends in the prevalence of COVID-19 cases over time, the analysis focuses on active cases net of the number of deaths and treated patients released from the hospital. The previous analysis focused on total cases to date, irrespective of the number being actively treated and released. Second, to measure cases per million residents, the previous analysis used statistics from China's Ministry of Housing and Urban-Rural Development (MOHURD) on population per city. These statistics only captured the number of permanent residents in urban districts under direct jurisdiction of the municipality, excluding other smaller cities and counties contained within larger municipalities. This created a mismatch in the case reports by local public health authorities, which included data from the entire prefecture or municipality, and the population data. The new analysis presented in today's cable corrects for this, instead using population data prefectures and municipalities from China's latest census (in 2010). ESTH has reproduced the map for case prevalence as of February 9 to be consistent with these new changes (figure 3). **End note.]**

5. ~~(SBU)~~ The prevalence of lab-confirmed COVID-19 cases in the worst-affected cities in Hubei continues to be many times higher than in cities outside the province. The number of lab-confirmed cases under treatment in Wuhan was around 2,000 per million residents on February 14. By comparison, the cities with the highest case prevalence outside Hubei as of February 14 were Xinyu City in western Jiangxi and Sanya City in Hainan, with 82 and 55 cases per million residents, respectively. **[Note:** Xinyu had a population of 1.1 million in 2010, per the latest census data. **End note.]** Wenzhou in Zhejiang Province, which imposed strict "closed-management" measures on February 4 (see Ref C, 20 BEIJING 250), had 36 cases per million residents as of February 14. **[Note:** Post had previously reported the case prevalence in

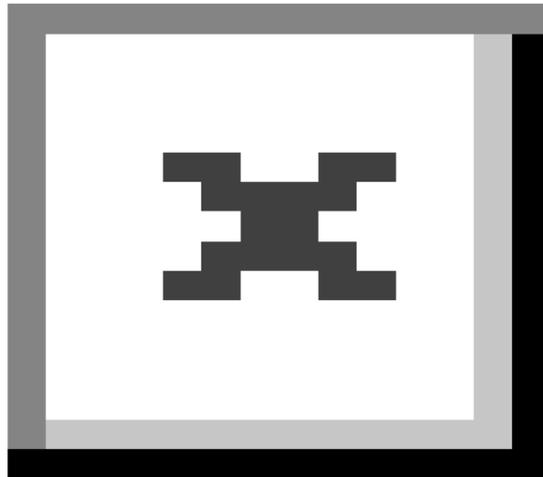
Wenzhou at over 200 per million residents for February 9. The downward adjustment owes to the change in population data used for the analysis—not a change in epidemic. Population data for Wenzhou have been adjusted to include surrounding counties and cities outside Wenzhou city proper, consistent with the geographic scope of case reports by Zhejiang health authorities. **End note.]**

Figure 1: Prevalence of Lab-Confirmed COVID-19 in Mainland Cities as of February 14



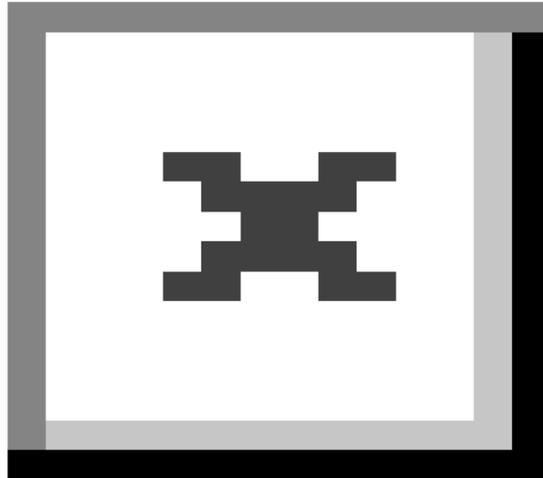
Source: Map by ESTHOFF using data from Ding Xing Yuan (DXY.cn) and 2010 census data.

Figure 2: Change in Prevalence of Lab-Confirmed COVID-19 Cases from February 9 to 14



Source: Map by ESTHOFF using data from Ding Xing Yuan (DXY.cn) and 2010 census data.

Figure 3: Prevalence of Lab-Confirmed COVID-19 in Mainland Cities as of February 9



Source: Map by ESTHOFF using data from Ding Xing Yuan (DXY.cn) and 2010 census data.

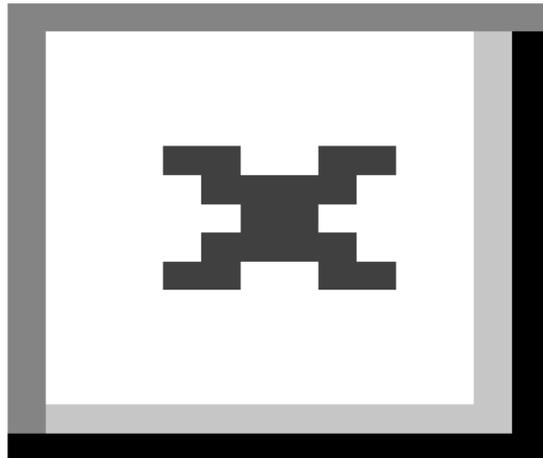
6. (U) **Critical Shortages in Blood Supplies:** Shiyang City COVID-19 command center in Hubei issued an urgent call for blood donors on February 17, writing in an open letter to city residents, “Due to the epidemic, normal blood donation operations in Shiyang City have been unable to function. Supplies of blood are critically low...” (*People’s Daily*). Sichuan Health Commission issued a similar plea on February 16, posting on its social media that “donations of blood have declined greatly, and blood supplies have been in a constant state of emergency...” ([link](#)).

7. ~~(SBU)~~ **China CDC Releases Largest Epidemiological Analysis:** China CDC February 17 released the largest epidemiological analysis to-date from 72,314 COVID-19 cases across China. The analysis, published on *China CDC Weekly* and in the *Chinese Journal of Epidemiology* (ref attached and [link](#)), included cases from the initial outbreak through February 11.

8. ~~(SBU)~~ The analysis focused on 44,672 lab-confirmed cases and reported that such cases peaked between January 23-26. Patients were mostly older (87 percent aged 30-79 years) and nearly evenly split between men (51.4 percent) and women. Among the remaining non-laboratory confirmed cases, 10,567 were clinically diagnosed, 889 were asymptomatic, and 16,186 were suspected cases. [Note: Some of the suspected cases may subsequently be

classified as laboratory confirmed or clinically diagnosed following the February 13 change of case-definition in Hubei Province. **End Note.]**

9. ~~(SBU)~~ The epidemic curve provided in the analysis shows a decline in cases both by date of symptom onset and date of diagnosis (figures A-B). [**Note:** The decline appears to coincide with severe closed-management measures implemented by PRC authorities in Wuhan on January 23. The China CDC analysis and data are insufficient to determine the effect of specific control measures on the outbreak. Moreover, since COVID-19 has a 6 to 7-day incubation period, the direct impact of such measures would not be expected immediately. Separately, the delay between date of symptom onset and date of diagnosis may indicate a case testing backlog. **End Note.]**



(U) Figure A: Case definitions by onset date; Figure B: Date of onset and date of diagnosis

10. ~~(SBU)~~ The analysis shows the case fatality rate (CFR) decreasing over time, from 14.4% before December 31 to 0.8% after February 1. [**Note:** The decline in CFR is expected over time. In the early stages of an outbreak, the CFR may be overestimated because the health system typically first identifies severe cases or deaths. **End note.]** The CFR is higher among men than women (2.8 percent versus 1.7 percent) and among older age groups [60-69 years old (3.6 percent), 70-79 (8.0 percent) 80 and above (14.8 percent)].

11. ~~(SBU)~~ The China CDC reported that Wuhan had the highest rate of severe and critical cases among confirmed health care worker (HCW) cases (17.7 percent, 191 severe/critical out of 1,080 total HCW cases). The CFR for HCW in total was 0.3 percent (5 deaths/1,688 total cases). Three HCW deaths were reported in Wuhan, two elsewhere in Hubei, and zero outside of Hubei. [Note: The data do not include descriptions of HCW age, pre-existing conditions, or the type of HCW. End note.]

12. ~~(SBU)~~ The analysis did not report any super-spreader events but states specific causes of medical staff infection and protection failures require further investigation.

13. ~~(SBU)~~ **Comment:** The report provides the largest population dataset to-date and the first epidemic curve to include onset dates. The analysis is well-written and relatively up to date with reporting through February 11. However, future investigation and/or release of information by PRC health authorities is required to answer many important questions, including, the extent of testing that has been done throughout the country, the full burden of infection and disease, the duration of infectious period, viral load over time and by specimen type, transmissibility and routes of transmission, comparison of clinical status on infectiousness, disease severity, effective treatment options, and animal reservoir. **End Comment.**

14. ~~(SBU)~~ **Ministry of Emergency Management Requests Assistance:** The Ministry of Emergency Management (MEM) contacted ESTH February 15 to request information on how the United States manages emergency stockpiles and reserves. Noting that President Xi had tasked relevant ministries to enhance management of emergency stockpiles, the MEM requested documents or guidance that would detail how U.S. agencies decide on which items should be stockpiled, where items should be stored, and how stockpiles are maintained and replenished. ESTH is working with the Department to respond to MEM's request.

15. ~~(SBU)~~ **PRC Messaging, Censorship, and Meetings:** Officials continue to send conflicting messages about protecting against the virus while returning to work at the same time. In Hubei province's Xiaogan, for example, all vehicle traffic was reportedly stopped, with no unofficial transit into or out of the city. At the same time, the government has allowed some online criticism of Xiaogan officials who were caught on video slapping the faces of citizens gathered in a small group to play mahjong. The criticism focused on the officials' overreaction and the fact that they also wore Mao era-style red arm bands, something apparently not ordered by the CCP. In Guizhou province, all checkpoints are reportedly being dismantled, and people are being ordered to speed up economic production to make up for lost time. In Zhejiang province, one of the areas hardest hit outside of Hubei province, the Yiwu municipal government ordered the full resumption of work. Workers who pay their own way to return from another area would be reimbursed, the government announced. At the same time, Xinhua announced that the NPC Standing Committee would meet on February 24 to consider postponing this year's "two meetings" (lianghui), the annual meetings used to set party objectives and give legitimacy to the CCP's political and economic planning. The article asserted that China was "at a crucial moment" and no effort should be spared in fighting against the spread of the virus.

16. ~~(SBU)~~ **Online Narratives:** Renewed focus is also being placed on controlling online narratives about China's efforts, careful to project predictions of success. The narratives seek to

emphasize the collective sacrifices of Chinese heroes, especially health care workers in Hubei province. However, even that narrative is meeting with some resistance, as evidenced by online criticism of female healthcare workers crying while their heads were shaved to prevent spread of the virus while no such measures were employed for male healthcare workers. There has also been a concerted effort to retrofit President Xi's involvement in leading the charge against the coronavirus. In a Qiushi article, one of the CCP's authoritative mouthpieces, Xi's involvement was traced back to a January 7 meeting of the Politburo CPC Central Committee, an assertion somewhat at odds with President Xi's notable public absence during the first few weeks of the epidemic.

Guangzhou

17. (U) Effective February 18, all patrons of public venues in Guangxi – including residential areas, wet markets, supermarkets, shopping malls, restaurants, hospitals, pharmacies, public transport, airports, and railway stations – will be required to use QR code scanning to gain entrance. Nanhai District in Foshan, Guangdong also applied these measures February 17 and ConGenOff reported this procedure has been adopted at a local Guangzhou shopping mall.

18. (U) Guangzhou and Shenzhen metro systems are using QR code scanning at the level of individual cars to scan and register passenger name, gender, identification number, and onboard/offboard station. As of February 18, use of the system is encouraged but not mandatory. While Shenzhen metro has required real-time registration for all metro users, Guangzhou metro riders are encouraged but not mandated to do so.

19. (U) Guangzhou police arrested human rights activist Xu Zhiyong at the home of prosecutor-turned free speech advocate Yang Bin during "coronavirus prevention checks," according to Hong Kong press. Police from the city's Panyu district searched the homes of several of Xu's friends before locating him at Yang's residence. According to the press reports, Xu had been in hiding since attending a gathering in Xiamen to discuss democratic transition.

Shanghai

20. ~~(SBU)~~ **While many Americans in the Shanghai consular district are opting to remain in China, any healthy American citizen in our district who would like to depart can take advantage of approximately 90 international flights** from Shanghai, as well international flights departing from Nanjing and Hangzhou. Travel restrictions remain in place in several cities across East China, but some cities and provinces are relaxing restrictions on intra-city and intra-provincial transport and, in some cases, on vehicle traffic between provinces. American auto and healthcare companies have reported supply chains disruptions due restrictions imposed to contain the spread of COVID-19. CG Shanghai has seen limited signs of stress to the local healthcare system. Nearly 50 percent of total diagnosed cases in Shanghai have now recovered.

21. ~~(SBU)~~ **While several cities in the Shanghai consular district continue to restrict the movement of residents within the city, many municipal and provincial governments are relaxing restrictions on intra-city and intra-provincial transport and, in some cases, on vehicle traffic between provinces.** Over the past week, metro and bus lines resumed or expanded operations in Ningbo, Hangzhou, and Nanjing. Zhejiang announced on February 17

that all vehicle checkpoints across the province, except those in Wenzhou, would be closed. Five cities in Jiangsu issued a joint declaration forbidding blocking inter-regional highways. Jiading District in Shanghai began issuing a special commuting pass for those who work in the district but live in Kunshan or Taicang in Jiangsu Province. Passholders are able to enter Shanghai without having to abide by 14-day quarantine requirements and are able to use a special lane on the highway that allows them to avoid checkpoints at which the wait time is typically more than an hour. However, some cities in East China, including Shanghai, Suzhou, and Hangzhou, are still encouraging (and in some cases requiring) people who are not residents or do not hold a job there to not enter the city and/or have implemented 14-day self-quarantine restrictions for returning travelers from high-risk areas.

22. ~~(SBU)~~ Shanghai municipal regulations require community visitors to register and pass temperature checks and require self-quarantine for those who have traveled to high-risk areas in the past 14 days, as well as for people returning to Shanghai who work in specific industries, including transportation, healthcare, education, and housekeeping. Many neighborhood committees are taking more stringent measures, including preventing all visitors from entering and requiring self-quarantine of varying lengths for all returning travelers regardless of where they were. Some neighborhoods where LE staff reside require residents to present a letter from their workplace before the individual is allowed to leave the property.

23. (U) Following the February 13 launch in Shanghai of two online platforms for employees to verify their health status to employers, on February 17 Shanghai launched an official Health QR Code that must be scanned at many residential buildings and public places to check the health condition of people entering or leaving. The QR code uses different colors to highlight different risk profiles — green (or black-and-white) for “healthy” people, red for confirmed or suspected cases, and yellow for those from key infection areas and who are under quarantine.

24. (U) Two districts in Shanghai are experimenting with using wireless door sensors on the homes of residents under mandatory self-quarantine, so community workers will be alerted if the doors are open. Community workers in Putuo and Jiading Districts say this system will reduce the time they spend ensuring these residents adhere to their quarantine and do not leave their homes.

25. ~~(SBU)~~ Shanghai municipal bus and metro service are operating normally. Although ridership remains far below normal levels, authorities reported metro ridership was up 15 percent to 487,000 people by 9:00 am on Monday, compared with one week ago. However, that was still an 82 percent drop compared with the same day and time last year, when there were 2.75 million riders. Authorities are strictly enforcing the mask requirement for all public transportation passengers. Temperature checks are being conducted on all open local metro stations (412) and at 99 bus stops throughout the city, covering 370 routes. The number of flights from Shanghai have declined, but approximately 90 daily flights to international destinations remain available. Japan and Korea remain the most widely served regional transit points, although China Eastern Airlines is scheduled to operate six weekly flights to the United States through March 28.

26. ~~(SBU)~~ CG Shanghai has seen limited signs of stress to the local healthcare system due to

the coronavirus. Private hospitals are permitted to operate and provide different levels of services depending on guidance provided by individual district-level governments. The hospitals retain the capability of performing the same outpatient and emergency procedures as they were before the virus, but in some cases are prohibited from doing so by district-level regulations. The two private hospitals most frequented by the official American community can still provide care in most specialties, including emergency care, orthopedics, psychology, dental, immunizations, and pediatrics, among others, though they have suspended purely routine healthcare such as eye exams, teeth cleaning, and routine endoscopies. Many public and private hospitals are offering consultations with doctors via phone, social media, or online. Most private health clinics – including dental clinics – have been ordered to temporarily suspend all services.

27. (U) **Experts at Shanghai Public Health Clinical Center in Jinshan District (the city's designated hospital for centralized treatment of coronavirus) announce on Monday that nearly 50 percent of patients diagnosed with COVID-19 - 161 out of 333 - had completely recovered as of February 17.** Health officials also announce on Monday that discharged patients must still undergo 14 days of in-home quarantine and must wear masks if they do go out.

28. ~~(SBU)~~ **Around the consular district, public hospitals continue to report shortages of PPE such as masks and goggles.**

29. ~~(SBU)~~ **While the Shanghai government has made no official announcement regarding extending school opening beyond the end of the month, the Shanghai American School (SAS) announced it is unable to reopen March 2 as planned,** but will provide three-weeks notice advance notice of reopening. (Note: SAS enrolls the largest number of EFM children in Shanghai. End note.) Dulwich College, a British international school, followed suit and announced it cannot yet provide a date on which the school will reopen, but will provide 21 days advance notice. (Note: No Consulate EFM children attend Dulwich. End note.) Both schools report guidance from local authorities says all students and staff returning to Shanghai, regardless of location, must self-quarantine for 14 days. The two schools will continue to offer distance learning to students in the meantime. Other international schools in Shanghai are expected to follow suit. **All Anhui and Jiangsu schools will remain closed through at least the end of February. Zhejiang schools are closed indefinitely.** Schools in several cities, including Nanjing, Hangzhou, Suzhou, and Ningbo, are already offering distance learning classes.

Shenyang

Heilongjiang

30. (U) **Heilongjiang Party Secretary stresses strict enforcement of closed management measures:** Heilongjiang Party Secretary Zhang Qingwei said February 17 that the high number of confirmed cases and deaths in the province indicate loopholes and problems still exist in enforcement of closed management regime, and urged officials to diligently monitor all residential complexes and strictly apply all measures already in place. Zhang emphasized that a stricter oversight is needed particularly in senior nursing homes since elders are more prone to contract the virus. Those who fail to strictly enforce closed management measures will be held accountable, said Zhang.

31. (U) **Heilongjiang implements stricter closed management in more cities:** Heilongjiang officials announced February 5 that in Harbin, only one person from each family could leave their homes every two days to purchase necessities, and on February 14, expanded the measure to restrict residents to no more than two hours each time they leave their homes. Authorities on February 17 announced that the same measure would be implemented in all cities and districts that have 10 confirmed COVID-19 cases or more. Moreover, each city has been instructed to apply the “two-two-three” system: deploy two personnel to each checkpoint and conduct two checks (body temperature and ID check), and ask all residents three questions (Where are you going? Why are you going? When do you expect to return?).

32. (U) **Harbin officials urge residents to buy necessities online:** Harbin officials February 17 urged all residents to purchase daily necessities online to minimize overcrowding at shopping malls and stores. Officials also noted that shopping centers and supermarkets should increase their delivery capacity and make their websites and mobile apps more convenient for consumers of all ages. All residential complexes are required to designate a drop off and pick up location and ensure there is no contact between consumers and delivery personnel.

33. (U) **Heilongjiang officials reiterate financial support for businesses:** Officials on February 17 continued to reassure businesses that the province is committed to providing financial support for all businesses to resume normal operations as soon as possible. While the province is committed to assisting all enterprises, Heilongjiang Banking and Insurance Regulatory Bureau said the priority was to support production of medical supplies and PPEs. Officials pledged that provincial banks would implement flexible lending policies and delay loan repayment deadlines.

34. (U) **Suihua and Harbin begin disinfection campaign:** Suihua, Heilongjiang launched a campaign to spray disinfectant throughout the city, focusing its efforts mostly on areas with high number of confirmed cases. According to officials, the city sanitation service center on February 14 dispatched more than 40 vehicles and more than 400 staff members equipped with 20 pulse smoke and water mist dual-use disinfection machines, 150 electronic spray sterilizers and two high-altitude dust suppression vehicles throughout the city. Harbin on February 15 also disinfected several apartment complexes using drones (Note: As of February 18, at A.M. local time, Suihua reported 46 confirmed cases and 4 deaths. Harbin reported 190 confirmed cases and 3 deaths. End Note).

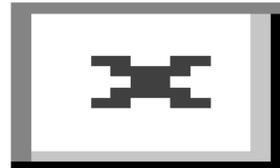
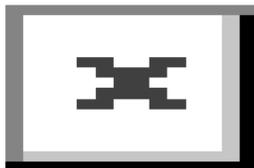


Image: Suihua sanitation service sprays disinfectant *Image: Harbin deploys drones to spray disinfectant*

Jilin

35. (U) **Jilin committed to producing more PPEs:** Jilin Provincial Supervision Bureau said February 17 that the province is reviewing and approving enterprises applying to begin PPE production at an unprecedented pace. At present, 13 companies in Jilin are applying to produce masks, protective clothing and other medical supplies. Authorities expects that once the currently-under-review enterprises begin production, Jilin could manufacture up to 1.59 million masks and 3900 sets of protective clothing per day

36. ~~(SBU)~~ **Changchun residents can only buy five masks every seven days:** Changchun officials said that starting February 18, due to supply shortage, all residents are required to make online appointments prior to buying masks at pharmacies. Each resident is permitted to purchase no more than five masks every seven days. Each customer will be assigned a specific location and time for pick up in order to prevent unnecessary crowding (Note: Contacts throughout Jilin told ConGenOffs that PPE shortage, particularly masks, is a serious problem. One contact lamented that people are constantly looking for newer and better masks but are left to reusing and recycling old ones due to supply shortage. End Note).

37. ~~(SBU)~~ **Yanji government resumes operation:** Yanji announced that all government services and departments have resumed normal operation since February 17. However, Yanji residents seeking assistance from any department must first make an appointment to prevent crowding, and walk-ins without appointments would be denied. As of February 18, at A.M. local time, Yanji reported 5 confirmed cases and no deaths.

Liaoning

38. (U) **Liaoning to disburse more emergency funds to cities:** People's Bank of China Shenyang branch said February 18 that Liaoning Treasury Department allocated 1.957 billion RMB to fund epidemic prevention efforts. The Bank noted that all funds will be disbursed immediately to city, district and county governments. Since the Chinese New Year holiday, Liaoning Treasury already disbursed 1.028 billion RMB to local officials.

~~(SBU)~~ COVID-19 DEVELOPMENTSBeijing

39. ~~(SBU)~~ **Hubei Strengthens Closed Management Measures:** Hubei February 16 announced new closed management measures restricting movement, including closing all non-essential public venues and expanding restrictions on all non-emergency vehicles province wide. [Note: The circular announcing the new restrictions said prevention and control measures are at a "critical stage," quoting a February 15 statement by National Health Commission Vice-Minister Wang Hesheng, dispatched by Beijing February 11 to Wuhan to replace two high-level Hubei Health Commission officials. End Note.] (*Xinhua*)

40. (U) **Beijing Districts Enhance Closed Management Measures After Quarantine Rule:** Several local districts have announced new measures following Beijing's February 14 announcement that all residents returning to the city must report to their neighborhood committee in advance and then self-quarantine for 14 days. Chaoyang district—which includes the Embassy and housing for many Mission personnel—has placed notices on gates of

residential buildings regarding the rule. Returning residents can choose to self-quarantine at home or a designated facility. Those showing symptoms are transferred to a designated hospital. Daxing district has established 34 locations capable of quarantining 2,429 returning residents, and Haidian district is using hotels for quarantines. Beijing second- and third-class hospitals February 16 began requiring non-emergency patients to make online appointments. (*China Daily*)

Chengdu

Sichuan

41. (U) On February 17, China announced that a delegation of World Health Organization (WHO) experts will visit Beijing, Guangdong, and Sichuan starting on February 17. According to the Global Times, authorities chose Sichuan “in part due to the positive cooperation between China and the United States in the area of public health in the province” (Comment: Our Consulate was surprised by the selection of Sichuan. We are not aware of a greater level of U.S.-China public health cooperation in Sichuan than in other regions of the country. End comment.)

42. (U) In a February 19 press release, the Chengdu municipal government mandated that individuals returning from ten provinces must register, undergo a health screening, and self-quarantine themselves for 14 days before resuming work. The ten provinces are: Hubei, Guangdong, Henan, Zhejiang, Hunan, Anhui, Jiangxi, Beijing, and Chongqing.

43. (U) During a February 14 inspection of epidemic response and rural economic development in Suining, Sichuan Party Secretary Peng Qinghua outlined the following priorities for the provincial government:

- Work harder to prevent and control COVID-19.
- Help farmers with spring plowing.
- Provide employment to migrant workers.
- Encourage businesses to resume operations.
- Introduce practical measures to support rural enterprises.
- Arrange chartered buses to transport migrant workers to their job sites.
- Instruct rural clinics to provide a “health certificate” which employers can use to verify migrant workers’ health status.

44. (U) Sichuan’s COVID-19 Epidemic Response Command released staggered dates for migrant workers to apply for health certificates. Workers from “areas with sporadic cases” and “areas with sporadic cases and current infections” can apply for health certificates on February 19 and February 22, respectively. Workers from areas of Sichuan with greater concentrations of cases are not eligible to apply for health certificates to return to work at this time.

45. (U) On February 18, Sichuan’s COVID-10 Epidemic Response Command issued a notice

announcing the creation of a designated task force to facilitate rural migrant workers' return to their places of work in Guangdong and Zhejiang provinces. The task force will include senior leaders from Sichuan's Human Resource Department, Health Commission, Employment Bureau, Transportation Department, Economic Cooperation Bureau, and China Railway Chengdu Bureau Group. The notice mentions that Sichuan has reached agreements with Guangdong and Zhejiang provinces about the return of rural migrant workers.

Chongqing

46. (U) On February 17, the Chongqing municipal government released a statement touting its expanding efforts to administer RNA tests to cover all close contacts of potential COVID-19 cases "in order to adhere to the early detection and early treatment strategy." A decision by Hubei authorities to begin using clinical diagnosis, rather than RNA testing, led to a spike of fifteen thousand new cases on February 13.

47. (U) Chongqing Party Secretary Chen Min'er reiterated the "double victories" of defeating COVID-19 and achieving the city's economic goals while chairing a February 16 meeting. Chen underlined the following priorities:

- Strengthen clinical screening for asymptomatic COVID-19 carriers.
- Speed up the examination of suspected cases.
- Promote both announced and unannounced inspections of epidemic prevention/control sites, including private enterprises.
- Prevent epidemic outbreaks from occurring as a result of businesses returning to work.
- Promote local consumption.
- Reduce the burdens of foreign enterprises in Chongqing.
- Increase propaganda work.

48. (U) In a public announcement on epidemic prevention and control measures, Chongqing Party Secretary Chen Min'er announced the city's new "Three Stricts" campaign:

- Chongqing should implement the strictest measures for epidemic prevention and control in enterprises.
- Chongqing should implement the strictest system for workplace responsibility.
- Chongqing should implement the strictest supervision and inspection processes.

49. (U) Chongqing dispatched its tenth aid team to Hubei, consisting of 40 healthcare workers and 5 "professionals from relevant fields."

Yunnan

50. (U) During a February 17 meeting with senior officials from Yunnan's COVID-19 Epidemic Response Command, Yunnan Party Secretary Chen Hao stressed the need to implement "parallel processes" of simultaneously resuming work while continuing epidemic response efforts.

Guizhou

51. (U) On February 17, Guiyang issued additional epidemic response measures for public transportation, residential communities, and commercial business spaces. Some measures are similar to previous announcements, and include:

1. Only residents may enter and leave residential developments. When leaving, all persons must wear a mask, have their temperature taken, and scan a QR code linking them to the Guiyang City Epidemic Prevention and Control Information Registration Platform. Non-residents need to seek prior approval before entering and pass temperature screenings.
2. People may not visit friends or relatives, participate in group gatherings or parties, and should avoid crowded public places and wear appropriate PPE.
3. All citizens must assist authorities with screening and prevention measures.
4. Citizens should report to authorities anyone arriving from other regions or provinces, particularly regions with high infection rates.
5. Persons showing any symptoms should wear a mask and seek medical assistance at an appropriate medical facility.
6. Property managers and real estate companies must implement strict sterilization measures on a 24/7 hour basis. Those that fail to comply will be blacklisted. Sub-district communities must establish inspection groups to implement their own control and monitoring measures around the clock.
7. Landlords and residential owners must establish contactless, sanitized delivery procedures for tenants to receive supplies.
8. All building maintenance is to halt, except for urgent repairs. Maintenance personnel must receive temperature screenings prior to commencing repairs.

52. (U) Local media reports featured an announcement by Guizhou Provincial People's Hospital that its last two COVID-19 patients had been discharged on February 17.

Guangzhou

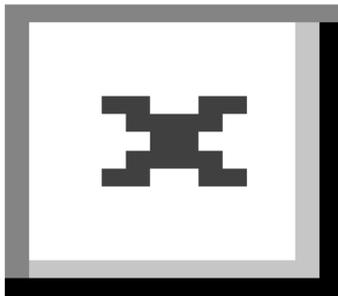
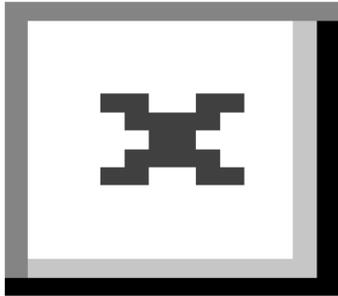
53. ~~(SBU)~~ ConGen staff observed no significant change at seven hospitals designated by Guangdong health authorities to receive COVID-19 patients during February 17 windshield observations. There were no lines at fever clinic entrances. Outpatient entrances at two hospitals had short lines similar to ones observed February 14. The atmosphere was calm at all facilities, and security posture was normal.

54. (U) The Guangzhou notary office will modify its facemask distribution system effective February 15, according to press. Rather than a daily lottery system that citizens had criticized as unfair, the city will move to a 10-day cycle in which registered residents can enter their names to win 10 masks once every 10 days.

55. (U) The Guangdong Provincial Public Security Department (GDPSD) said in a February 16 press conference the GDPSD had enforced strong measures against wildlife markets and will investigate and severely punish violators. The GDPSD asked the public to report any illegal trade of wildlife or wildlife products.

56. (U) According to Guangdong authorities, there are currently 66 companies in the province producing 4.11 million face masks and 18 companies producing 17,000 protective suits a day.

57. (U) As of 12:00 p.m. local, cumulative case incidence stood at: Guangdong - 1322 (339 in Guangzhou), Fujian - 290, Guangxi - 238, Hainan - 162 (Deaths: Guangdong - 4, Hainan - 4, Guangxi -2). South China Case Tracker:



(U) INTERNATIONAL ASSISTANCE

58. (U) Over 30 countries around the world have announced donations of money and products, mainly PPE, to help China face the outbreak.

(U) THIRD COUNTRY RESPONSE EFFORTS AND INTERNATIONAL TRAVEL

59. (U) The International Air Transport Association (IATA) updated its list of countries with China-related travel restrictions to 56 countries (Figure 4).

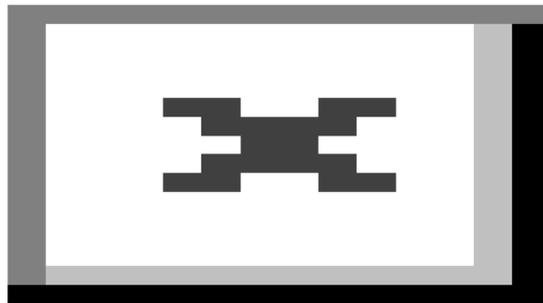


Figure 4. IATA lists six countries with outright bans on travelers coming from China or holding China-issued passports (red), 39 countries with conditional bans, typically limited to travelers who were in China in the previous 14 days (orange), and another 10 countries that have rescinded visa privileges like visa-free entry (yellow).

Chengdu

60. (U) Civil aviation is still operating from **Chengdu**, though with decreased viable flights for USG personnel to depart Chengdu for the United States. Viable transit destinations remaining include Bangkok, Kuala Lumpur, Seoul, and Hong Kong.

Guangzhou

61. (U) As of 10:30 a.m. local, approximately 259 international flights in the next seven days operate on approximately 58 direct routes from South China to foreign destinations, including to the United States, United Kingdom, Amsterdam, Singapore, Russia, Malaysia, Canada, New Zealand, Japan, Korea, Australia, France, Ethiopia, Vietnam, Cambodia, Thailand, Philippines, Bangladesh, Myanmar, Netherlands, Nepal, and Sri Lanka. In addition to Guangzhou (34), this includes routes from Shenzhen (5), Haikou (1), Fuzhou (2), Xiamen (14), and Nanning (2). Guilin currently has no international routes operating. South China's major cities also maintain flight connections or train routes to major Chinese cities for onward international travel. **See**

attached spreadsheet for details. As of February 18, some 24 daily “transit” ferries from seven Pearl River Delta ports direct to the Hong Kong airport for ticketed passengers continue to operate. Ticketed passengers are “in transit” and are exempt from Hong Kong mandatory quarantine for Mainland arrivals.

Shenyang

62. (U) **China Southern reduces flights to Tokyo:** China Southern announced that flights to Tokyo has been reduced from five to four times per week and will be further reduced next week to three times per week. In total, U.S. citizens choosing to depart northeast China out of Shenyang will have 22 international flights to choose from the week of February 17, and 21 flights starting the week of February 24.

(U) ECONOMIC AND SUPPLY CHAIN IMPACT

63. (U) **Retail Supply Chains See Upcoming Shortages:** A major global retailer shared on Monday, February 17 that while it was still able to supply its stores across China (with the exception of Hubei) with daily needs, items in particularly high demand included rice, milk powder, infant formula and instant noodles. Also, fresh pork and poultry were no longer available, with stores being supplied with only frozen products. The contact shared growing concern that without a return to more normal supply chain operations from suppliers in the coming one to two weeks, shortages would likely begin to develop. Two challenges were cited: 1) new movement and quarantine restrictions on workers, and 2) delivery issues to small towns and rural areas in the “last mile.” Separately, while retail prices have remained high but stable over the past several days, at least one major Chinese retailer is offering coupons for 10-yuan free with a 90-yuan purchase.

64. (U) U.S. food and agricultural export groups report that they have postponed or cancelled market promotion activities across China thru late May.

65. (U) China’s Ministry of Finance announced that financial authorities at all levels had allocated nearly \$13 billion in subsidies to support epidemic prevention and control efforts across the nation.

66. (U) The General Administration of China Customs (GACC) issued 10 measures Sunday to support foreign enterprises in resuming business and limiting the impact of the outbreak. The measures included simplifying registration and filing procedures, accelerating inspections, expediting the release of needed materials, granting import permissions for agricultural products, reducing quarantine examination and approval times, and performing bureaucratic approvals simultaneously.

67. (U) The State Administration for Market Supervision (SAMR), the National Medical Products Administration (NMPA), and the National Intellectual Property Administration (CNIPA) also issued 10 measures to support the resumption of business and production, including expediting patents for COVID-19 prevention and treatment, suspending deadlines, and extending and restoring IP rights.

68. (U) China's National Development and Reform Commission (NDRC), Ministry of Transportation (MOT), and Ministry of Agriculture and Rural Affairs (MARA) issued a joint statement encouraging local governments to issue supportive measures to allow enterprises, involving feed and livestock and poultry slaughtering and processing, to resume work, without imposing restrictions such as examinations or approvals. Priority should be given to ensuring the demand for personnel protection materials and the supply of water, electricity and gas in the enterprises, the statement said. It also urged the correction of some inappropriate practices, such as blocking roads in some villages, townships and counties.
69. (U) Xinhua reported that the BRICS New Development Bank (NDB) would provide an unspecified amount of emergency financing to Hubei, Guangdong, and Henan Provinces.
70. (U) A PRC-government-affiliated think tank contact told EmbOffs the outbreak was likely to delay China's imports from the United States since many enterprises still had not resumed operations. The contact also warned about the impact to U.S. tourism industry revenues given flight cancellations and quarantine requirements on travelers from China.
71. (U) A Securities Times report said online advertising revenue had grown during the outbreak as consumers engaged in video gaming, short videos, and online education. Industry experts said they expected the "internet television industry" to benefit, as well.
72. (U) Industry insiders told Global Times that foreign business like KFC and Starbucks were likely to report profit declines of 50 percent or more.
73. (U) Apple said the outbreak would prevent it from reaching its first quarter revenue target. The company said that while its operations throughout China outside of Hubei had resumed, albeit at a reduced pace, global iPhone supply would be "temporarily restricted." Caixin Global reported that iPhone manufacturer Foxconn was having difficulty staffing its factory floor as workers returning to Beijing had to quarantine at home for 14 days. A survey of U.S. companies revealed 41 percent saw staffing as their top concern for resuming operations, while 30 percent said logistics was their main worry.
74. (U) The Ministry of Public Security reported that some illicit supply chains were still operating, as officials confiscated 16.3 million counterfeit and inferior masks. Officials were dealing with hundreds of cases of counterfeit and inferior products, drugs, medical devices, and PPE.
75. (U) DOMOTEX Asia/CHINAFLOOR (the leading flooring exhibition in the Asian-Pacific region and the second largest flooring show worldwide) became the latest in a series of expos to postpone or cancel because of the COVID-19 outbreak. The International Trademark Association (INTA) confirmed that its upcoming 2020 Annual Meeting, the world's largest gathering of IP practitioners with over 10,000 delegates annually and set to take place at the end of April in Singapore, would be relocated to the United States take place in either May or June.
76. (U) A Tsinghua University report said delays in production were among the most prominent concerns of companies. From February 15, less than 27 percent of these companies said they

could survive more than a month if they did not resume production quickly, with 26 percent of companies able to last even a week. Companies reported that they needed a week to a month to resume full operations, further weighing on their operation costs. About 23 percent of interviewed companies still say their cash flows would be drained within three months.

77. (U) National Energy Administration (NEA) statistics showed 996 of China's coal mines were in operation as of February 13, up 138 percent from the number open on February 1. The NEA said China's coal stockpile for power plants could cover 24 days, while Hubei's coal stockpile could cover 41 days.

Chengdu

Chongqing

78. (U) In Chongqing's Liangjiang New Area, 175 large industrial companies have resumed production, with nearly 60 percent of employees back at work, according to official statistics. An additional 388 companies in the area implementing strict epidemic prevention and control measures are also allowed to operate.

79. (U) From February 11-14, Chongqing's Municipal Epidemic Prevention and Control Working Group undertook a round of unannounced "inspection and supervision" visits of private enterprises in the city to ensure strict compliance with the cities' epidemic response measures. Inspection teams also followed up on any issues found during previous rounds of inspections.

Yunnan

80. (U) In a February 17 press release, the Yunnan government announced major infrastructure projects in the project have resumed work, including those aimed at improving connectivity with Southeast Asian countries. The Yunnan Construction Investment Group has reportedly resumed work on 30 projects, including three highway projects and two citizen relocation projects (likely tied to poverty alleviation initiatives).

Guangzhou

81. (U) The first post-holiday China-Europe "block train" (中欧班列, a scheme under which three freight lines connect China and Europe via Russia, Mongolia, and Kazakhstan) departed Dongguan, Guangdong February 14, carrying made-in-Guangdong circuits, telecom equipment, ATMs, and vacuum cleaners, according to press reports. The shipment was due to reach Kaluga in western Russia in 15 days. Resumption of block train service – delayed amid the outbreak – represents a return of rail trade under the One Belt, One Road umbrella.

82. ~~(SBU)~~ Shenzhen-based real estate developer Evergrande said February 16 it would discount residential sales prices across China by 25 percent through February 29, with the discount continuing at lower rates after that. The company announced additional discounts for buyers paying more cash up front, and – perhaps in a sign that people are hesitant to move into full buildings amid outbreak fears – discounts for units in buildings with high ownership rates.

83. ~~(SBU)~~ South China agricultural activity resumed haltingly during the week of February 10-14, contacts told ConGen staff. Distributors and retailers are struggling with logistic slowdowns and depressed customer foot traffic. For bulk agricultural commodities, domestic logistic networks are not fully online and only 30 percent of flour mills had resumed processing. While livestock feed companies had resumed production, they are increasing sales prices to their customers given higher input and transport costs, according to contacts. In an effort to boost farm level poultry prices and overall supply chain operation, on February 10 the Guangdong Department of Agriculture began issuing transport certificates to large broiler producers and other agricultural players to help them bypass road blockages and make "last mile" deliveries.

84. (U) As of February 15, Guangzhou travel agencies had cancelled 12,466 domestic and overseas tours involving 214,500 people. At least 59 mid-range and luxury hotels in Guangzhou had suspended business amid low demand, and eight major domestic and international sporting events in the city had been cancelled, according to [press reports](#).

85. (U) The Guangzhou branch of the People's Bank of China, along with other Guangdong financial authorities, directed banks January 30 to stabilize critical financial infrastructure and provide liquidity to companies, according to press reports. Industrial and Commercial Bank's Guangdong branches, for example, increased cash inventory to meet emergency customer needs, dispatched personnel to monitor ATMs for banknote shortages and equipment failures, supplied ATMs with RMB 3 billion in banknotes via 15,000 operations between January 24 and February 5, and ensured that cash reached hospitals and other key entities. Financial institutions ramped up digital services, with Guangzhou-based Nanyue Bank and others developing new online platforms and directing branches to serve customers remotely.

86. (U) Guangdong authorities directed banks to help companies resume operations via loan restructuring and extension, non-repayment of some principal and interest, and exemption from interest penalties, according to press reports. The government also directed banks to streamline credit approval. Agricultural Development Bank's Guangdong branch, for example, identified 118 companies to assist, and fast-tracked RMB 355 million to five of them within two days. Construction Bank's Guangdong branch took just one day to issue a RMB 55 million loan for the Sun Yat-sen University-linked Daan Genome Company to produce virus testing kits. For its part, Agricultural Bank's Guangdong branch unveiled 10 support measures for SMEs, including preferential interest rates and faster access to credit.

Shanghai

87. ~~(SBU)~~ **Many Shanghai businesses remain closed or have office employees working from home.** Governments in many cities, including Shanghai, Hangzhou, and Suzhou, require businesses to implement epidemic control measures, to file two to three days in advance for approval to reopen, and to certify that returnees from impacted areas self-quarantine for 14 days.

88. ~~(SBU)~~ **The auto sector has been particularly hard hit by supply chain disruptions.** General Motors resumed limited production at its Shanghai plant on February 16, while its plant in Hubei Province remains closed. A contact from Fiat Chrysler Automobiles told CongenOff that its plants in Hangzhou and Guangzhou reopened on February 17, but that it has not yet received approval to reopen its production facility in Changsha, Hunan Province. Hangzhou-

based Geely Auto Group is gradually reopening its production facilities from February 15 through February 25, but does not expect its plant in Taizhou to open until March 1, according to a contact from Geely.

89. ~~(SBU)~~ **Contacts from U.S. and European healthcare companies have reported that the lack of cargo flights to and from China is negatively affecting their supply chain**, raising both the cost and time associated with importing materials used in their production facilities.

90. (U) The government of Jiashan, a county-level district of Jiaxing in Zhejiang Province, paid two-thirds of the cost of a chartered flight to bring back 154 workers from Sichuan so local companies can resume operations.

Shenyang

91. ~~(SBU)~~ **Contact says Neusoft sales dipped:** Contact at Neusoft, a company that manufactures CT scans, told ConGenOff February 18 that supply chains have not yet had an impact on their operations, since most of their orders were received prior to the virus outbreak and the company still had ample stock of backup inventories in the city. However, contact said that their sales department had suspended their operation. Though it is still too soon to know exact figures, contact noted that sales have certainly dipped since the virus outbreak, not because their production capacity had reduced, but many of their clients and customers have not yet resumed operations and placed new orders.

~~(SBU)~~ **SUPPORT FOR U.S. CITIZENS**

Chengdu

92. ~~(SBU)~~ As of February 18, Chengdu ACS has been informed that an AmCit who had been ordered to quarantine in Yunnan was released. The AmCit has not tested positive for COVID-19. Post has seen an overall decline in passport applications since the outbreak. Chengdu's ACS unit remains open and able to serve the American community at large.

Guangzhou

93. ~~(SBU)~~ There are no known COVID-19 cases of American citizens in Guangdong, Fujian, Guangxi, or Hainan. Since the State Department issued a travel advisory related to coronavirus, Guangzhou ACS has received six inquiries about repatriation assistance. One American received a repatriation loan and has returned to the United States, one self-funded his repatriation, and four cases remain active. Passport demand remains low, with far fewer appointments for minor passport renewals, likely due to AmCits and their guardians hoping to avoid exposure to strangers on planes, trains and in the ACS waiting room.

Shanghai

94. ~~(SBU)~~ Over the weekend ACS received no new reports from the Foreign Affairs Office (FAO) of American's being ordered to quarantine. To date, ACS has been informed of a total of 26 cases of American citizens who have been ordered to self-quarantine or sent to a controlled quarantine facility (24 in Shanghai, two in Zhejiang). None of the American citizens currently or previously under orders to self-quarantine have tested positive for COVID-19.

Shenyang

95. ~~(SBU)~~ U.S. citizens in northeast China continue to inquire about travel restrictions, flight status and other routine ACS related issues. One U.S. citizen in Songyuan, Jilin reported difficulty leaving her home because she was unable to read the Chinese writing on the information card which is required by every resident to submit prior to exiting the compound (Note: Songyuan announced during the early stage of the virus outbreak that only person from each family is allowed to leave their home to purchase daily necessities. End Note).

~~(SBU)~~ **POST OPERATIONS**

96. ~~(SBU)~~ There has been no change in post operations for the Embassy or Consulates.

Guangzhou

97. ~~(SBU)~~ No changes to staffing numbers or post security posture. Essential LE staff reported to work February 18, with others on administrative leave. At least one LE staff with travel outside Guangzhou in past seven days was told by the Diplomatic Services Bureau to home-isolate for seven days following return. All LE staff are still required to file daily reports to Diplomatic Services Bureau on their health and work status.

98. ~~(SBU)~~ Supermarkets, public transportation, hospital services, bank, and ride hailing services in Guangzhou are all operating without indications of significant disruption. Staple goods are continuously stocked, including fresh produce, meat, and eggs. ConGenOff has observed inconsistent inventory of some dry goods and frozen prepared foods. Residential water delivery is currently not available for standard delivery, but Post has made arrangements with the vendor to ensure availability. Dine-in restaurant service has been suspended throughout the city since February 13. Delivery and take-out options are abundant. DPO disruptions have been resolved through alternate routing. Automobile traffic in the vicinity of the Consulate is noticeably up the week of February 17 compared to the prior week, with Guangzhou residents opting to drive in order to avoid public transportation.

Shanghai

99. ~~(SBU)~~ Most grocery stores and wet (produce) markets throughout Shanghai appear well stocked and grocery and food delivery services continue to operate. No USDH or LES has reported any difficulty in obtaining fresh/sufficient food. The Shanghai government continues prioritizing a stable food supply.

Shenyang

100. ~~(SBU)~~ No changes to CG Shenyang staffing numbers, operation or posture. While many businesses still remain closed, more small shops and stores returned to work on February 17. Traffic on the road also increased notably compared to last week. Citizen Liaison Volunteers throughout the region reported that markets are orderly and well-stocked.

MEDIA ROUNDUPGuangzhou

101. ~~(SBU)~~ South China PAS media contacts have complained on social media that local

officials are exceeding their authority in the anti-epidemic campaign and are impinging on people’s rights. Others have continued to criticize Hubei for their response to the epidemic, noting that many patients are suffering from a lack of medical resources and adequate medical care.

102. (U) Guangzhou netizens continued to welcome the Guangdong Education Department’s notice that schools will not open before the end of February, hailing this as a way to prevent the spread of the coronavirus. They also discussed: 1) Residents of Baiyun District, Guangzhou will need to fill out health information in the WeChat app “Safe and Healthy Baiyun” including their temperature and whether they have traveled to Hubei. This app will serve as a database of health information which can be used to track suspected cases of COVID. [Note: One LE Staff living in Baiyun was told by their local neighborhood committee that they will not be allowed to leave their residence if they have not submitted information to this program. End Note] and 2) Nanning, Guangxi has started to implement real name registration for passengers of buses and taxis, which sparked concern from netizens about their personal information security.

Shenyang

103. (U) On February 17, Heilongjiang Provincial COVID-19 Leading Workgroup issued a notice to implement new control measures in key epidemic areas in the province. The notice applied to 12 counties in Heilongjiang with 10 or more confirmed COVID-19 cases and mandated new regulations including entry and exit checkpoints, closed management enforcement, bans on family gatherings and 14-day quarantine requirements for outsiders. News about the notice quickly went viral on social media platforms in Northeast China under the hashtag #Heilongjiang Epidemic Implementation of 9 Strict Articles#. By February 18, it had become a top trending topic on Weibo with a viewership of over 43 million and more than 1,400 comments. At the same time, another related topic began trending under the hashtag #Focus on COVID19 situation in Heilongjiang# that allowed netizens to post updates and news items about Heilongjiang’s epidemic crisis. By February 18, it had received more than 110 million views and 14,000 comments. Most netizens expressed mixed opinions on the issues. Some comments conveyed skepticism or critical views on the local government’s ability to control the situation, while others supported the government’s response and called for unity. Many netizens also voiced deep concerns about the epidemic situation in Heilongjiang and called for stricter implementation of measures in rural areas. The following additional topics were also trending on social media sites in Northeast China: 1) Jilin donates 600 boxes of ginseng to assist with Wuhan relief efforts, 2) Police Officer Wang Chuntian honored with hero award, and 3) COVID-19 research indicates 4.95 days from onset to diagnosis.

~~SENSITIVE BUT UNCLASSIFIED~~

Signature: Branstad

Drafted By: BEIJING:Multiple Mission China Drafters

Cleared By: ESTH:(b)(6)

ESTH:

ECON:

ECON:(b)(6)

ECON:

MGT
 CONS
 RSO
 POL
 USDA/FAS
 DOC/ITA
 MGT/MED
 PD
 HHS/CDC/CGH
 HHS/OGA
 PD

(b)(6)

POL-ECON
 EXEC
 ESTH
 PD
 POL
 POL-ECON
 EXEC
 POL
 BEIJING

Approved By:
Released By:
Info:

SEOUL, AMEMBASSY *ROUTINE*; TAIPEI, AIT *ROUTINE*; HANOI, AMEMBASSY *ROUTINE*; SINGAPORE, AMEMBASSY *ROUTINE*; ULAANBAATAR, AMEMBASSY *ROUTINE*; PHNOM PENH, AMEMBASSY *ROUTINE*; BANGKOK, AMEMBASSY *ROUTINE*; HONG KONG, AMCONSUL *ROUTINE*; MANILA, AMEMBASSY *ROUTINE*; PARIS, AMEMBASSY *ROUTINE*; VLADIVOSTOK, AMCONSUL *ROUTINE*; NATIONAL SECURITY COUNCIL WASHINGTON DC *ROUTINE*; ATLANTA GA, CDC *ROUTINE*; CIA WASHINGTON DC *ROUTINE*; PACOM IDHS HONOLULU HI *ROUTINE*; CHINA POSTS COLLECTIVE *ROUTINE*; ENVIRONMENT SCIENCE AND TECHNOLOGY COLLECTIVE *ROUTINE* CARACAS, AMEMBASSY; ST PETERSBURG, AMCONSUL
 COVID-19 for 20200218 SitRep.pdf, GZ Flight Status for 20200218 COVID-19 Sitrep.xlsx

XMT:
Attachments:

Action Post: NONE
Dissemination Rule: DIS_BIO_STAFF

UNCLASSIFIED

~~SBU~~

DeControlled

Sender:	(b)(6)@state.gov>
Recipient:	ISN-BPS-DL <ISN-BPS-DL@STATE.GOV>

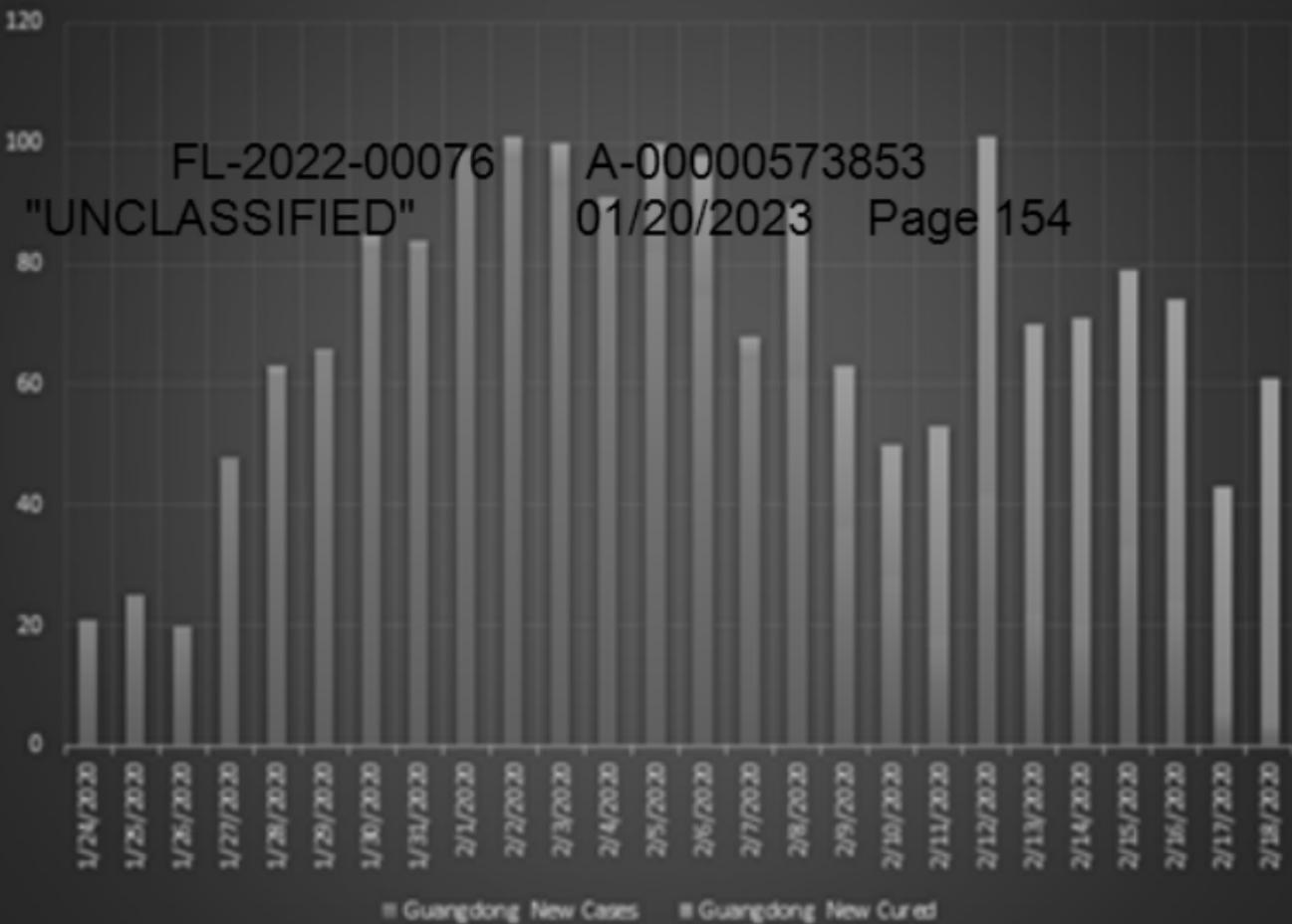


FL-2022-00076 - A-00000573853

"UNCLASSIFIED" 01/20/2023

Page 153

Guangdong Trends: New Cases vs. Cured



FL-2022-00076

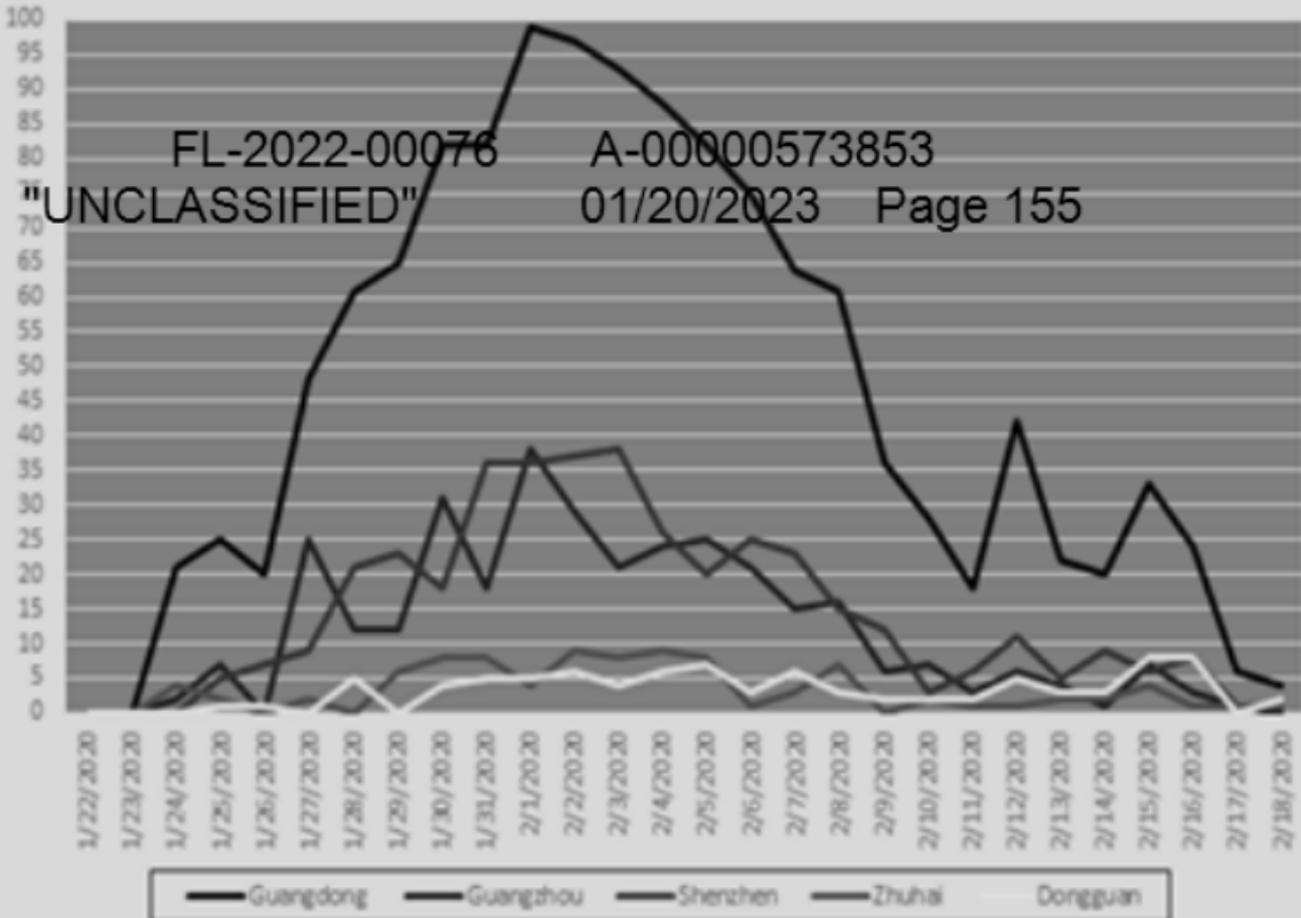
A-00000573853

"UNCLASSIFIED"

01/20/2023

Page 154

South China Case Trends: New COVID-19 Cases Over Time



FL-2022-00076

A-00000573853

"UNCLASSIFIED"

01/20/2023

Page 155

Countries with China-related Travel Restrictions

FL-2022-00076

A-00000573853

"UNCLASSIFIED"

01/20/2023

Page 156



Vital Surveillances

The Epidemiological Characteristics of an Outbreak of 2019 Novel Coronavirus Diseases (COVID-19) — China, 2020

The Novel Coronavirus Pneumonia Emergency Response Epidemiology Team

Abstract

Background: An outbreak of 2019 novel coronavirus diseases (COVID-19) in Wuhan, Hubei Province, China has spread quickly nationwide. Here, we report results of a descriptive, exploratory analysis of all cases diagnosed as of February 11, 2020.

Methods: All COVID-19 cases reported through February 11, 2020 were extracted from China's Infectious Disease Information System. Analyses included the following: 1) summary of patient characteristics; 2) examination of age distributions and sex ratios; 3) calculation of case fatality and mortality rates; 4) geo-temporal analysis of viral spread; 5) epidemiological curve construction; and 6) subgroup analysis.

Results: A total of 72,314 patient records—44,672 (61.8%) confirmed cases, 16,186 (22.4%) suspected cases, 10,567 (14.6%) clinically diagnosed cases (Hubei Province only), and 889 asymptomatic cases (1.2%)—contributed data for the analysis. Among confirmed cases, most were aged 30–79 years (86.6%), diagnosed in Hubei (74.7%), and considered mild (80.9%). A total of 1,023 deaths occurred among confirmed cases for an overall case fatality rate of 2.3%. The COVID-19 spread outward from Hubei Province sometime after December 2019, and by February 11, 2020, 1,386 counties across all 31 provinces were affected. The epidemic curve of onset of symptoms peaked around January 23–26, then began to decline leading up to February 11. A total of 1,716 health workers have become infected and 5 have died (0.3%).

Conclusions: COVID-19 epidemic has spread very quickly taking only 30 days to expand from Hubei to the rest of Mainland China. With many people returning from a long holiday, China needs to prepare for the possible rebound of the epidemic.

Introduction

A cluster of pneumonia cases of unknown origin in Wuhan, China caused concern among health officials

in late December 2019. On December 31, an alert was issued by the Wuhan Municipal Health Commission, a rapid response team was sent to Wuhan by the Chinese Center for Disease Control and Prevention (China CDC), and a notification was made to the World Health Organization (WHO) (1–4). Likely potential causes including influenza, avian influenza, adenovirus, severe acute respiratory syndrome coronavirus (SARS-CoV), and Middle East respiratory syndrome coronavirus (MERS-CoV) were ruled out. Epidemiological investigation implicated Wuhan's Huanan Seafood Wholesale Market, which was shut down and disinfected, and active case finding was initiated and vigorously pursued (2,4–5).

On January 7, 2020, the causative pathogen was identified as a novel coronavirus, and genomic characterization and test method development ensued (2–6). Now named 2019-nCoV, the virus is distinct from both SARS-CoV and MERS-CoV, yet closely related (5,7). Early cases suggested that COVID-19 (i.e. the new name for disease caused by the novel coronavirus) may be less severe than SARS and MERS. However, illness onset among rapidly increasing numbers of people and mounting evidence of human-to-human transmission suggests that 2019-nCoV is more contagious than both SARS-CoV and MERS-CoV (3,8–11).

On January 20, China's "National Infectious Diseases Law" was amended to make 2019-novel coronavirus diseases (COVID-19) a Class B notifiable disease and its "Frontier Health and Quarantine Law" was amended to support the COVID-19 outbreak response effort. Then, on January 23, the Chinese Government began to limit movement of people in and out of Wuhan, and two days later, it announced its highest-level commitment and mobilized all sectors to respond to the epidemic and prevent further spread of COVID-19. Characterization of the epidemiological features of COVID-19 is crucial for the development and implementation of effective control strategies. Here, we report the results of a descriptive, exploratory analysis of all cases found through February 11, 2020.

Method

Study Design

This study was a descriptive, exploratory analysis of all cases of COVID-19 diagnosed nationwide in China as of the end of February 11, 2020. As such, it in some respects uses a cross-sectional study design and hence, we have used the STROBE Guidelines (www.equator-network.org) to aid our thorough reporting of this observational study.

A public health emergency was declared, and a formal investigation began on December 31, 2019, supported by city (Wuhan Municipal Health Commission and Wuhan CDC), provincial (Health Commission of Hubei Province and Hubei Provincial CDC), and national (National Health Commission and China CDC) authorities and resources. This study was reviewed by the China CDC Institutional Review Board via a fast-track mechanism. Although individual informed consent was not required for this study, all data were handled as a deidentified set to protect patient privacy and confidentiality.

Data Source

By categorizing COVID-19 as a Class B notifiable disease, Chinese law required all cases to be immediately reported to China's Infectious Disease Information System. Entry of each case into the system was performed by local epidemiologists and public health workers who investigated and collected information on possible exposures. All case records contain national identification numbers, and therefore, all cases have records in the system and no records are duplicated. All data contained in all COVID-19 case records in the Infectious Disease Information System through the end of February 11, 2020 were extracted from the system as a single dataset and were then stripped of all personal identifying information. No sampling was done to achieve a predetermined study size and no eligibility criteria were used—all cases were included.

Variables

Patient characteristics were collected at baseline, meaning the time of diagnosis, epidemiological investigation, and entry into the Infectious Disease Information System. Patients were categorized as health workers for the occupation variable if they had active employment of any kind in a health facility (i.e. this category did not just include physicians and

nurses). Patients were categorized as having a Wuhan-related exposure if they had recently resided in or visited Wuhan or if they had close contact with someone who had. The comorbid conditions variable was determined upon epidemiological investigation by patient self-reported medical history, which was not independently verified using medical records for all cases. The severity of symptoms variable was categorized as mild, severe, or critical. Mild included non-pneumonia and mild pneumonia cases. Severe was characterized by dyspnea, respiratory frequency ≥ 30 /minute, blood oxygen saturation $\leq 93\%$, $\text{PaO}_2/\text{FiO}_2$ ratio < 300 , and/or lung infiltrates $> 50\%$ within 24–48 hours. Critical cases were those that exhibited respiratory failure, septic shock, and/or multiple organ dysfunction/failure.

As some variables of interest (i.e., Wuhan-related exposure, comorbid condition, and case severity) are not required fields when creating records in the Infectious Disease Information System, some records have missing data for these variables.

For construction of epidemiological curves, date of onset was defined as the date on which patients self-reported the start of either fever or cough during epidemiological investigation. Cases were categorized as confirmed, suspected, clinically diagnosed (Hubei Province only), or asymptomatic. Confirmed cases were diagnosed based on positive viral nucleic acid test results on throat swab samples (some samples were tested retrospectively). Suspected cases were diagnosed clinically based on symptoms and exposures. Clinically diagnosed cases were suspected cases with lung imaging features consistent with coronavirus pneumonia. Asymptomatic cases were diagnosed based on positive viral nucleic acid test results but without any COVID-19 symptoms (e.g., fever, dry cough). The date of positive viral nucleic acid test result is used as onset date for asymptomatic cases

Analysis

For confirmed cases, demographic and clinical characteristics were summarized using descriptive statistics. Age distribution graphs were constructed using patient age at baseline for confirmed cases diagnosed in Wuhan, Hubei Province (including Wuhan), and China (including Hubei Province). Sex ratio (i.e., male:female [M:F] ratio) was also calculated. Case fatality rates were calculated as the total number of deaths (numerator) divided by the total number of cases (denominator), expressed as a percent. Observed time was summarized using person-days (PD) and

mortality was calculated as the number of deaths (numerator) divided by the total observed time (denominator), expressed per 10 PD.

For geo-temporal analysis, the county-level location of each case at time of diagnosis was used to build color-coded maps of China to indicate the numbers of cases in each province on December 31, 2019; January 10, 2020; January 31, 2020; and February 11, 2020. This analysis was performed using ArcGIS Desktop software (version 10.6; Esri; Redlands, California, USA).

The epidemiological curve for all cases was constructed by plotting the number of cases (y-axis) versus self-reported date of symptom onset (x-axis). Date of symptom onset for confirmed, suspected, clinically diagnosed, and asymptomatic cases were stacked to show total cases over time. The epidemiological curve for confirmed cases was also overlaid with the number of cases versus date of diagnosis to show the delay between onset of symptoms and diagnosis of disease.

Two subgroups were also analyzed separately using epidemiological curves: confirmed cases diagnosed outside of Hubei Province (with and without Wuhan-

related exposure) and all cases diagnosed among health workers (confirmed, suspected, clinically diagnosed, and asymptomatic).

Results

Patients

A total of 72,314 unique records were extracted and data from all records were included in the analysis. Thus, all 72,314 individuals diagnosed with COVID-19 as of February 11, 2020, were included in the analysis. Among them, 44,672 cases (61.8%) were confirmed, 16,186 cases (22.4%) were suspected, 10,567 cases (14.6%) were clinically diagnosed, and 889 cases (1.2%) were asymptomatic.

Baseline characteristics of confirmed cases (n=44,672) are presented in Table 1. A majority were aged 30–69 years (77.8%), male (51.4%), farmers or laborers (22.0%), and diagnosed in Hubei Province (74.7%). Most patients reported Wuhan-related exposures (85.8%) and were classified as mild cases (80.9%).

TABLE 1. Patients, deaths, and case fatality rates, as well as observed time and mortality for n=44,672 confirmed COVID-19 cases in Mainland China as of February 11, 2020.

Baseline Characteristics	Confirmed Cases, N (%)	Deaths, N (%)	Case Fatality Rate, %	Observed Time, PD	Mortality, per 10 PD
Overall	44,672	1,023	2.3	661,609	0.015
Age, years					
0–9	416 (0.9)	–	–	4,383	–
10–19	549 (1.2)	1 (0.1)	0.2	6,625	0.002
20–29	3,619 (8.1)	7 (0.7)	0.2	53,953	0.001
30–39	7,600 (17.0)	18 (1.8)	0.2	114,550	0.002
40–49	8,571 (19.2)	38 (3.7)	0.4	128,448	0.003
50–59	10,008 (22.4)	130 (12.7)	1.3	151,059	0.009
60–69	8,583 (19.2)	309 (30.2)	3.6	128,088	0.024
70–79	3,918 (8.8)	312 (30.5)	8.0	55,832	0.056
≥80	1,408 (3.2)	208 (20.3)	14.8	18,671	0.111
Sex					
Male	22,981 (51.4)	653 (63.8)	2.8	342,063	0.019
Female	21,691 (48.6)	370 (36.2)	1.7	319,546	0.012
Occupation					
Service industry	3,449 (7.7)	23 (2.2)	0.7	54,484	0.004
Farmer/laborer	9,811 (22.0)	139 (13.6)	1.4	137,992	0.010
Health worker	1,716 (3.8)	5 (0.5)	0.3	28,069	0.002
Retiree	9,193 (20.6)	472 (46.1)	5.1	137,118	0.034
Other/none	20,503 (45.9)	384 (37.5)	1.9	303,946	0.013

TABLE 1. (continued)

Baseline Characteristics	Confirmed Cases, N (%)	Deaths, N (%)	Case Fatality Rate, %	Observed Time, PD	Mortality, per 10 PD
Province					
Hubei	33,367 (74.7)	979 (95.7)	2.9	496,523	0.020
Other	11,305 (25.3)	44 (4.3)	0.4	165,086	0.003
Wuhan-related exposure*					
Yes	31,974 (85.8)	853 (92.8)	2.7	486,612	0.018
No	5,295 (14.2)	66 (7.2)	1.2	71,201	0.009
Missing	7,403	104	2.8	103,796	0.010
Comorbid condition†					
Hypertension	2,683 (12.8)	161 (39.7)	6.0	42,603	0.038
Diabetes	1,102 (5.3)	80 (19.7)	7.3	17,940	0.045
Cardiovascular disease	873 (4.2)	92 (22.7)	10.5	13,533	0.068
Chronic respiratory disease	511 (2.4)	32 (7.9)	6.3	8,083	0.040
Cancer (any)	107 (0.5)	6 (1.5)	5.6	1,690	0.036
None	15,536 (74.0)	133 (32.8)	0.9	242,948	0.005
Missing	23,690 (53.0)	617 (60.3)	2.6	331,843	0.019
Case severity‡					
Mild	36,160 (80.9)	–	–	–	–
Severe	6,168 (13.8)	–	–	–	–
Critical	2,087 (4.7)	1,023 (100)	49.0	31,456	0.325
Missing	257 (0.6)	–	–	–	–
Period (by date of onset)					
Before Dec 31, 2019	104 (0.2)	15 (1.5)	14.4	5,142	0.029
Jan 1–10, 2020	653 (1.5)	102 (10.0)	15.6	21,687	0.047
Jan 11–20, 2020	5,417 (12.1)	310 (30.3)	5.7	130,972	0.024
Jan 21–31, 2020	26,468 (59.2)	494 (48.3)	1.9	416,009	0.012
After Feb 1, 2020	12,030 (26.9)	102 (10.0)	0.8	87,799	0.012

Abbreviation: PD, person-days.

* The Wuhan-related exposure variable, only includes a total of 37,269 patients and 919 deaths and these values were used to calculate percentages in the confirmed cases and deaths columns.

† The comorbid condition variable, only includes a total of 20,812 patients and 504 deaths and these values were used to calculate percentages in the confirmed cases and deaths columns.

‡ The case severity variable, only includes a total of 44,415 patients and 1,023 deaths and these values were used to calculate percentages in the confirmed cases and deaths columns.

Deaths, Case Fatality Rates, and Mortality

As shown in Table 1, a total of 1,023 deaths have occurred among 44,672 confirmed cases for an overall case fatality rate of 2.3%. Additionally, these 1,023 deaths occurred during 661,609 person-days (PD) of observed time, for a mortality rate of 0.015/10 PD.

The ≥80 age group had the highest case fatality rate of all age groups at 14.8%. Case fatality rate for males was 2.8% and for females was 1.7%. By occupation, patients who reported being retirees had the highest case fatality rate at 5.1%, and patients in Hubei Province had a >7-fold higher case fatality rate at 2.9%

compared to patients in other provinces (0.4%). While patients who reported no comorbid conditions had a case fatality rate of 0.9%, patients with comorbid conditions had much higher rates—10.5% for those with cardiovascular disease, 7.3% for diabetes, 6.3% for chronic respiratory disease, 6.0% for hypertension, and 5.6% for cancer. Case fatality rate was also very high for cases categorized as critical at 49.0%.

Age Distribution and Sex Ratio

The age distribution of cases in Wuhan only, in Hubei Province overall, and in China overall are

presented in Figure 1. The proportion of confirmed cases 30–79 years of age at baseline (i.e., date of diagnosis) was 89.8% for cases in Wuhan city versus 88.6% in Hubei overall (which includes Wuhan) and 86.6% in China overall (which includes Hubei Province and all 30 other provincial-level administrative divisions, or PLADs). The male-to-female ratio was 0.99:1 in Wuhan, 1.04:1 in Hubei, and 1.06:1 in China overall.

Geo-Temporal Findings

On January 19, 2020, National Health Commission of the People’s Republic of China confirmed that Guangdong Provincial CDC reported first imported cases of COVID-19, via the Chinese Infectious Diseases Reporting System. This was the first time COVID-19 had been reported outside of Hubei Province via the System. As of January 22, 2020, a total of 301 confirmed COVID-19 cases were reported from 83 counties in 23 provinces. On January 30, 2020, Xizang Autonomous Region (Tibet) reported its first confirmed COVID-19 case coming from Hubei Province. Thus, COVID-19 cases have been reported from all 31 PLADs (Figure 2).

As of February 11, 2020, a total 44,672 confirmed cases were reported from 1,386 counties of 31 provinces, autonomous regions, and municipalities and Hubei Province accounted for 74.7% (Figure 2E). Among them, 0.2% of cases had onset of illness before December 31, 2019 and all were from Hubei Province (Figure 2A); 1.7% had onset of illness during January 1–10, 2020, distributed in 113 counties of 22 PLADs

and Hubei Province accounted for 88.5% (Figure 2B); 13.8% had onset of illness during January 11–20, 2020, distributed in 627 counties of 30 PLADs and Hubei Province accounted for 77.6% (Figure 2C); 73.1% had onset of illness during January 21–31, 2020, distributed in 1310 counties of 31 PLADs and Hubei Province accounted for 74.7% (Figure 2D).

Epidemiological Curve

Figure 3A shows the COVID-19 epidemic curve with number of cases plotted by date of patient onset of symptoms from December 8, 2019 to February 11, 2020. Confirmed, suspected, clinically diagnosed, and asymptomatic cases are stacked to show total daily cases by date of symptom onset. The inset shows that in December 2019 only 0–22 cases/day began to experience symptoms. The peak onset of symptoms for all cases overall occurred on February 1, 2020. Since then, onset of illness has declined.

Figure 3B shows the same COVID-19 epidemic curve for confirmed cases only with number of cases plotted by date of patients’ onset of symptoms from December 8, 2019 to February 11, 2020. These data are overlaid with confirmed cases plotted by date of diagnosis to show the lag between the time patients fall ill and the time they actually are diagnosed and are reported to the Infectious Disease Information System. Although for confirmed cases onset of illness peaked around January 23–27, diagnosis of infection by nucleic acid testing of throat swabs did not peak until February 4.

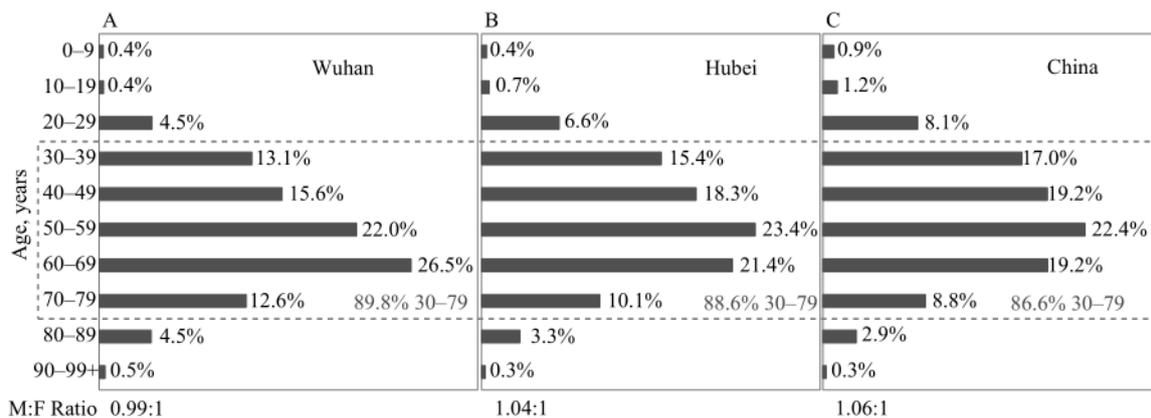


FIGURE 1. Age distribution and sex ratio of all confirmed COVID-19 cases in China through February 11, 2020. (A) patients diagnosed in the city of Wuhan only; (B) patients diagnosed in Hubei Province, which includes Wuhan as its capital city; and (C) patients diagnosed in China overall, including Hubei Province and all 30 other provincial-level administrative divisions (PLADs). Dashed red line highlights the proportion of patients in the 30–79 years age range. Sex ratio (i.e. male-to-female [M:F] ratio) is shown below each graph.

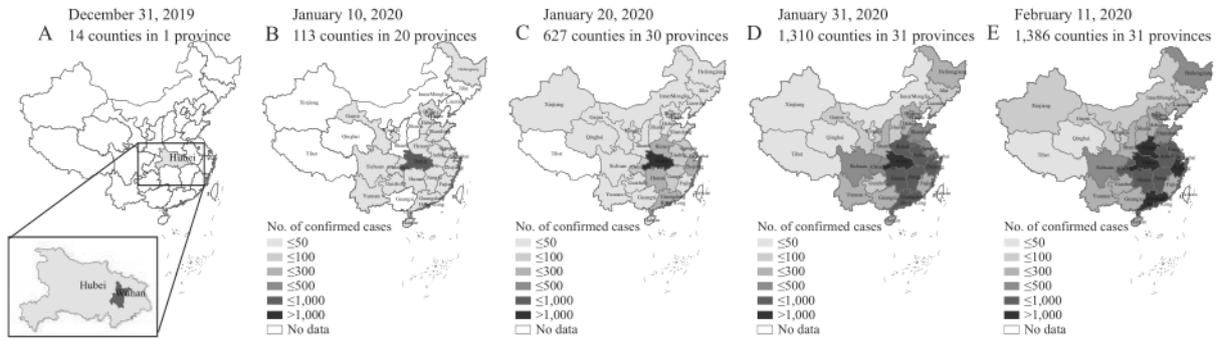


FIGURE 2. Geo-temporal spread of COVID-19 in China through February 11, 2020. (A) a total of 14 county-level administrative areas (hereafter counties) in Hubei Province only (inset) had reported cases as of December 31, 2019; (B) by January 10, 2020, 113 counties in 20 PLADs had reported cases with the highest prevalence still in Hubei Province; (C) nine days later, on January 20, 627 counties in 30 PLADs had reported cases and PLADs neighboring Hubei Province observed increasing prevalence; (D) by the end of January 31, 1310 counties across all 31 PLADs were affected and prevalence in the central, south, and south-central regions had risen dramatically; (E) by the end of February 11, 1,386 counties nationwide were affected and prevalence in the south-central PLADs had risen to the level of Hubei.

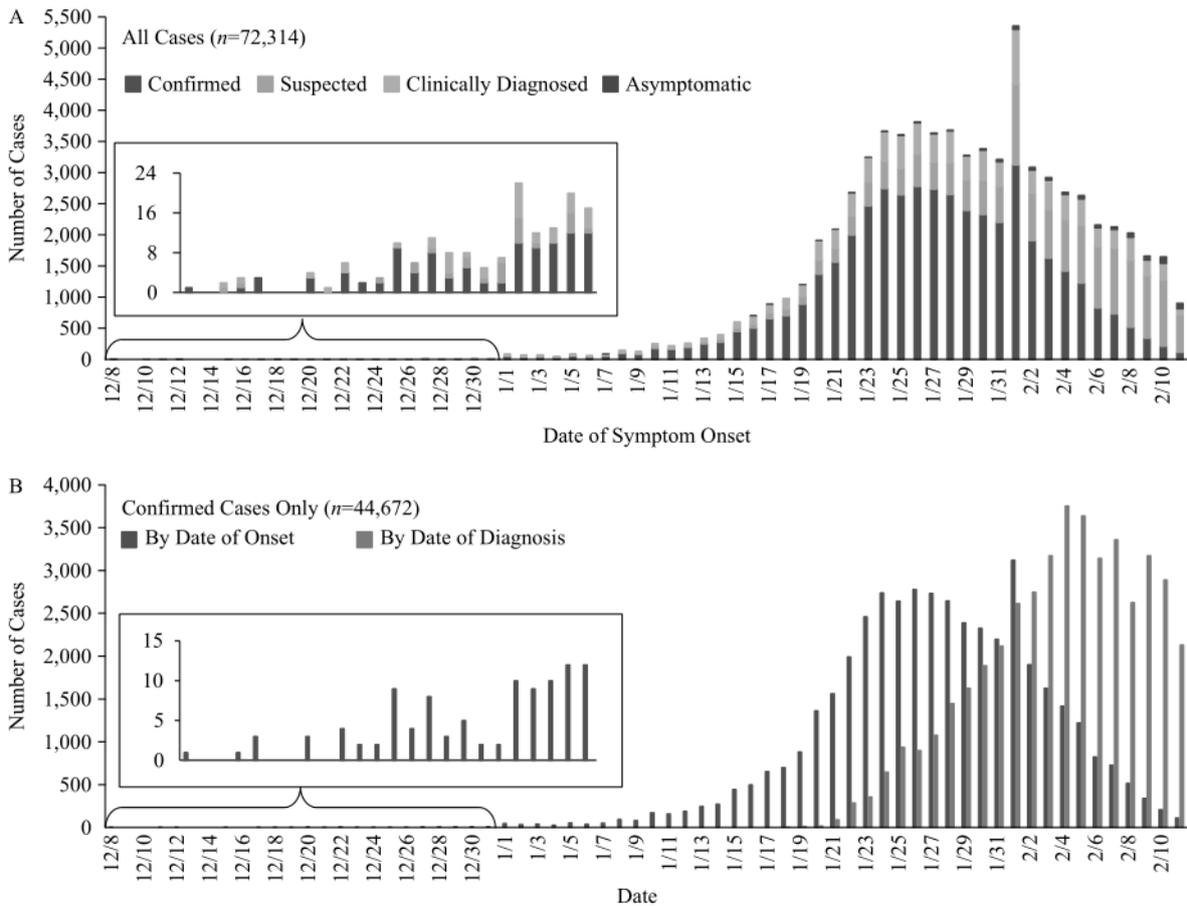


FIGURE 3. Epidemiological curves of COVID-19 in China through February 11, 2020. (A) the epidemiological curve shows the progression of illness in the outbreak over time from December 8, 2019 to February 11, 2020. A total of 72,314 cases are shown and confirmed cases (blue) are compared to suspected cases (green), clinically diagnosed cases (yellow), and asymptomatic cases (red). The inset shows a zoomed-in view of all days in December, when total daily count remained below 24 cases; (B) the epidemiological curve shows the progression of illness in the outbreak over time from December 8, 2019 to February 11, 2020 for confirmed cases only (blue). The number of cases diagnosed each day is also shown for confirmed cases only (orange). The inset shows a zoomed-in view of all days in December, when total daily count remained below 15 cases.

Subgroup Findings

Figure 4 shows the COVID-19 epidemic curve with the number of cases plotted by date of onset of symptoms from December 18, 2019 to February 11, 2020 for two subgroups—confirmed cases found outside of Hubei Province (Figure 4A) and all cases among health workers nationwide (Figure 4B). Peak timing of onset of symptoms among cases outside of Hubei Province occurred on January 27. Most of these cases (85.8%) reported having recently resided in or visited Wuhan or having had close contact with an

infected individual from Wuhan. Peak timing of onset of symptoms among health worker cases occurred on February 1. In the 422 medical facilities serving COVID-19 patients, a total of 3,019 health workers have been infected (1,716 confirmed cases), and 5 have died.

Confirmed cases, case severity, and case fatality rates among health workers in different areas of China and different time periods are presented in Table 2. A total of 1,080 confirmed cases among health workers have been found in Wuhan, accounting for 64.0% of

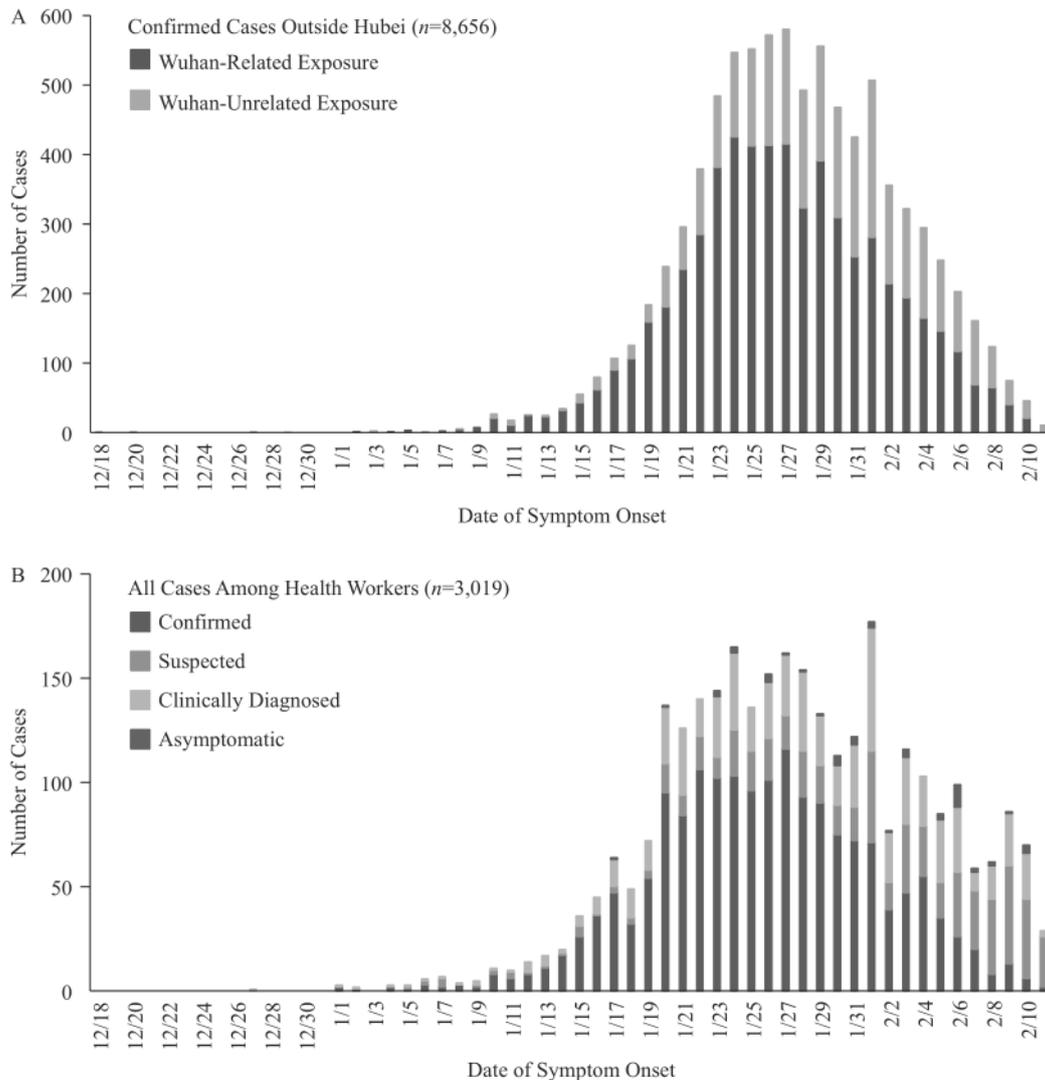


FIGURE 4. Subgroup epidemiological curves of COVID-19 in China through February 11, 2020. (A) subgroup analysis of confirmed cases discovered outside of Hubei Province only. The epidemiological curve shows the progression of illness in the outbreak over time from the onset of symptoms of the first case outside Hubei Province on December 18, 2019 through the end of February 11, 2020. Total confirmed cases outside Hubei Province, and Wuhan-related exposure (dark purple) versus Wuhan-unrelated exposure (light purple), are shown; (B) subgroup analysis of all cases among health workers only. The epidemiological curve shows the progression of illness in the outbreak over time from the onset of symptoms of the first health worker case on December 27, 2019 through the end of February 11, 2020. Total cases among health workers and confirmed (blue) versus suspected (green), clinically diagnosed (yellow), and asymptomatic (red) cases are shown.

national total. An additional 394 health worker cases (23.3%) were found in Hubei Province (excluding Wuhan), and 214 cases (12.7%) were found in the other 30 PLADs. The proportion of health worker cases that were severe or critical was 17.7% in Wuhan, 10.4% in Hubei Province, 7.0% in the remaining 30 PLADs, and 14.6% overall. The proportion of health worker cases in Wuhan classified as severe or critical declined from 38.9% in early January to 12.7% in early February. In China overall, the severe or critical cases among health workers also declined—from 45.0% in early January to 8.7% in early February.

Discussion

A main finding of this characterization and exploratory analysis of the first 72,314 cases of COVID-19 found in China in the 40 days between first recognition of the outbreak of pneumonia with unknown etiology on December 31, 2019 to the end of the study period on February 11, 2020 is that this novel coronavirus is highly contagious. It has spread extremely rapidly from a single city to the entire country within only about 30 days. Moreover, it has achieved such far-reaching effects even in the face of extreme response measures including the complete shutdown and isolation of whole cities, cancellation of Chinese New Year celebrations, prohibition of attendance at school and work, massive mobilization of health and public health personnel as well as military medical units, and rapid construction of entire hospitals.

In light of this rapid spread, it is fortunate that COVID-19 has been mild for 81% of patients and has a very low overall case fatality rate of 2.3%. Among the

1,023 deaths, a majority have been ≥ 60 years of age and/or have had pre-existing, comorbid conditions such as hypertension, cardiovascular disease, and diabetes. Moreover, the case fatality rate is unsurprisingly highest among critical cases at 49%, and no deaths have occurred among those with mild or even severe symptoms (Table 1).

A major contribution of our study is a first description of the COVID-19 epidemic curves. We interpret the overall curve (Figure 3A) as having a mixed outbreak pattern—the data appear to indicate a continuous common source pattern of spread in December and then from early January through February 11, 2020, the data appear to have a propagated source pattern. This mixed outbreak time trend is consistent with the working theory that perhaps several zoonotic events occurred at Huanan Seafood Wholesale Market in Wuhan allowed 2019-nCoV to be transmitted from a still-unknown animal into humans and, due to its high mutation and recombination rates, it adapted to become capable of and then increasingly efficient at human-to-human transmission (3,8).

The early days of the outbreak have been reminiscent of SARS and MERS, and indeed, the discovery that the causative agent was a closely-related, never-before-described coronavirus predicted potential for nosocomial transmission and so-called “super-spreader” events (8). Unfortunately, 2019-nCoV did indeed infect health workers in China via nosocomial transmission. Here we offer a first description of the 1,716 confirmed cases among health workers. Overall, they also display a likely mixed outbreak pattern—perhaps the data are characterized by a point source curve beginning in late December 2019, which

TABLE 2. Confirmed cases, case severity, and case fatality rates among health workers in different areas of China by time period.

Period (by date of onset)	Wuhan			Hubei (outside Wuhan)			China (outside Hubei)			China (overall)		
	Confirmed Cases, N	Severe + Critical, N (%)	Deaths, N (CFR*, %)	Confirmed Cases, N	Severe + Critical, N (%)	Deaths, N (CFR*, %)	Confirmed Cases, N	Severe + Critical, N (%)	Deaths, N (CFR*, %)	Confirmed Cases, N	Severe + Critical, N (%)	Deaths, N (CFR*, %)
Before Dec 31, 2019	0	0	0	0	0	0	0	0	0	0	0	0
Jan 1–10, 2020	18	7 (38.9)	1 (5.6)	1	1 (100)	0	1	1 (100)	0	20	9 (45.0)	1 (5.0)
Jan 11–20, 2020	233	52 (22.3)	1 (0.4)	48	8 (16.7)	0	29	1 (3.4)	0	310	61 (19.7)	1 (0.3)
Jan 21–31, 2020	656	110 (16.8)	0	250	29 (11.6)	2 (0.8)	130	10 (7.7)	0	1,036	149 (14.4)	2 (0.2)
After Feb 1, 2020	173	22 (12.7)	1 (0.6)	95	3 (3.2)	0	54	3 (5.6)	0	322	28 (8.7)	1 (0.3)
Total	1,080	191 (17.7)	3 (0.3)	394	41 (10.4)	2 (0.5)	214	15 (7.0)	0	1,688	247 (14.6)	5 (0.3)

Abbreviation: CFR, case-fatality rate.

* CFR presented here was calculated as number of deaths (numerator) divided by total number of confirmed cases in the row (denominator), expressed as a percent.

was eclipsed by a higher magnitude continuous source curve beginning on January 20, 2020. To date, there is no evidence of a super-spreader event occurring in any of the Chinese health facilities serving COVID-19 patients. However, we do not know whether this is due to the nature of the virus itself or whether these events have been successfully prevented.

It is these authors' sincere hope and intent that this new analysis, on what has become a "public health emergency of international concern," (12) helps to inform health and public health workers preparing for or perhaps already experiencing COVID-19 in their populations. This study provides important insight into several crucial open questions on this epidemic and how to design strategies to effectively control it (3). For instance, the downward trend in the overall epidemic curve suggests that perhaps isolation of whole cities, broadcast of critical information (e.g., promoting hand washing, mask wearing, and care seeking) with high frequency through multiple channels, and mobilization of a multi-sector rapid response teams is helping to curb the epidemic.

China's response is certainly an echo of lessons learned during SARS and is a tribute to the work China and other low- and middle-income countries have been doing, with the much-needed help of international partners, over the past few decades to build infectious disease surveillance systems and public health infrastructure capable of catching outbreaks early and responding swiftly using evidence-based best practices. The 2019-nCoV and other coronaviruses may continue to adapt over time to become more virulent (3), and zoonosis is not going to stop. We must remain vigilant, hone our skills, fund our defenses, and practice our responses, and we must help our neighbors to do the same.

The very large number of cases included in our study was a major strength. Nevertheless, our study did have some important limitations. Firstly, a large proportion of cases included in our analysis (37%) were not confirmed by nucleic acid testing since this process is slow, labor intensive, and requires specialized equipment and skilled technicians. Yet all 72,314 cases were at least diagnosed clinically and investigated by trained epidemiologists. Secondly, some records did have missing data for a few important variables of interest—Wuhan-related exposure, comorbid conditions, and case severity—which limits our ability to draw conclusions from the data.

In conclusion, the present descriptive, exploratory

analysis of the first 72,314 cases of COVID-19 reported through February 11, 2020 offers important new information to the international community on the epidemic in China. In particular, this analysis chronicles the extremely rapid spread of the novel coronavirus despite extreme efforts to contain it. However, important questions remain including identification of the animal reservoir, determination of infectiousness period, identification of transmission routes, and effective treatment and prevention methods including further test development, drug development, and vaccine development (3–4,8–9). As an international community, we must all be responsible partners in surveillance, communication, response, research, and implementation of evidence-based public health and clinical practice. The massive vigorous actions taken by the Chinese government have slowed down the epidemic in China and curbed spread to the rest of the world. Although the epidemic appears to be in decline in the lead up to February 11, 2020, we may yet face more challenges. Huge numbers of people will soon be returning to work and school after the extended New Year holiday. We need to prepare for a possible rebound of the COVID-19 epidemic in the coming weeks and months.

Acknowledgements

This work was supported by National Science and Technology Foundation of China (2018ZX10201002-008-002), and by National Nature Science Foundation of China (NSFC, 71934002). The funder had no role in the design and conduct of the study; collection, management, analysis, and interpretation of the data; preparation, review, or approval of the manuscript; and decision to submit the manuscript for publication.

The team thanks all local health workers for their contributions in providing testing, treatment, and care to COVID-19 patients in China.

Disclaimer: The opinions expressed herein reflect the collective views of the co-authors and do not necessarily represent the official position of the National Center for AIDS/STD Control and Prevention of the Chinese Center for Disease Control and Prevention.

In order to share the results of epidemiological characteristics of COVID-19 domestically and internationally, the Chinese Version is jointly published on the *Chinese Journal of Epidemiology*.

Author Group & Contributions: The Novel Coronavirus Pneumonia Emergency Response Epidemiology Team includes Zijian Feng, Qun Li, Yanping Zhang*, Zunyou Wu, Xiaoping Dong, Huilai Ma, Dapeng Yin, Ke Lyu, Dayan Wang, Lei Zhou, Ruiqi Ren, Chao Li, Yali Wang, Dan Ni, Jing Zhao, Bin Li, Rui Wang, Yan Niu, Xiaohua Wang, Lijie Zhang, Jingfang Sun, Boxi Liu, Zhiqiang Deng, Zhitao Ma, Yang Yang, Hui Liu, Ge Shao, Huan Li, Yuan Liu, Hangjie Zhang, Shuquan Qu, Wei Lou, Dou Shan, Yuehua Hu, Lei Hou, Zhenping Zhao, Jiangmei Liu, Hongyuan Wang, Yuanjie Pang, Yuting Han, Qiuyue Ma, Yujia Ma, Shi Chen, Wei Li, Routong Yang, Zhewu Li, Yingnan Guo, Xinran Liu, Bahabaike Jiangtulu, Zhaoxue Yin, Juan Xu, Shuo Wang, Lin Xiao, Tao Xu, Limin Wang, Xiao Qi, Guoqing Shi, Wenxiao Tu, Xiaomin Shi, Xuemei Su, Zhongjie Li, Huiming Luo, Jiaqi Ma, Jennifer M. McGoogan. All Team members jointly conceptualized the study, analyzed and interpreted the data, wrote and revised the manuscript, and decided to submit for publication.

* Corresponding author: Yanping Zhang, zhangyp@chinacdc.cn.

Submitted: February 14, 2020; Accepted: February 14, 2020

References

1. Wuhan Municipal Health Commission. Report of clustering pneumonia of unknown etiology in Wuhan City. Wuhan, China: Wuhan Municipal Health Commission. <http://wjw.wuhan.gov.cn/front/web/showDetail/2019123108989>. [2019-12-31]. (In Chinese).
2. World Health Organization. Novel coronavirus – China. Geneva, Switzerland: World Health Organization. <https://www.who.int/csr/don/12-january-2020-novel-coronavirus-china/en/>. [2020-01-12].
3. Wang C, Hornby PW, Hayden FG, Gao GF. A novel coronavirus outbreak of global health concern. *Lancet*. [http://dx.doi.org/10.1016/S0140-6736\(20\)30185-9](http://dx.doi.org/10.1016/S0140-6736(20)30185-9). [2020-01-24].
4. Hui DS, Azhar EI, Madani TA, Ntoumi F, Kock R, Dar O, et al. The continuing 2019-nCoV epidemic threat of novel coronaviruses to global health - the latest 2019 novel coronavirus outbreak in Wuhan, China. *Int J Infect Dis* 2020;91(2020):264 – 6. <http://dx.doi.org/10.1016/j.ijid.2020.01.009>.
5. Zhu N, Zhang D, Wang W, Li XW, Yang B, Song JD, et al. A novel coronavirus from patients with pneumonia in China, 2019. *N Engl J Med*. <http://dx.doi.org/10.1056/NEJMoa2001017>. [2020-01-24].
6. Chan JFW, Kok KH, Zhu Z, Chu H, To KKW, Yuan SF, et al. Genomic characterization of the 2019 novel human-pathogenic coronavirus isolated from a patient with atypical pneumonia after visiting Wuhan. *Emerg Microbs Infect*. <http://dx.doi.org/10.1080/22221751.2020.1719902>. [2020-01-24].
7. Tan WJ, Zhao X, Ma XJ, Wang WL, Niu PH, Xu WB, et al. A novel coronavirus genome identified in a cluster of pneumonia cases—Wuhan, China 2019–2020. *China CDC Weekly* 2020;2(4): 61–2. <http://weekly.chinacdc.cn/en/article/ccdcw/2020/4/61>.
8. Paules CI, Marston HD, Fauci AS. Coronavirus infection—more than just the common cold. *JAMA*. <http://dx.doi.org/10.1001/jama.2020.0757>. [2020-01-23].
9. Munster VJ, Koopmans M, van Doremalen N, van Riel D, de Wit E. A novel coronavirus emerging in China – key questions for impact assessment. *N Engl J Med*. <http://dx.doi.org/10.1056/NEJMp2000929>. [2020-01-24].
10. Huang C, Wang Y, Li X, Ren L, Zhao J, Hu Y, et al. Clinical features of patients infected with 2019 novel coronavirus in Wuhan, China. *Lancet*. [http://dx.doi.org/10.1016/S0140-6736\(20\)30183-5](http://dx.doi.org/10.1016/S0140-6736(20)30183-5). [2020-01-24].
11. Chan JFW, Yuan S, Kok KH, To KKW, Chu H, Yang J, et al. A familial cluster of pneumonia associated with the 2019 novel coronavirus indicating person-to-person transmission: a study of a family cluster. *Lancet*. [http://dx.doi.org/10.1016/S0140-6736\(20\)30154-9](http://dx.doi.org/10.1016/S0140-6736(20)30154-9). [2020-01-24].
12. World Health Organization. Statement on the second meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV). Geneva, Switzerland: World Health Organization. [https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-\(2005\)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-\(2019-ncov\)](https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-(2019-ncov)). [2020-01-30].

From:	(b)(6)@state.gov>
To:	ISN-BPS-DL <ISN-BPS-DL@STATE.GOV>
CC:	Park, Christopher J (T) (b)(6)@state.gov>
Subject:	FW: Geneva: WHO Shares Names of Experts Investigating the Origins of COVID-19 but Provides Few Other Details
Date:	Fri, 20 Nov 2020 17:35:45 +0000

FYI-- if you have not seen.

~~SENSITIVE BUT UNCLASSIFIED~~

From: SMART Core <svcsmartbtsewssprec1@state.gov>
Sent: Friday, November 20, 2020 12:08 PM
Cc: (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>; (b)(6)@state.gov>
Subject: Geneva: WHO Shares Names of Experts Investigating the Origins of COVID-19 but Provides Few Other Details

UNCLASSIFIED
~~SBU~~



Info Office: STAFF

MRN: 20 GENEVA 964
Date/DTG: Nov 20, 2020 / 201659Z NOV 20
From: USMISSION GENEVA
Action: WASHDC, SECSTATE *ROUTINE*
E.O.: 13526
TAGS: ECON, SHLH, PREL, ETRD, KNCV, UN, WHO, WTRO, CDC, HHS, FDA, CN
Captions: ~~SENSITIVE~~
Reference: A) 20 GENEVA 928
B) 20 GENEVA 944
C) 20 GENEVA 692
Subject: Geneva: WHO Shares Names of Experts Investigating the Origins of COVID-19 but Provides Few Other Details

1. ~~(SBU)~~ Key Points:

- At WHO's weekly member state briefing November 19, WHO responded to the Ambassador's request to identify the international experts convened to investigate the origins of the SARS-CoV-2 virus.
 - WHO provided the names of 10 international experts (one American) who are working with 10 Chinese experts, but did not say when the international team would be able to enter China, how involved FAO and OIE were in the drafting of the Terms of Reference as required by Member States, and who approved the TORs.
 - The Chinese Ambassador reiterated China's efforts to collaborate with WHO, while noting evidence of SARS-CoV-2 in sewage samples in Europe prior to the outbreak in Wuhan as well as recent SARS-CoV-2 samples found in frozen food imported to China.
 - WHO committed to provide member states with regular updates on the origins investigation in response to requests for transparency from the United States, European Union, UK, Ukraine, and Canada.
 - The ACT-Accelerator (ACT-A) Facilitation Council co-chairs made another appeal for financing, echoing arguments made in the first week of November (refs A, B)
2. ~~(SBU)~~ Following through on Director-General Tedros Adhanom Ghebreyesus's commitment on November 5 to brief member States regarding the WHO-China investigation into the origins of SARS-CoV-2, WHO staff scheduled a briefing for member states to provide details on November 19 regarding the international team's progress and next steps. Dr. Peter Ben Embarek, WHO's Programme Manager for Monitoring Nutritional Status & Food Safety Events, noted WHO's initial trip to China in February 2020 followed by the origins investigation advance team's visit for 3.5 weeks in July and August to develop the Terms of Reference for the origins investigation (TORs), identify knowledge gaps, and review work already done by Chinese authorities. The team of experts, which consists of 10 Chinese experts and 10 international experts (names of experts provided below), have met virtually to begin assessing data provided to them by the People's Republic of China (PRC).
3. ~~(SBU)~~ Embarek provided the attached presentation which includes information concerning animal investigations related to SARS-CoV-2. The presentation notes out of 366 dead animal samples from the Wuhan seafood market, none tested positive for SARS-CoV-2, while out of 842 environmental samples, 69 tested positive. Chinese authorities have shared similar results from studies that failed to identify SARS-CoV-2 in wild, farm, and domestic animals. (**Note:** These studies confirm that the Wuhan market was substantially contaminated, but do not provide any leads on potential animal reservoirs. Regarding human transmission, the WHO presentation indicates that 106 clinical cases prior to January 10 have been identified, but provides no information about any studies tracing early human-to-human transmission or attempting to identify "patient zero." **End Note**)
4. ~~(SBU)~~ The WHO presentation includes information regarding possible links to COVID-19 spread through frozen food products, as evidenced in the recent case in Tianjin. WHO

commented that the frozen food case was a rare event. WHO also reported the recent spread of COVID-19 through mink farms in Denmark resulting in Denmark culling 17 million mink. WHO indicated that similar mink outbreaks had been reported in Italy, the Netherlands, Spain, Sweden, and the United States. (**Note:** While these studies regarding transmission through frozen food products and through mink farms are not directly linked to the original outbreak in Wuhan, China, WHO suggested that transmission of SARS-CoV-2 could occur in many different ways and regions. **End Note**)

China Points to non-Chinese Origins of COVID-19...

5. ~~(SBU)~~ The Chinese Ambassador claimed China's active support for "the WHO-led, global scientific collaboration to identify source of the virus." Despite China's significant efforts to contain the pandemic, the Chinese Ambassador continued, China has prioritized cooperating with the international team of investigators and the WHO. He noted the team met virtually on October 30 to discuss and share information on environmental studies, animal intermediate hosts, and transmission routes of COVID-19. The Ambassador highlighted the recent outbreak of COVID-19 transmitted through imported cold-chain products including in Tianjin. He also referred to studies suggesting SARS-CoV-2 transmission outside of China prior to the outbreak in Wuhan. As a result, he concluded, identifying the source would be a time-consuming and complicated endeavor which required patience and ongoing collaboration with scientists around the world.

...as Member States Call for Increased Transparency, Urgency, and Reporting from the Investigation

6. ~~(SBU)~~ Other Member States expressed concern about the lack of transparency and clarity on the timeline for the origins investigation. The UK Ambassador requested more regular updates to Member States either through the weekly briefings or governing body meetings, while also questioning when the international team would make its first field visit. The UK also asked how the investigating team would collaborate with the International Panel on Pandemic Preparedness and Response (IPPR) and asked when details on Phase 2 of the origins investigation would be shared.

7. ~~(SBU)~~ Ambassador Bremberg underscored U.S. concerns that the Phase 1 study did not involve the international team working on the ground with Chinese counterparts, which falls well short of Member State expectations laid out in resolution WHA 73.1. The Ambassador requested information on how the experts' input into scientific process and analyses was incorporated into the TOR, and how WHO would guarantee the Phase 1 data was complete and transparent. The Ambassador also expressed concern that the members of the international team had not been shared, noting to our knowledge there had been no other WHO expert panel shrouded in such secrecy. He noted this prevents both member States from assessing the expert team's qualifications, limits transparency thus jeopardizing the credibility of any report, and prevents the international experts from collaborating freely with other scientists around the world.

8. ~~(SBU)~~ The European Union expressed similar questions and concerns regarding the lack of

transparency to the investigation, and questioned whether WHO was following the one-health approach outlined in WHA 73.1. The EU noted the importance of ensuring the FAO and OIE were integrated into the investigation and asked how WHO was coordinating with them. The EU also responded to China, calling China's restrictive trade measures on frozen foods from Europe due to the Tianjin outbreak disproportionate, not based in science, and stating the EU would take their case to the World Trade Organization. The EU also questioned why Chinese press and the government continued focusing on one study in Europe which may have found traces of SARS-CoV-2 in sewer systems prior to the Wuhan outbreak, and asked China if it was doing any research into sewage samples in its own country as part of its investigation.

WHO Shares Names of International Investigators, but Avoids Details on the Details

9. ~~(SBU)~~ In response to Member State questions, WHO committed to providing regular briefings to Member States and shared the names of the ten international experts on the investigation team. On the lack of any field investigations from the international team, Mike Ryan, WHO's Executive Director for the Health Emergencies Preparedness and Response Programme, stated the Phase 1 research was standard in any outbreak, and WHO normally relies on national authorities to conduct the Phase 1 investigation to identify "patient zero." Ryan hopes to have the international team visit China and, WHO continues work with the Chinese government to finalize dates, but Ryan was unable to offer any specific timeline.

10. ~~(SBU)~~ On initial results from the investigations, Ryan stated the initial cluster of cases around the Wuhan seafood market is a clear early indicator, but there could be other original sources of the virus. Many of the first cases of COVID-19, Ryan continued, were not associated with the market itself, and there was likely human-to-human transmission prior to the identification of the cluster at the market. Along with severe hospitalized cases in December, 2019, there must have been additional milder or asymptomatic cases. Ryan used the mink-to-human outbreak as an example of animal-to-human transmission that occurred in multiple countries around the same time to demonstrate the complexity of determining a single origin source. Ryan noted the WHO team has been in regular contact with OIE and FAO during the July/August trip and after, but he did not share to what extent those organizations were involved in approving the TORs.

11. ~~(SBU)~~ Peter Ben Embarek, WHO's Programme Manager for Monitoring Nutritional Status and Food Safety Events, informed Member States that WHO had not released the names of the experts until they had a firm commitment from each one, given the time required. Embarek stated there are ten Chinese experts and ten international experts working together, and he read the list of ten experts (**Note:** WHO received nominations for the expert team from Member States and the Global Outbreak Alert and Response Network (GOARN) from which WHO selected the international team which China accepted in October (ref C). **End Note:**

- Thea Fisher (Nordsjællands Hospital, Denmark)
- John Watson (UK, Department of Health)
- Marion Koopmans (Netherlands, Erasmus Med Center)
- Dominic Dwyer (Australia, Westmead Hospital)
- Vladamir Dedkov (Russia, Institut Pasteur)

- Hung Nguyen (Vietnam, International Livestock Research Institute)
- Fabian Leendertz (Germany, Robert Koch Institute)
- Peter Daszak (USA, EcoHealth Alliance)
- Farag El Mubasher (Sudanese, working in Qatar's Ministry of Health)
- Ken Maeda, (Japan, Dept of Veterinary Science)

ACT-A Still Seeking Urgent Funding

12. ~~(SBU)~~ The co-chairs of the ACT-Accelerator Facilitation Council, ministers from Norway and South Africa, summarized the work of the Facilitation Council and repeated their appeals for funding. Recent pledges raised nearly one billion USD, but the ACT-A still needs US\$4.5 billion by the end of the year and nearly US\$28 billion in total. The co-chairs are preparing for a third Facilitation Council meeting in January or February of 2021 where they hope to secure the US\$4.5 billion. The co-chairs, as well as the UK, stated more support was needed from major G7 and G20 economies, and the UK noted ACT-A would be a focus of their 2021 G7 chairmanship. The co-chairs also noted the impressive results from Pfizer and Moderna on their COVID-19 vaccines required urgent action to ensure those and other products could be delivered equitably through the ACT-A. The co-chairs shared much of the same economic and political argument for funding as in briefings in early November (ref A, B).

13. ~~(SBU)~~ Comment:

(b)(5)

End Comment.

~~SENSITIVE BUT UNCLASSIFIED~~

Signature: BREMBERG

Drafted By: GENEVA;
Cleared By: HHS/OGA;
HHS/NIH/
POL-ECON;
POL-ECON

(b)(6)

Approved By:
Released By:
Info:

EXEC: [redacted]
EXEC: [redacted] (b)(6)
EXEC/LEG: [redacted]
GENEVA: [redacted]

ATLANTA GA, CDC *ROUTINE*; DEPT OF HHS WASHINGTON
DC *ROUTINE*; NATIONAL SECURITY COUNCIL WASHINGTON
DC *ROUTINE*; USUN NEW YORK, USMISSION *ROUTINE*;
ENVIRONMENT SCIENCE AND TECHNOLOGY COLLECTIVE *ROUTINE*;
IO COLLECTIVE *ROUTINE*

XMT: CARACAS, AMEMBASSY; ST PETERSBURG, AMCONSUL
Attachments: ACT_Accelerator.pdf, SARS-CoV-2.pdf

Action Post: NONE
Dissemination Rule: DIS_STAFF

UNCLASSIFIED

~~SBU~~

Sender:	(b)(6)@state.gov>
Recipient:	ISN-BPS-DL <ISN-BPS-DL@STATE.GOV>; Park, Christopher J (T) (b)(6)@state.gov>

Access to COVID-19 Tools Accelerator (ACT-A) Facilitation Council Co-Chair's Update

Member States COVID-19 Briefing

19 November 2020

Goals

1. Share outcomes of **2nd Council Meeting (3 Nov)**
2. Update on the **intersessional work** of the co-Chairs
3. Highlight next steps to **3rd Council meeting (Jan/Feb 2021)**

RECAP on the main functions of the ACT-Accelerator Facilitation Council:

- Assist the ACT-A in addressing **major strategic, policy & financial challenges**
- Actively engage in and champion at the highest levels, the **political advocacy and mobilization of resources** needed for ACT-A to deliver

Full Terms of Reference: <https://www.who.int/docs/default-source/act/act-a-facilitation-council-terms-of-reference-21-september-2020.pdf>

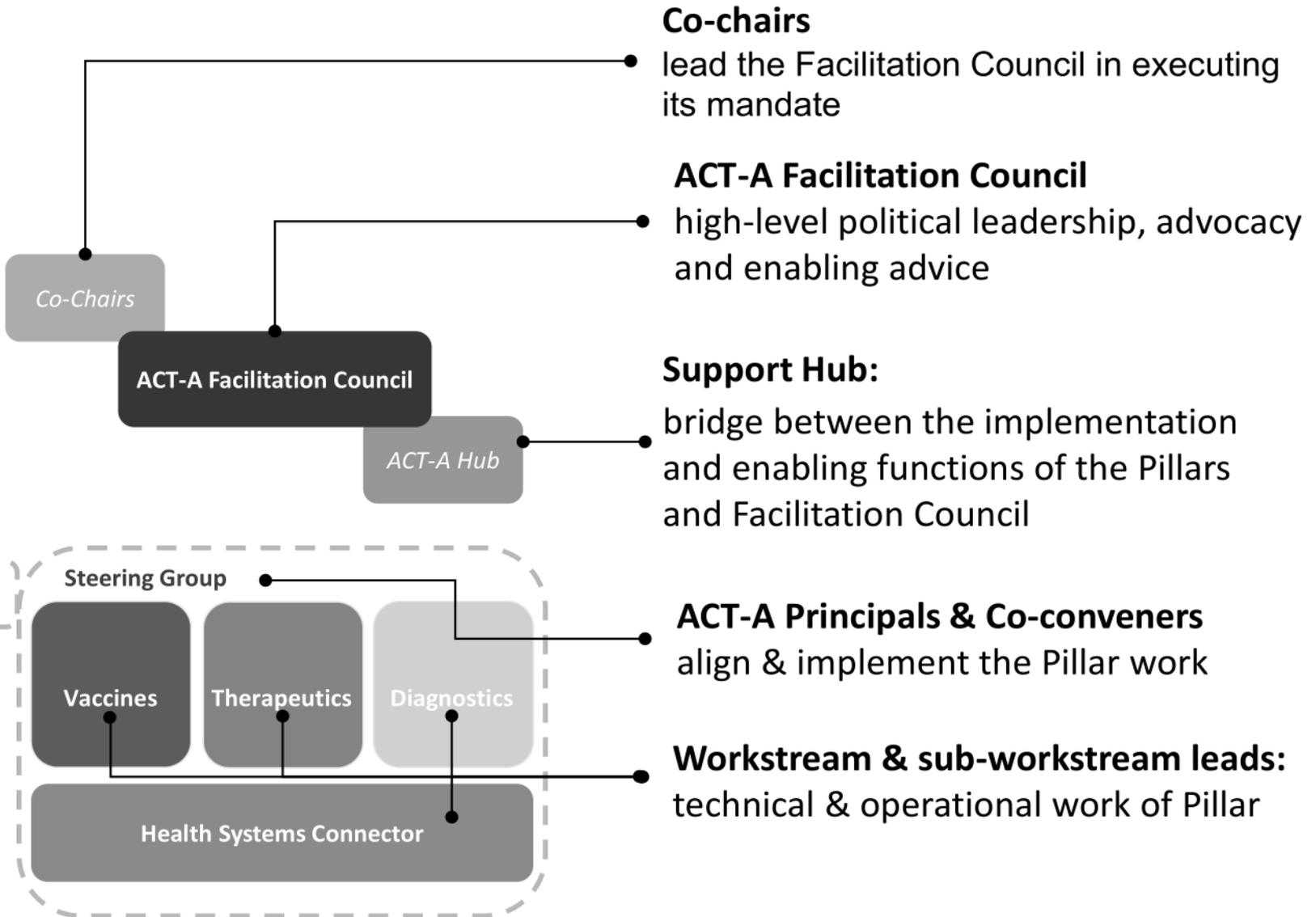
ACT-A structure: high level overview of roles

FL-2022-00076

A-00000574681

UNCLASSIFIED

01/20/2023 Page 177



1st High-Level Facilitation Council (10 Sept)

- Live broadcast of **high-level HoS segment**
- Kicked-off the **ACT-A Advocacy Campaign**
- Endorsed the **ACT-A Plan & Investment Case** for its scale-up phase
- Harnessed **strong political support for ACT-A: Council Outcome Statement**



HIGHLIGHTS: 2nd Council, 3 Nov on the theme of:

FL-2022-00076

A-00000574631

"UNCLASSIFIED"

01/20/2023 Page 179

Addressing a macroeconomic crisis through the ACT Accelerator

Session I – Access to ACT-A’s New & Emerging Tools

- Keynote: Sir Witty, WHO Special Envoy
- Panel: Dr Nsanzimana (Rwanda), Sir Farrar (Wellcome)
- Speakers: St Kitts & Nevis, Singapore, Japan, China, Republic of Korea, Russia, Vietnam, Spain, Saudi Arabia

Session II – Urgent Macroeconomic Case for ACT -A

- Keynote: Lord Jim O’Neill & Petya Koeva (IMF)
- Panel: Ms Murthi (World Bank), J Denton (ICC), Dr Gomes (CSO rep)
- Speakers: Canada, India, Brazil, Dr Rahman (CSO rep)

Closing Call to Action

- France & Saudi Arabia (Paris Peace Forum & G20)
- UK & Italy (incoming G7 & G20)

‘Midway into the scale-up phase, ACT-A’s promise of equitable access is under threat due to serious financing gaps...’

Minister Ulstein, Norway

‘Every country will need to play a part in financing an end to this crisis. Every leader has political choices to make.’

Minister Mkhize, South Africa

‘The time for talking is over. There is an exit strategy through WHO & ACT-A.’

Jeremy Farrar, Wellcome

‘ACT-A needs < 1/10 of 1% of global GDP; this is the easiest decision for world leaders.’

Lord Jim O’Neill

2nd Council Meeting: co-Chair's Summary

FL 2022-00076

A-00000574631

"UNCLASSIFIED"

01/20/2023

Page 180

We reiterated:

- **Significant & concrete progress** made by ACT-A
- **Multilateral collaboration & solidarity** is key to ending the pandemic
- **Urgent & stronger political & financial support** for ACT-A is needed

We emphasized the need for: *(as a matter of urgency)*

- **collectively securing the financial resources** required to scale-up for impact and **to change the course of the pandemic.**
- honouring and realizing our shared commitment to **fair & timely allocation to leave no one behind in this crisis**
- **all countries** (whether through domestic stimulus or the use of concessional loans) to consider **global investments in controlling the pandemic through ACT-Accelerator** as a very cost-effective form of macroeconomic stimulus

The full summary can be found here: https://www.who.int/docs/default-source/act/act-a-fc2-chairs-summary-17nov2020-final.pdf?sfvrsn=90899d77_2



Key ACT-A landmarks



New Rapid Tests approved & volume/price guarantees for LMICs (120m @ \$3-5)



1st life-saving therapy (Dexa) in rollout in LICs & **monoclonal antibodies** under evaluation



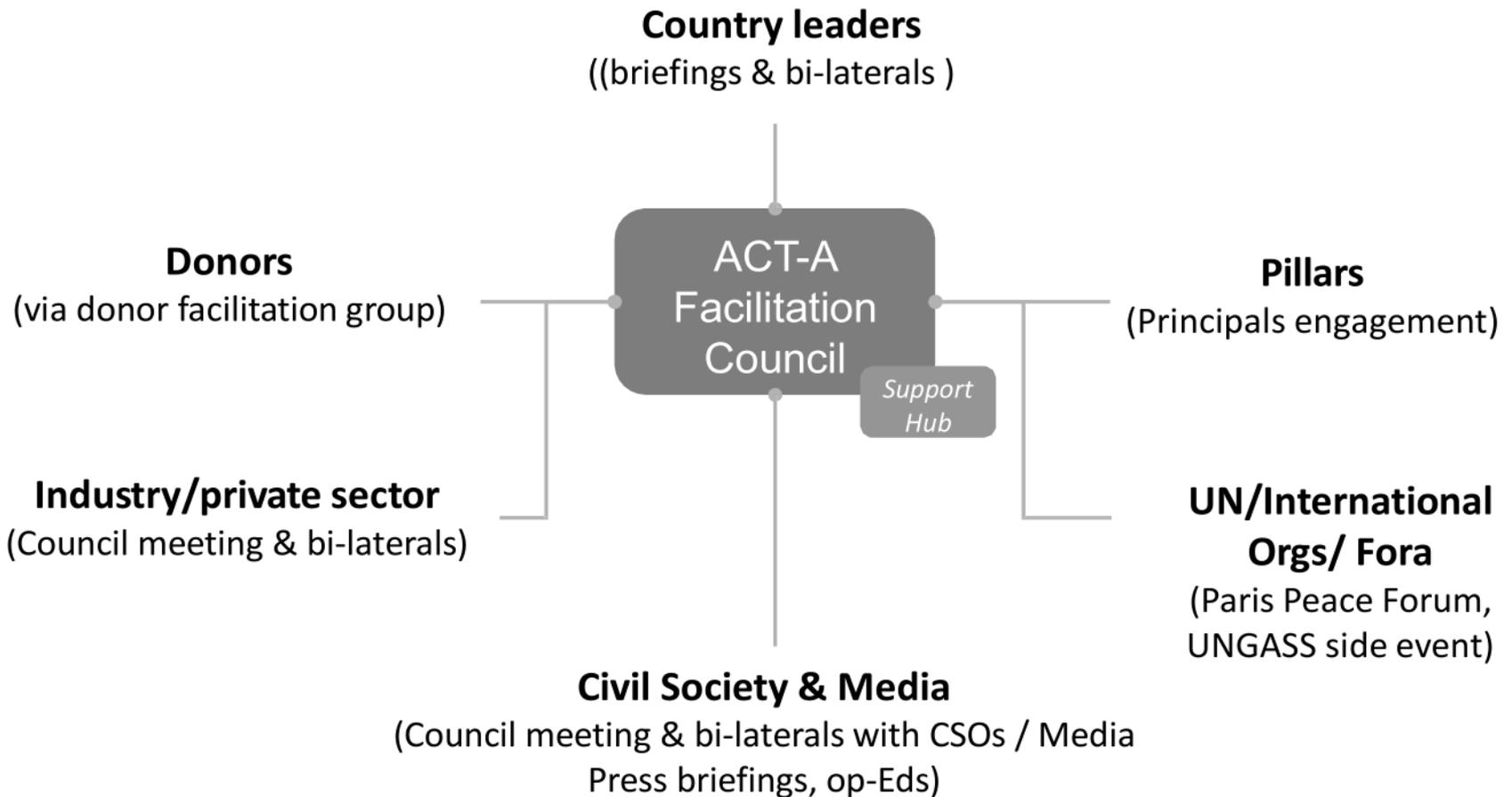
COVAX Facility 'in business' with **187+** economies & dynamic vaccine portfolio



Equitable Allocation Framework & COVAX allocation mechanism established

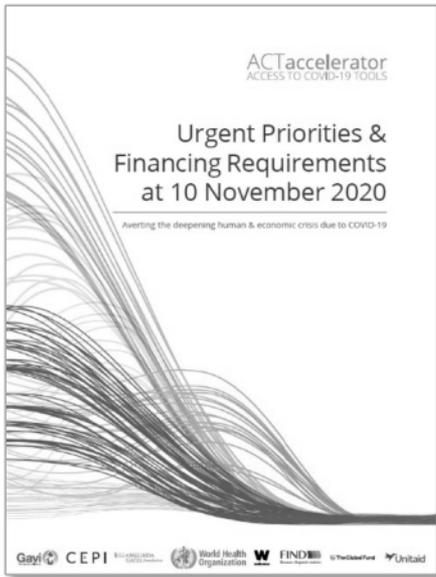
FL-2022-00076 A-00000574631 "UNCLASSIFIED" 01/20/2023 Page 182

Co-Chair's Intersessional ACT-A activities



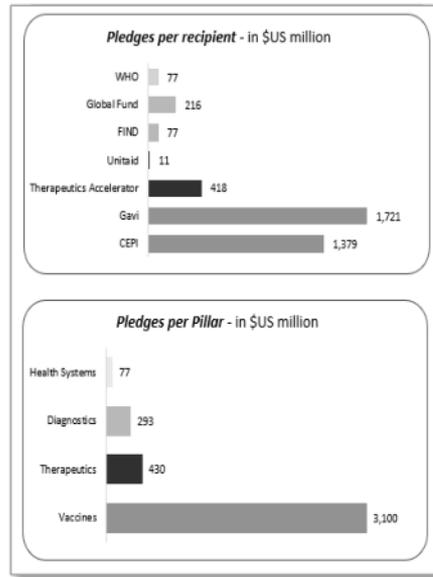
FL-2022-00076 A-00000574631 "UNCLASSIFIED" 01/20/2023 Page 183

Key new strategic ACT-A publications



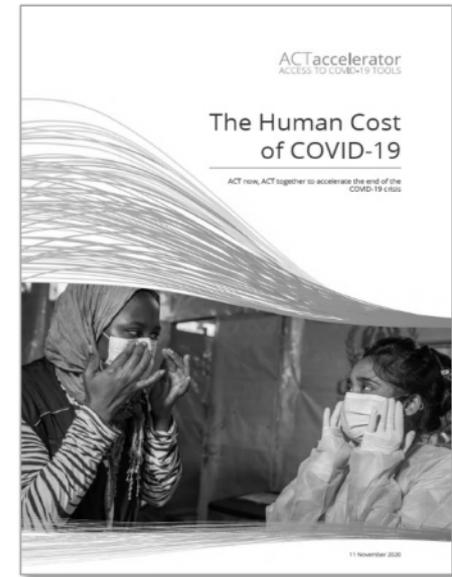
ACT-A Urgent Priorities & Financing needs

Provides sharpened near-term priorities & urgent financing needs as at 10 Nov 2020. [Link](#)



ACT-A Commitment Tracker

Provides transparency on funding commitments, updated every 2 weeks. [Link](#)



The Human Cost of COVID-19

Highlights relevance of ACT-A agenda through real stories [Link](#)

Where we stand:

- **Financing landscape for ACT-A has been mapped**
- Multiple events so far have raised \$US 0.5 – 1 Bn each (primarily ODA) – **great commitment but not sufficient to close ACT-A financing gaps**
- **Positive preliminary readouts on vaccines** – but no quick end to the crisis without real investment
- **Key implementation challenges ahead** that needs political support



Path forward:

- **Fundamentally need to go beyond ODA** (e.g. Stimulus, concessional loans, private sector)
- **Real political leadership essential**, esp from G7/G20
- Council can **engage finance Ministries & influencers**
- **ACT-A Pillars need to continue to build confidence** esp. to ensure full financing across diagnostics, therapeutics & health systems

Looking forward: a 3rd Council Meeting

FL-2022-00076

A-00000574631

"UNCLASSIFIED"

01/20/2023 Page 185

GOAL: turning political commitment into financing additionality



"...if medical solutions can be made available faster and more widely relative to our baseline, it could lead to a cumulative increase in global income of almost \$9 trillion by end-2025"

IMF World Economic Outlook, October 2020

Addressing ACT-A's urgent needs = only **1 day** of that income and would save countless lives

‘Investing now to ensure that effective diagnostics, therapeutics, and vaccines are developed and distributed to people around the world is not only the right thing to do; it is also the smart thing to do.... so that global trade and growth can bounce back.’

Jim O’Neill

Read in full [here](#)



Back-up slide

Final ACT-A Facilitation Council composition¹

FL-2022-00076

A-00000574631

"UNCLASSIFIED"

01/20/2023 Page 189

Governments

Co-Chairs: Norway and South Africa

Regional groups

- League of Arab States: Bahrain
- Association of South East Asian Nations (ASEAN): Vietnam
- African Union (AU): South Africa
- Caribbean Community (CARICOM): Saint Kitts and Nevis
- Commonwealth of Independent States (CIS): Uzbekistan
- Forum of Small States: Singapore
- New Partnership for Africa's Development (NEPAD): Rwanda
- Community of Latin American and Caribbean States (CELAC): Mexico³
- Pacific Island Forum (PIF): Tuvalu
- South Asian Association for Regional Cooperation: Nepal

Founding Donors

- Canada
- France
- Germany
- Italy
- Japan
- Norway
- Saudi Arabia
- Spain
- United Kingdom

Market Shapers²

- Brazil
- China
- India
- Indonesia
- Republic of Korea
- Russia

Co-hosts

- World Health Organization & European Commission

Non-government partners

- Bill & Melinda Gates Foundation
- Wellcome Trust
- World Economic Forum

Envoys & Invitees

- WHO Envoys x2
- CSO x 2
- ICC

¹ USA & World Bank observers to the Council meeting

² South Africa is also a market shaper & founding member

³ founding member

Advancing global understanding of the origins of the SARS-CoV-2 virus & Human/Animal interface COVID-19 issues

*Member States briefing
19 November 2020*



**World Health
Organization**

- **February WHO mission to China:** Recommendation to investigate the source of the virus.
- **World Health Assembly 73 May 2020:** Adopted Resolution 73.1 on the COVID-19 response requesting WHO: *“to continue to work closely with the World Organisation for Animal Health (OIE), the Food and Agriculture Organization of the United Nations (FAO) and countries, as part of the One-Health Approach to identify the zoonotic source of the virus and the route of introduction to the human population, including the possible role of intermediate hosts, including through efforts such as scientific and collaborative field missions, which will enable targeted interventions and a research agenda to reduce the risk of similar events occurring, as well as to provide guidance on how to prevent infection with severe acute respiratory syndrome coronavirus 2 (SARS-COV2) in animals and humans and prevent the establishment of new zoonotic reservoirs, as well as to reduce further risks of emergence and transmission of zoonotic diseases”*
- **WHO advanced mission July-August 2020 to China:** To develop terms of references for an international multi-sectoral mission to support additional studies and investigations into the source of the virus.



SARS-CoV-2 virus origin. International team & studies in China

FL 2022-00076

A-00000574631

"UNCLASSIFIED"

01/20/2023

Page 191

- WHO deployed and advance team in July-August 2020 to China with 3 objectives:
 - 1) To review work and studies already undertaken in the country;
 - 2) to identify knowledge gaps; and
 - 3) to develop terms of references for an international multi-sectoral mission to support the development and conduct of additional studies and investigations into the source of the virus.

- Terms of reference for studies to be undertaken and the composition of an international team to support the work in China have been agreed.

- ToRs includes a epidemiological studies around the initial cases and the market in Wuhan and more long term targeted studies in human and animal populations



**World Health
Organization**

Meetings of the international team – China updates

E-2022/09076 A-0000074631 "UNCLASSIFIED" 31/20/2023 Page 193

- Members of the International Team have started meetings the members of the Chinese Team. It gave an opportunity for the international Team to get updated on the results of past studies done in China.

1) Epidemiological studies :

Of the 106 detected clinical COVID-19 cases until 10 January 2020, 81 cases were associated with the Huanan market (76% of all cases) with 57 of them workers at the market, working at 36 different stores.

- Three scenarios for the introduction of the virus to the Wuhan wholesale market are likely:

1. Introduction via live animals;
2. Introduction via a human case with subsequent human to human spread ;
3. Introduction via product(s) contaminated with the virus.



**World Health
Organization**

2) Investigations at the Wuhan wholesale market:

None of the 366 dead animal samples (17 species, 156 animals) from the market tested positive for SARS-CoV-2. Of the 842 environmental samples, 69 tested positive for SARS-CoV-2.

- These findings are in line with the human epidemiological investigation results showing the market was substantially contaminated and played a role in the event.

3) Wild animal studies (serology):

Sera of 110 wild animal species, were analyzed. 7084 samples from 11 provinces from 2015-2019 were found negative for SARS-CoV-2. 1000 additional serum samples collected in 2020 from different provinces were also tested negative.

Meetings of the international team – China updates

E-2022/00076 A-0000074631 "UNCLASSIFIED" 31/20/2023 Page 495

4) Domestic and farm animals:

18,708 domestic animal samples, including pigs, ox, poultry, dogs and cats, from 10+ provinces were all tested negative for SARS-CoV-2.

Additional studies to focus on farmed animals including cattle, pigs, goats, ducks, sheep, cats, dogs, minks, foxes, racoon, geese and chicken.

China has had no report of animal to human transmission from mink populations.

5) Food products and food safety

Out of approx. 900 000 samples of imported frozen food products, SARS-CoV-2 was found on few food and food packaging. Live virus was isolated from samples from food packaging.

On at least one occasion, food handlers were reported to have been most likely infected from handling frozen food products.

While a rare event, it could play a role in the reintroduction of the virus in areas/countries who have controlled the domestic transmission of the virus in the human population.



**World Health
Organization**

▪ **Animal studies :**

- Ferrets, mink and cats can get infected and can transmit the virus.
- Outbreaks in Mink farms in Denmark, Italy, Netherlands, Spain Sweden, and USA.
 - Mink are susceptible and can transmit the virus to other minks as well as to humans (Netherlands and Denmark).
 - Virus mutation rates in mink appears to be more intense than in humans reflecting an adaptation to mink.
 - Mink virus variants detected in Denmark in humans triggering a total cull of the 17 M mink population in the country.
 - Mink virus variant detected in human in another 6 countries.
 - Denmark and Netherlands experience show the difficulties of preventing the virus spread between farms and the difficulty of preventing spill over from mink to humans.



21 projects underway supported by WHO. These research projects cover:

- Animal susceptibility studies
- Virus behavior and dynamic in animals.
- Animal surveys in different regions
- Understanding drivers for animal trade for food
- Improving traditional food markets
- Persistence studies of the virus on food surfaces
- Feeding studies
- Better understanding of recent reports of positive human and sewage samples from different countries dating in 2019



Questions?



UNCLASSIFIED~~SBU~~

DeControlled

MRN: 20 CANBERRA 638
Date/DTG: May 15, 2020 / 150740Z MAY 20
From: AMEMBASSY CANBERRA
Action: WASHDC, SECSTATE *ROUTINE*
E.O.: 13526
TAGS: PGOV, KNCV, KPAO, PREL, PROP, OIIP, 2P, 5A, AU, CN, ECON, PREF, KPIN, ALP
Captions: ~~SENSITIVE~~
Reference: A) 20 CANBERRA 566
B) 20 CANBERRA 562
C) 20 CANBERRA 544
D) 20 PERTH 52
E) 20 MELBOURNE 54
F) 20 CANBERRA 75
G) 20 CANBERRA 504
H) 20 CANBERRA 512
I) 20 CANBERRA 516
Subject: No Going Back: Australians' Trust in the PRC Continues to Decline as Beijing's Trade Threats Become Reality

1. ~~(SBU)~~ **Summary and comment:** Important segments of Australia's media, opinion leaders, and the public are increasingly losing trust in the People's Republic of China (PRC), as Beijing moves forward with new trade restrictions against Australia in what media is characterizing as a response to Australia's call for an international inquiry into the origins of COVID-19. Opinion leaders from across the political spectrum have highlighted the PRC's "economic coercion," though government officials – including the Foreign, Trade, and Agriculture Ministers – have thus far refused to directly link the trade actions with broader political tensions. While the United States has come under some fire in recent weeks for its management of COVID-19, the criticism has consistently differed from that directed at China – notes of sympathy rather than anger. Opinion is not monolithic, and there are some who counsel that Australia's leadership should have been more circumspect in dealing with Australia's largest trading partner or who rehash Australian sensitivities over being seen as the United States' "deputy sheriff." Even here, we detect an important shift in tone. Long gone are the paeans to China as an unquenchable and benign fount of economic prosperity; in its place lies growing anxiety and resentment. **End summary and comment.**
2. (U) This is the latest in a series of Mission Australia cables on how the COVID-19 pandemic is reshaping Australia's relationship with the PRC (reftels).

Australian Opinion Leaders Clear-Eyed about PRC's "Economic Coercion"

3. (U) Australian media have overwhelmingly characterized the PRC's mid-May notification of plans to impose a series of restrictions on Australian barley and beef imports as an act of economic retaliation for the Australian government's call for an inquiry into the origins of COVID-19 (refs B and C). While the centrist *Australian Financial Review* (correctly) noted that the barley issue is tied to a longstanding WTO anti-dumping dispute, columnist Jennifer Hewett wrote on May 12, "a range of companies are likely to pay a high cost for Australia's version of common-sense diplomacy" and that the "payback could hardly have come as a surprise." In center-right *The Australian*, Greg Sheridan wrote that Beijing's decision "constitutes naked economic coercion and intimidation," arguing further that there is "no doubt" that the decision was linked to Canberra's call for a COVID-19 inquiry. On May 14, the Australian Broadcasting Corporation's Foreign Affairs Correspondent Stephen Dzedzic called the PRC's actions a "predictable piece of theatre." He added that "Beijing has a long track record of economic coercion, and the pattern is strikingly similar across the globe." A May 14 editorial in *The Australian* argued that the CCP's playbook is to "disrupt, divide, and distort, at the best of times. But with COVID-19, the CCP has its back to the wall, lashing out instinctively." 6PR Radio Mornings host and IVLP alum Gareth Parker maintained that "we're being bullied by China" and that "anyone doing business with China needs to look at other markets urgently."
4. (U) Comments among Australian foreign affairs opinion leaders echoed the harsh coverage of the PRC across the media spectrum. The Australian National University's Darren Lim and Victor Ferguson wrote in a May 13 Lowy Institute article that Beijing's actions follow a "familiar playbook, in which the Chinese government relies on technical regulatory measures to restrict exports, while denying any retaliation is taking place." In response to the PRC's denial of a connection between its trade decisions and Australia's claim for an inquiry, the Perth USAsia Centre's Jeffrey Wilson noted that "if you threaten to shoot someone, no one will believe when you stand over his body a week later and claim he accidentally fell on a bullet." Wilson's comments were widely quoted in Australian media and *The Washington Post*. According to former Department of Foreign Affairs and Trade Deputy Secretary Richard Maude, "China is increasingly conducting its diplomacy in a manner it would never accept from others." Writing for the Asia Society, Maude warned that the PRC seeks to play elements of Australia's community and society off against each other. "Australia will be in a stronger position if Commonwealth and state governments, together with business, can resist this obvious trap."



ABC Beijing correspondent Bill Birtles' social media commentary following Beijing's aggressive trade tactics. [Comment: The U.S. exports roughly 100,000 tons of barley each year and could not replace the millions of tons Australia exports to China annually. End Comment.]

Australian Public Increasingly Leary of the PRC

- (U) Amidst the backdrop of the diplomatic frost between Australia and the PRC (refs B and C), a substantial majority of Australians are less favorable towards the PRC's authoritarian one-party state when thinking about the COVID-19 outbreak, according to a May 14 Lowy Institute [poll](#). Sixty-eight percent of Australians are less favorable towards the PRC's government while 27 percent say they feel about the same. [Note: The same poll also noted that 90 percent of Australians think that the United States handled the COVID-19 outbreak "very badly" or "fairly badly." End Note.]

Media Note More Cautious Approaches of Industry and Government

- ~~(SBU)~~ Despite the widespread negative media coverage of the PRC's actions, Australian media outlets have noted the more cautious approach taken by industry and government. Industry representatives from the meat, dairy, wine, minerals, and education sectors all gave interviews expressing concern that were widely quoted in the media. Media also quoted state officials, many of whom expressed concern about the deterioration in Australia-PRC relations.
- ~~(SBU)~~ Queensland Premier Annastacia Palaszczuk [told](#) the ABC she was concerned about a "trade war." Victoria Treasurer Tim Pallas was [quoted](#) in center-left *The Age* as saying that vilification of the PRC would be "dangerous, damaging, and irresponsible," even as he publicly backed calls for an inquiry into the origins of COVID-19. Deflecting media questions about "subservience" to the PRC, Western Australia Premier

Mark McGowan was widely quoted as saying that “we need good relationships with all of our trading partners.” Local media noted an apparent shift in posture for McGowan, who has previously been quick to champion the PRC as a vital economic partner; *WAToday* characterized his actions as passively handing off the tariff issue to the state agriculture minister. McGowan’s focus on the importance of Japan and South Korea – Australia’s second and fourth largest trading partners – also received media attention, echoing commentary by Jeffrey Wilson, who argued that Western Australia needs to diversify its export markets.

Australian Concern about the United States Lingers in the Background

8. ~~(SBU)~~ While the focus of Australian collective angst has generally centered on the PRC in recent weeks, the United States was brought back into focus as questions mounted on the origins of the virus. News Corp outlets began reporting on April 28 that Five Eyes countries are “looking closely” at whether COVID-19 emerged from a wet market or from a lab at the Wuhan Institute of Virology. News Corp’s *The Daily Telegraph* reported on May 1 on an unofficial, unclassified timeline listing open-source information on the PRC’s cover-up of COVID-19. Secretary Pompeo’s appearance on ABC’s *This Week* on May 3 received significant local media coverage in Australia, as his comments appeared to confirm *The Daily Telegraph*’s report.
 9. ~~(SBU)~~ Left-leaning media outlets were quick to criticize the United States and its alleged “interference” in news reporting and commentary. On May 4, *The Sydney Morning Herald* and *The Age* reported concern among the Australian government that the *The Daily Telegraph*’s insinuation that the virus originated in the Wuhan Institute of Virology is hampering Australia’s effort to pursue an independent inquiry. Three days later, both outlets claimed to link the report to the United States, noting that “whether true or not,” the alleged connections underscored divergences in national security circles in Canberra and Washington. *The Daily Telegraph* reported on “emerging fears in the [Australian] intelligence community” of unreliable U.S. intelligence. This sentiment was echoed by certain foreign affairs commentators. ANU Professor and former Foreign Minister Gareth Evans characterized the imbroglio as “another nail in the coffin of U.S. international credibility.” *The Australian*’s Greg Sheridan wrote on May 6 that PM Morrison and his government “are right to go nowhere near these allegations, while at the same time avoiding gratuitous offense” to the United States.
- ~~SENSITIVE BUT UNCLASSIFIED~~
10. ~~(SBU)~~ Australians’ focus on the United States was relatively quick to shift back to the PRC, however, as Beijing ramped up its aggressive tactics and Secretary Pompeo’s May 6 press conference, which was extensively covered in Australian media, appeared to allay concerns that the United States was heedlessly pushing the virology lab theory. *The Australian* subsequently published a five-part series looking at the history of the outbreak and the PRC’s actions and inactions, concluding that the PRC “deliberately concealed information about the coronavirus, and it has fought for weeks against calls for an inquiry.” Miranda Devine, a columnist for *The Daily Telegraph*, put the focus back on the PRC’s economic coercion, writing that the PRC is “now threatening

economic boycotts against countries like Australia.”

Signature: CULVAHOUSE

Drafted By: PAS (b)(6)

Cleared By: PD
PD
POL-ECON;
EXEC/LEG/
PD
POL
POL
ECON
ECON
EXEC;
CANBERRA

Approved By:

Released By:

Info:

(b)(6)

PERTH, AMCONSUL *ROUTINE*; MELBOURNE, AMCONSUL *ROUTINE*;
SYDNEY, AMCONSUL *ROUTINE*; CHINA POSTS COLLECTIVE *ROUTINE*

Dissemination Rule: Archive Copy

UNCLASSIFIED

SBU

Withheld pursuant to exemption

(b)(5)

Withheld pursuant to exemption

(b)(5)