European Parliament

China's democratic neighbours and coronavirus

Protecting populations without lockdowns

SUMMARY

North-east Asian countries have deep and historical economic, human and cultural connections with China, based on their geographical proximity to the latter country, and were the first to be exposed to the coronavirus contagion after its initial outbreak. They were not caught unprepared, having dealt with the SARS and the MERS epidemics in recent times.

South Korea and Taiwan, in particular, have successfully showcased a model characterised by minimal restrictions on economic activities and daily lives, where safeguarding the health of the people has not had devastating consequences for the health of the economy, as witnessed in other parts of the world. They have also showed that it is possible to effectively manage the coronavirus threat transparently, without authoritarian methods. Their models, illustrating that it is possible to implement a successful – albeit sometimes unnoticed – alternative to a liberal *laissez-faire* model or to a drastic lockdown, could become precious assets for public diplomacy and soft power tools.

Given the high rate of information and communications technology penetration in the region, it has been easier for the authorities to make use of big data and contact-tracing by smartphone in order to prevent the pandemic from spreading, as well as collect information on those infected. However, this approach has raised issues of privacy, especially as the details collected allow the identification of those infected and could possibly expose them to stigmatisation.

Despite the coronavirus outbreak, South Korea is a healthy democracy. It successfully held a general election on 15 April 2020, giving substance to the statement made by the European Parliament's President, David Sassoli: 'Democracy cannot be suspended in the face of Covid-19'.
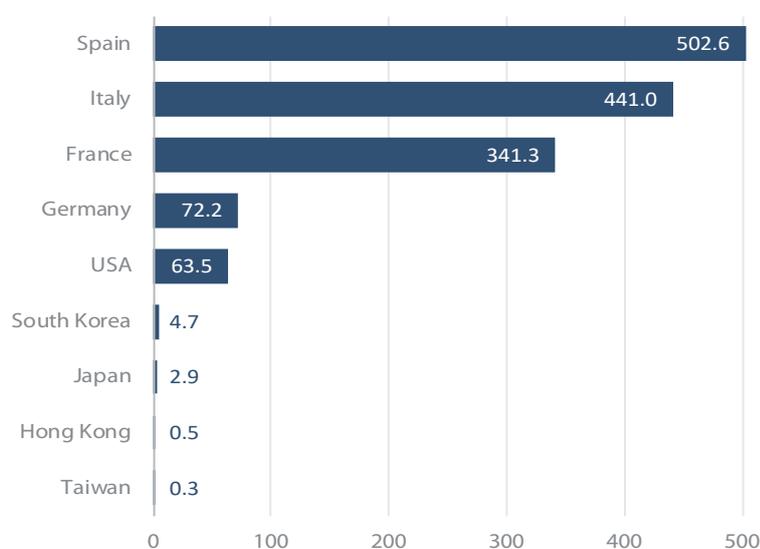
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Introduction

North-east Asian countries have deep and historical economic, human and cultural connections with China, based on their geographical proximity to the latter country. Therefore, when the coronavirus hit the Chinese city of Wuhan and then spread to other parts of the country, north-east Asia was the first to become exposed to the contagion, with South Korea and Japan registering the highest number of infections next to China's on 29 February. Yet, despite their proximity and ties with China, these countries have succeeded in containing the outbreak, with some even serving as a model to others.

Among the likely reasons that made these countries more vigilant to the new coronavirus was their past experience in managing two other major coronavirus-related epidemics. In 2002 and 2003, the Severe Acute Respiratory Syndrome (SARS), which first appeared in China, infected 8 096 people and provoked 774 casualties. In 2012, the Middle East Respiratory Syndrome (MERS), first identified in Saudi Arabia, infected 2 538 people and provoked 871 deaths. South Korea in the case of the latter, Hong Kong and Taiwan in the case of the former, became epidemic hotspots. Following these incidents, they raised their level of institutional and technological preparedness and were thus able to face the current coronavirus outbreak without the panic or confusion seen elsewhere.

Figure 1 – Covid-19-related deaths per million inhabitants in selected countries

Source: John Hopkins University, CIA, Taiwan Centres for Disease Control, Government of Hong Kong SAR. Situation as of 27 April 2020.

China's democratic neighbours and coronavirus: Overview

South Korea

South Korea's swift handling of the coronavirus crisis is a clear departure from its mismanagement of two recent traumatic incidents that occurred within 12 months of each other. In April 2014, the Sewol ferry disaster caused more than 300 casualties, most of whom were students. In May 2015, the country's MERS outbreak was the world's second-largest after Saudi Arabia's, and took 38 lives. In 2020, South Korea was a coronavirus hotspot from 25 February to 9 March, ranking the world's second-most affected country after China. The outbreak peaked on 29 February, when 909 new cases were registered; since 12 March, its intensity has been constantly decreasing, with the daily number of new cases standing at 152 at the most. A major source of the Korean outbreak was related to the Shincheonji Church of Jesus located in the Daegu/North Gyeongsang Province, in the country's south-east.

Relying on its digital infrastructure and surveillance, South Korea has thus far managed its coronavirus outbreak successfully, without imposing lockdown or telework. Below is an outline of the approaches the country has applied to contain the outbreak while also protecting human life:

1. Widespread testing for the disease (a daily testing capacity of up to 20 000 people). This has been facilitated by a fast-tracking procedure of test-kits produced by biotech companies mostly located in the Daejeon district. These companies are a successful model of public-private R&D cooperation, with their production of test kits targeting a daily figure of 1 million. Additionally, the authorities have set up 635 Covid-19 screening centres and 79 drive-through testing stations that accomplish registration and specimen collection in less than 10 minutes, without drivers having to get out of their vehicles. Drive-through testing stations do six sample-takings per hour, while screening centres do two. Some private hospitals have set up phone-booth type testing. To meet the rising international demand, Seoul has set up a task force with online updates and the contact information of 29 Korean manufacturers and exporters specialising in Covid-19 diagnostic devices.

2. Tracing confirmed cases' contacts to prevent the contagion from spreading further. The authorities use credit card transactions history, CCTV footage and mobile GPS data – the legal basis being the Infection Disease Control and Prevention Act. Relevant anonymised information is disclosed to the public, allowing those who may have crossed paths with confirmed cases to get themselves tested, self-quarantine and have their health monitored on a one-on-one basis by assigned public health officials through a 'self-quarantine safety protection app'. Hospitals and pharmacies have been granted access to patients' travel histories to a selected number of affected countries.

3. Intensive treatment of infected people at the earliest possible stage. Authorities have designated 67 'infectious disease hospitals' to exclusively accommodate Covid-19 patients. According to their symptoms, patients are classified in four different groups, with those with mild symptoms being placed under quarantine in temporarily repurposed corporate and public training facilities. This system has helped South Korea maintain a low fatality rate.

4. Engaging the public to participate in social distancing and other preventive measures.

5. Curbing coronavirus inflow from abroad. Since 19 March, all travellers from abroad have had to go through a special entry procedure including fever checks and a health questionnaire, as well as provide a reachable phone number. They have also had to download the Self Diagnosis app on their smartphones and submit their health status every day on the app for 14 days. Since 22 March, all travellers from Europe have been tested for Covid-19 at the airport (Korean nationals do the test at medical facilities near home), and have then had to self-quarantine for 14 days. Since 1 April, all inbound travellers have been placed under quarantine and had to download the Self-Quarantine Safety and Protection app, while testing has been administered only to those showing symptoms. Since 30 March, all Korea-bound flights passengers have had their temperature checked. The country's main airport, Incheon, has implemented a full-fledged three-step temperature monitoring programme on outbound passengers. Also, individuals identified as Covid-19 contacts have been grounded during their 14-day self-quarantine. Since 13 April, all arrivals from the USA have been obligatorily tested for Covid-19 and visa-free entry and visa waiver programmes for some 90 countries imposing entry bans have been suspended.

A healthy democracy

On 15 April 2020, South Korea held elections to the National Assembly. They were the first general elections in the world to have been held amid the pandemic. People had to use face masks and single-use gloves, and keep a distance of 1 metre at polling stations. They had temperature checks done at the polling stations. Feverish or symptomatic people voted in separate booths that were disinfected after each use. Self-quarantined individuals were allowed to vote in a 100-minute window around the poll's close. Special polling stations were set up in central quarantine facilities. Despite the strict health control measures, at 66.2 %, the turnover was the highest since 1992. President Moon Jae-in's centre-left Democratic Party won an absolute majority (180 out of 300 seats). His party had been in difficulty before the outbreak, but the executive's effective response to Covid-19 won the support of its electorate.

Japan

The Japanese government has been the target of domestic and international criticism for the way it handled the case of the Diamond Princess, a cruise ship quarantined immediately after its arrival at the port of Yokohama on 3 February, which had been the second-biggest hotspot outside China for a number of weeks. On 27 February, the Prime Minister, Abe Shinzō, asked all schools to close down until the end of the annual school break in early April. He also called for the cancelation of big events. Japan has had a limited number of cases, except for a hotspot in Hokkaido. The country's strategy has been to identify small clusters of Covid-19 cases before they turned into large ones. Unlike other countries, Japan has not introduced lockdown or systematic testing.

On 13 March, the National Diet (Japan's bicameral legislature) amended the 2012 Special Measures Act to Counter New Types of Influenza. Consequently, if the prime minister deems that a swiftly progressing, nationwide epidemic could have a devastating impact on people's everyday lives and the Japanese economy, they have the power to declare a state of emergency in a certain area for a limited period of time. Governors of prefectures, however, have no powers to oblige private businesses to close, and therefore offenders cannot be penalised. On the contrary, governors have the authority to close large-scale facilities, to order the seizure of essential goods, including medicines, to request delivery companies to transport medical goods and equipment, and to use private property for the purpose of setting up temporary medical facilities without the owners' consent. On 24 March, Prime Minister Abe announced the postponement of the Olympic and Paralympic Games from the summer of 2020 to 2021. Around this time, the number of Covid-19 cases started to increase, probably due to the cherry blossom season and to travellers returning from Europe and the US. Tokyo in particular witnessed a surge in cases, prompting its governor, Koike Yuriko, to take a tough stance on emergency measures to contain the pandemic and urge residents to stay indoors as much as possible, especially on weekends. That way she distanced herself from the prime minister's approach, but met with businesses' reluctance to close. After declaring a state of emergency in seven prefectures on 7 April, at the request of several governors, on 16 April the government declared a nationwide state of emergency until 6 May, later extended to 31 May. The authorities rely on social distancing, pointing out that avoiding 80 % of physical contacts would reduce the levels of infection dramatically. Assuming that the coronavirus is impossible to eliminate, they have carried out about 130 000 tests; South Korea, a country with less than half of Japan's population, has carried out more than 500 000. According to a poll, 75 % of respondents considered that the declaration of a nationwide state of emergency came too late. Also, around 60 % of respondents working at companies said the target of reducing overall person-to-person contact by 80 % was not achievable.

Hong Kong

Building on its lessons learnt from the SARS epidemic, in early January 2020 Hong Kong rapidly rolled out its preparedness and response plan and proceeded in accordance with the Centre for Health Protection's focus on real-time surveillance, rapid intervention and responsive risk communication. Incoming travellers from Wuhan/Hubei province have been undergoing temperature checks, filling in health declaration forms and had to self-quarantine. When Hong Kong registered its first two imported Covid-19 cases, contact tracing became an additional element of the city's containment policy, with Covid-19 patients' travel data being published online and individuals failing to disclose pertinent information being liable to a fine and imprisonment. A dashboard modelled on the John Hopkins University Covid-19 map was set up to visualise buildings where former and current infected people lived, also giving their infection history. In late January 2020, bus, ferry and rail connections with mainland China were suspended, flights to it were reduced and travellers from Hubei province were banned from entry. Following a strike by thousands of medical workers calling for a full ban on entry from mainland China in early February, compulsory quarantine for all arrivals from mainland China was imposed. Gradually, the entry ban was extended to cover all foreigners and quarantine became mandatory for all returning Hong Kong residents.

Quarantine has been strictly enforced through on-the-spot checks and an electronic wristband with a QR code and a StayHomeSafe app based on 'geofencing technology', which is different from GPS location tracking. If a confined person tries to abscond, the app alerts the authorities. Quarantine violations are liable to a fine and imprisonment. Moreover, the public is encouraged to report suspected cases to an e-Report Centre. Owing to limited capacities for testing people without epidemiological links, priority is given to enhanced social distancing. Early measures have included the closure of government-run leisure and cultural facilities, with the city government offering work-from-home arrangements for civil servants and asking private business to allow their staff to work from home, too. Home schooling has been introduced. Since late March, social-distancing rules have included limiting group gatherings to four people; additionally, restaurants have had to ensure a distance of at least 1.5 metres between tables. Shortages of masks have only partly been remedied by an increase in existing local mask production and the launch of new production lines under a subsidy scheme of the Anti-Epidemic Fund, which also provides relief to businesses affected by social distancing.

Taiwan

In the wake of SARS, Taiwan overhauled its health care system and set up the Central Epidemic Command Centre (CECC) to ensure independent centralised decision-making. It adopted the Communicable Disease Control Act for the implementation of robust disease prevention and control measures. The CECC was activated on 20 January 2020; it has since adopted a vast array of measures triggered by the different alert levels defined by law. During the coronavirus crisis, Taiwan has focused on transparent daily risk communication and on increasing the population's resilience against fake news and disinformation campaigns to which it has been regularly exposed.

Taiwan's low Covid-19 figures may be credited to a set of factors, early intervention being a particularly crucial one. Taiwan learned from the social media about cases of 'atypical pneumonia' in Wuhan that had remained covered up for weeks through censorship and oppression of whistle-blowers and citizen journalists. A recent study shows that 95 % of infections could have been prevented if actions had started three weeks earlier. China's cover-up is similar to the one seen during SARS. What is new are the attempts to deflect public attention from the systemic flaws of mainland China's authoritarian governance and controversial Covid-19 statistics, to diffuse narratives of success and generosity through disinformation and 'face mask diplomacy', or to 'weaponise' supply chains in a struggle for influence. Taiwan's early risk awareness allowed it to gain precious time, which it otherwise may not have had, as it is excluded from global health data and alerts by the World Health Organisation (WHO), due to pressure from mainland China. Critics have attributed the WHO's long reluctance to declare the coronavirus outbreak a pandemic to mainland China's influence and ambition to portray itself as if in full control of the virus.
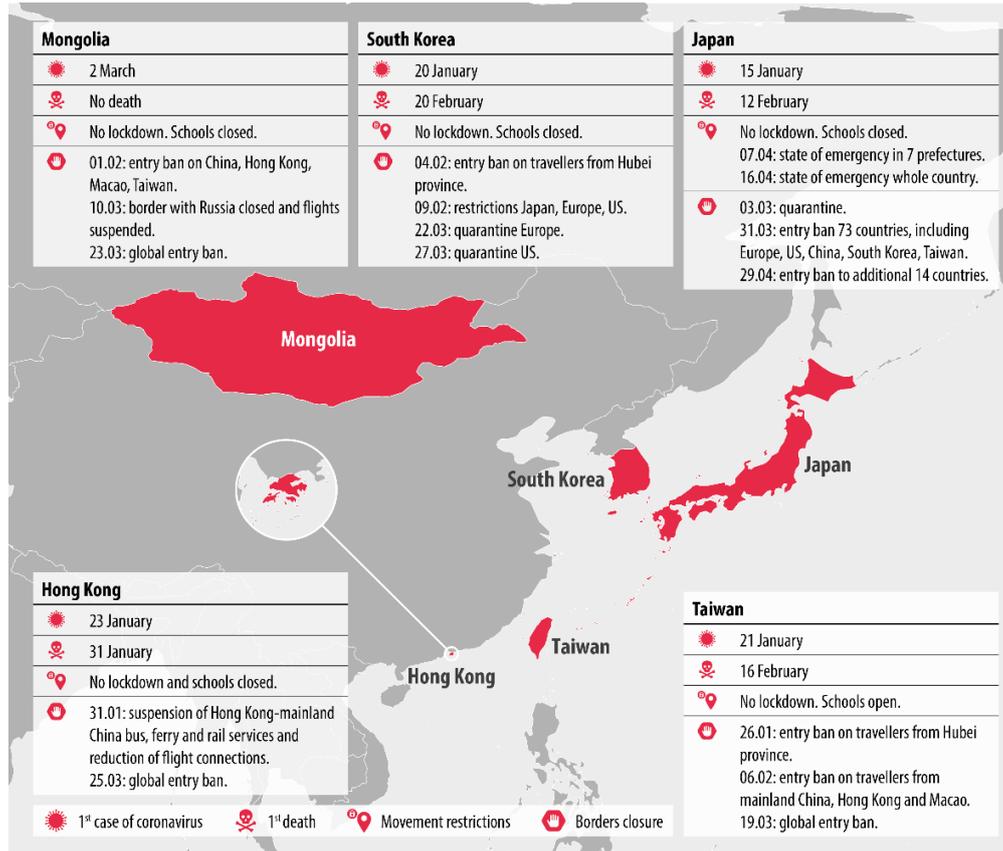
Border control measures, the innovative use of digital technology and big data to detect asymptomatic cases, to trace contacts and to strictly enforce quarantining, as well as the availability of protective gear feature prominently in Taiwan's containment policy. Since 31 December 2019, Taiwan has implemented on-board quarantine inspections of direct flights from Wuhan. All inbound travellers have been routinely screened for fever, classified into risk categories based on their travel history and required to complete a health declaration indicating their contact details. Individuals suspected of carrying the contagion have not been allowed to use public transport, but have had to use contracted taxis to the place of their self-isolation. As of 26 January 2020, incoming travellers from Wuhan have been banned from entering Taiwan. On 27 January 2020, Taiwan integrated health insurance, customs and immigration data for the creation of big data, which was made available to medical facilities and pharmacies to track individuals returning from high-risk locations. In early February, Taiwan banned travellers from other Covid-19 affected regions from entering its territory; in March this ban was extended to all foreigners. Port calls by international cruise ships were also banned. To enforce quarantine measures, Taiwan uses a mobile phone-based digital fence system that tracks confinees by triangulating the location of their mobile phones to cell towers. If

they break the quarantine, they are liable to a large fine and possibly naming and shaming, as the government may publish photographs and personal data under a special Covid-19 act. To avert a shortage of crucial medical supplies and protective gear, their exports have been temporarily banned and stockpiling has been severely fined. Taiwan has expanded local production lines and introduced a surgical mask rationing system with price controls, online ordering and mask vending machines. The Taiwanese are allocated affordable surgical masks regularly, based on their health insurance cards. The scope of screening tests has been expanded to include health workers in nursing homes. Taiwan has started donating face masks to several countries, adding a new pillar to its soft power. Social distancing, including the compulsory wearing of masks, has been reinforced for crowded places and public transport. Railway stations have installed thermal cameras. Economic and social lockdown has been avoided, but the public has been recommended to avoid indoor and outdoor gatherings of more than 100 and 500 persons respectively. Schools have not closed but masks are mandatory and special partition devices are used during meals. Taiwan is currently developing a voluntary social distancing app with bluetooth technology.

Mongolia

In late January 2020, Mongolia took drastic preventive measures knowing that it stood a high risk of exposure and a fragile health care system, despite a recent increase in hospital bed capacity. It closed its long land borders first with China and later with Russia, and suspended international passenger train travel and all regular passenger flights, first to China and incrementally to all other destinations. Mongolians evacuated from abroad started being systematically tested and quarantined. The country also closed kindergartens, schools, higher education institutions, and vocational training centres, and shifted to online learning. Public gatherings, events and meetings as well as in-country travel during the Tsagaan Sar holiday were prohibited. Wearing masks in public places became mandatory, with infringers risking getting a fine.

Figure 2 – North-east Asian democracies' measures to tackle coronavirus

Source: Straits Times, The Diplomat, Government of the Hong Kong SAR, Taiwan Centres for Disease Control, Montsame.

Good practices and issues

Widespread testing has been key to finding infected people and limiting the spread of the contagion in South Korea; consequently, the country is currently facing a demand for test kits from more than a hundred countries. The authorities have implemented innovative test methods, such as the drive-through testing stations. Meanwhile, scientists cannot explain why some healed Covid-19 patients have tested positive again, though, according to the Korean Centre for Disease Control and Prevention (KDCD), there is no evidence of a person who has retested positive being infectious.

South Korea and Taiwan engaged in face mask production and distribution, using a mask-rationing system tracking their availability. Seoul established designated purchasing days each week depending on the purchaser's birth year, while Taipei even provided mask vending machines and ensured masks' affordability. In Taiwan, enforcement of travel bans, classification of travellers into risk categories and strict enforcement of quarantine measures are key elements of the government's containment policy. All inbound travellers are routinely screened for fever, required to complete a health declaration and proactively quarantined depending on their travel history.

The South Korean and the Taiwanese governments have been firmly committed to acting with transparency, which has been key in securing them public support for their containment measures, both domestically and internationally. In addition to tackling the pandemic, Taipei has had to deal with fake news on the topic. Taiwan's Ministry of Justice Investigation Bureau (MJIB) has determined that 70 % of posts containing misinformation related to the pandemic have IP addresses in China.

> **Partners to cooperate with**
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> South Korea is the first country to have signed a 'new generation' free trade agreement (FTA) with the EU in 2011. Yet the partners had already signed a framework agreement that could be revamped in order to further develop health cooperation, in the frame of cooperation on research and development (R&D) well on track. South Korea is also a key player with regard to stability on the Korean peninsula.
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> Taiwan has emerged as the world's second-largest face mask producer after China. While adhering to the 'One China' policy, the EU could enhance cooperation on medical supplies with Taiwan and consider supporting its ambition to assume WHO observer status, as well as developing a productive and transparent exchange of information on the region.

North-east Asian democracies have highly educated civil societies accustomed to abiding by laws and rules. Wearing masks is a habit ingrained in these countries' culture, and people have readily adopted the social-distancing rules. Meanwhile, experts argue that Japan may have been overconfident in its tradition of etiquette, proper basic hygiene and mask-wearing habits, and that its health system might be on the verge of collapse. Japanese emergency legislation to fight epidemics does not give prefecture governors the powers to close businesses. This creates an issue in a country whose working culture rigidity is incompatible with teleworking: for instance, many documents require the use of a physical stamp from an employee's personal seal. Also, young people do not seem to have acknowledged the need to maintain social distancing. Despite Japan having a proportionally much lower number of infections than other countries, its approach is not seen as a model and experts are afraid that Tokyo's 'half-measures' could harm the economy without containing the pandemic.

Big data and contact tracing by smartphone have allowed authorities in South Korea, Taiwan and Hong Kong to track the spatial progress of the outbreak and efficiently share meaningful information. Yet, analysts have raised privacy concerns over Seoul's extensive contact-tracing system. On the one hand, epidemiologists argue that widespread detailed information about infected people's movements is crucial for tracking and controlling the pandemic. On the other hand, private details of people with Covid-19 have been exposed in this process, due to the use of CCTV and the tracking of credit card transactions, showing the names of businesses the individuals visited as well as the time of the visits, and even whether they went to the toilet and wore a mask. This has prompted disrespectful comments and even stigmatisation in the social space, also

because infected people's personal details occasionally make it possible to probe into and even reveal their identities. A Seoul University survey has shown that South Koreans are more afraid of being exposed to criticism, should they get infected, than contracting the disease itself.

Similar concerns exist about privacy in relation to Taiwan's handling of personal data to deal with the pandemic. The integration of health and immigration databases to track travellers with Covid-19 symptoms afford doctors access to their travel history. As mobile phone GPS data are used to track users' movements based on the triangulation of base-station data, once the quarantined person leaves their home, the phone triggers an alarm that is sent to the local police, health and civil affairs agencies. In Hong Kong, the Covid-19 maps trace even the individual buildings where former or current Covid-19 patients live. These maps highlight the country's commitment to tackling a difficult situation with transparency and engaging the local community and the world rather than covering it up, as appeared to have been the case in mainland China at the outset of the pandemic. However, people who breach the quarantine in Hong Kong may have their photographs and personal data published by the government, and the public is encouraged to report on them; in Taiwan, people who breach the quarantine risk being named and shamed; in South Korea, people are obliged to wear an electronic bracelet. Japan has delegated its prefectures the power to publish the names of businesses which do not accept to close. These approaches seem unlikely to be exported to societies with a different cultural and legal mindset.

South Korea proved that elections can be held safely despite the ongoing pandemic. What the pandemic did, however, was change the country's electoral campaign. Rigorous social distancing kept the election campaign low key. Candidates addressed people in the streets in masks and gloves, and greeted voters with fist or elbow bumps instead of handshakes. Vans with loudspeakers were missing: slogans were delivered online and text messages and phone calls were used to appeal to voters. The outcome rewarded the party of the outgoing government, which had been unpopular before the pandemic. This revealed that the way political leaderships respond to the health emergency could make or break their political fortunes, considering that the pandemic is people's top concern and that it may likely eclipse other issues that would normally determine votes.

A model exportable to the EU?

Part of the success of some north-east Asian democracies in facing the coronavirus lies in people's readiness to disclose personal data for big data sets and to use contact-tracing apps. The EU implements the General Data Protection Regulation (GDPR), based on the recognition of individual privacy as a human right. The challenge is to incorporate smart digital tools into liberal governance systems in a nonintrusive way, so as to avoid raising privacy concerns or risking abuses for purposes unrelated to the fight against the pandemic.

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