**“If the officials had disclosed information about the epidemic earlier, I think it would have been a lot better. There should be more openness and transparency” - Dr. Li Wenliang (1986- 2020) in an interview to New York Times**

Gopichandran and Subramaniam appreciate intensive Chinese efforts to contain the COVID- 19 outbreak and wonder if other weak and developing health systems will be able to do so(1). Under a heading, ’Strengthening health governance and law’, they appreciate authoritarian China state to make mass quarantine possible. And they go on to write, “A mass quarantine of the proportions seen in China is very difficult to achieve in India”. Here we need to examine this claim. While everybody should get one’s appreciation where that is due, if we do’t distinguish between different components of a system, our conclusion may not be correct. Here we need to distinguish between Chinese authorities and its healthcare workers.

As WHO Chief praised Chinese authorities at the end of January(2) and that may have inspired the authors to note it in their editorial. But we need to realise that that claim is questioned by many(3,4). Moreover still memories of Li Wenliang should haunt us if we believe such claims. That brave doctor tried to raise awareness about an emerging infectious disease in his closed group to make others cautious enough to protect themselves. But he was treated with brute force by the ‘authoritative’ State(5). Having been silenced he kept on working in hospital, contracted the same infection and then succumbed to it. All of us need to draw some courage and inspiration from his heroism.

There is a story of an Indian medical student, who ran away just before lockdown in Wuhan was imposed(6). Others too have similar accounts to share(7). There are some estimates that close to 5 Million people escaped before lockdown came to effect(8). Therefore this episode casts a long shadow on the efforts of the ‘authoritarian’ State ,made after that. What we need to realise is that there is no silver -bullet to solve our all the problems. Moreover by careful analysis we may realise something whose awareness show us a new piece of wisdom.

Health care reforms introduced in China since 2008 have transformed its delivery system(9). Scholars at Harvard School of Public Health emphasise its efforts to make extensive primary care system available to masses. The World Bank provides us a graph where life- expectancy is plotted on y axis against time scale on x axis. This graph depicting rising life expectancy at birth of Chinese population shows a steady improvement in this century(10). A plateau in later part of the last century is attributed to government’s efforts to privatise healthcare system before that. Hence we’d appreciate authorities only where that’s due. And the paradox is that while China is reaping rich dividends of its much larger investment in public health before, our Government is privatising its public services at a rapid pace. Right now it’s planning to give its district hospitals in private hands(11). Hence we need a course correction here and earnestly urge our policy makers to learn from China on how can we get an educated and healthy workforce to unleash its full potential and rapidly expand its economic might.

Then the author discuss issue of ‘Strengthening health human resources’. Although we agree with what they suggest here, something which is of more importance is the regularisation of the workforce. At present National Health Mission, the backbone of our system, runs on contractual employees and this Journal has published related Comments(12). As permanent employees don’t attend their duties regularly, our government plans to hire contractual employees. But that’s not a fair solution and other challenges emerge which need proper redressal. Our former RBI Governor suggests a solution for that. As contractual workers live under a constant threat of termination, he advises to hire them and keep on increasing severance amount(13). We believe that ASHA workers- serving in remote rural areas -deserve a better deal from our system(14).

Hence we need to realise that while Corona- like MERS, Ebola, SARS, ,Bird flu, Swine flu -may appear like an effervescence, and then rapidly disappear, and may mark an indelible impression on our collective consciousness; we need to appreciate shortcomings of an authoritative regimen- with its strengths- if any; bow to our unsung and unknown heroes; defend genuine interests of our man (and woman) power and at the same time be ready to accept our faults for making rapid course -correction. These are the times when humility, truthfulness, courage to speak truth to the power and generation of a feeling of global -fraternity are the best virtues.

**References-**

(1) Gopichandran V, Subramaniam S. Response to Covid-19: An ethical imperative to build a resilient health system in India. Indian J Med Ethics. Published online on March 4, 2020. DOI:10.20529/IJME.2020.026. available at [https://ijme.in/articles/response-to-covid-19-an-ethical-imperative-to-build-a-resilient-health-system-in-india/#](https://ijme.in/articles/response-to-covid-19-an-ethical-imperative-to-build-a-resilient-health-system-in-india/)

(2) Yang S. Travel barriers rise as WHO Chief praises Beijing’s Coronavirus response. WSJ 28 Jan 2020, available at <https://www.wsj.com/articles/who-chief-praises-beijings-coronavirus-response-as-travel-barriers-rise-11580227640>

(3) Rauhala E. Chinese officials note serious problems in Coronavirus response. The World Health Organisation keeps praising them. Washington Post. Feb 9, 2020, available at <https://www.washingtonpost.com/world/asia_pacific/chinese-officials-note-serious-problems-in-coronavirus-response-the-world-health-organization-keeps-praising-them/2020/02/08/b663dd7c-4834-11ea-91ab-ce439aa5c7c1_story.html>

(4) Kupferschmidt K. Mission impossible? WHO Director fights to prevent a pandemic without offending China. Science. Feb 10, 2020, available at <https://www.sciencemag.org/news/2020/02/mission-impossible-who-director-fights-prevent-pandemic-without-offending-china>

(5) Green A. Li Wenliang. Obituary. Lancet. Feb 18, 2020; 395(10225) :682 <https://doi.org/10.1016/S0140-6736(20)30382-2> ,available at <https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30382-2/fulltext#articleInformation>

(6) Premkumar S. Wuhan to Kochi : An Indian medical student’s great escape from epicentre of coronavirus. Outlook. Mar 16, 2020, available at <https://www.outlookindia.com/magazine/story/india-news-wuhan-to-kochi-an-indian-medical-students-great-escape-from-epicentre-of-coronavirus/302922>

(7) Li S. Racing for the last train out of Wuhan: ‘If I don’t leave now ,I won’t be able to’. Wall Street Journal. Jan 23, 2020, available at <https://www.wsj.com/articles/relief-and-panic-in-the-rush-to-catch-last-trains-from-wuhan-11579791131>

(8) Collman A. 5 Million people left Wuhan before China quarantined the city to contain the coronavirus outbreak. Business Insider. Jan 28, 2020, available at <https://www.businessinsider.in/science/news/5-million-people-left-wuhan-before-china-quarantined-the-city-to-contain-the-coronavirus-outbreak/articleshow/73677674.cms>

(9) Blumenthal D ,Hsio W. Lessons from the East - China’s rapidly evolving health care system. N Engl J Med 2015; 372:1281-1285 DOI: 10.1056/NEJMp1410425 ,available at <https://www.nejm.org/doi/10.1056/NEJMp1410425>

(10) Life expectancy at birth, total (years) - China. World Bank data ,available at <https://data.worldbank.org/indicator/SP.DYN.LE00.IN?locations=CN>

(11) Sharma DC. Fears over plan to privatise India’s district hospitals. Lancet Jan 25, 2020 ;395(10220) : 257 <https://doi.org/10.1016/S0140-6736(20)30117-3> available at <https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30117-3/fulltext>

(12) Bahadur, AS National Rural Health Mission: a failing mission. **Indian Journal of Medical Ethics**, nov. 2016; 7(3) ISSN 0975-5691. avaialble at <https://ijme.in/articles/national-rural-health-mission-a-failing-mission/?galley=html>

(13) Iyer S. Raghuram Rajan’s recipe to revive India’s economic growth. Business Insider. Oct 15, 2019 ,available at <https://www.businessinsider.in/policy/economy/news/raghuram-rajan-gave-ideas-on-how-to-revive-economic-growth-in-india/articleshow/71573594.cms>

(14) Kammowanee R. ASHA’s health services. Social service or care work ? EPW. Dec 14, 2019; 54(49) ,available at <https://www.epw.in/journal/2019/49/commentary/asha-health-services.html>

We accessed all the webpages at the time of submission of this Letter to the Editor.

Dr. Satish Kumar, Senior Resident, Medicine, KG’S Medical University, Lucknow, UP dr.satishkgmu@gmail.com

Dr. Harish Gupta, Associate Professor, Medicine, KG’s Medical University, Lucknow, UP mdkgmc@gmail.com

Dr. Sudhir Kumar Verma, Associate Professor, Medicine, KG’s Medical University, Lucknow , UP 226 003 sudhirkgmu@gmail.com