

From the “Silk Road of Health” to the “Community of Shared Future for Human Health” in a Post-COVID-19 World



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ABSTRACT

The COVID-19 pandemic has exposed many problems and challenges for global public health governance, but the lack of leadership is one of the most serious. To fight against the pandemic, China proposes to the international community a brand-new concept of the "Community of Shared Future for Human Health" and contributes Chinese wisdom and solutions to global health governance. At the bilateral level, China will actively strive for cooperation among major countries in fighting the pandemic. At the regional level, it will use the "Silk Road of Health" as a starting point to enhance health cooperation with countries in the "Belt and Road" Initiative. At the global level, China will actively promote the construction and reform of global health governance mechanisms.

Keywords: community of shared future for human health; COVID-19; global public health governance; Silk Road of Health

THE HISTORY OF HUMANITY'S STRUGGLE against disease is a major part of the history of civilization. From the Black Death in Europe in the 14th century, to smallpox in North America in the 16th century, to the Spanish Flu outbreak in 1918, to the COVID-19 pandemic that ravaged the world in early 2020, the struggle between humans and various epidemics has never stopped. Although human beings have achieved the final victory in each struggle with the plague, it has paid a huge cost of life. Smallpox killed 300 million people in the 20th century alone. Even in the 21st century, with technological development and medical advancement, sudden public health events can still lead to huge casualties. The 2009 outbreak of H1N1 influenza in Mexico and the United States caused more than 280,000 deaths (Xu, 2020). As of February 15, 2021, a total of 109,351,012 people have been diagnosed and 2,408,045 people have died due to the COVID-19 pandemic. Many countries are still on a growth trend (Real-time, 2021).

This COVID-19 pandemic is the rarest global public health crisis that mankind has encountered in the past 100 years and also generated a global governance crisis, which poses a

huge threat to the life and health of mankind as well as to the world economy even worse than the Great Depression in the 1930s (Dan & Mei, 2021). This reflects two major issues. One is that non-traditional security threats, such as major infectious diseases, may occur more frequently in the future and bring more challenges than traditional security threats. The second is that the international community's response to major infectious diseases is full of problems and global public health governance is seriously lagging behind the current situation and urgently needs to strengthen.

For China, this pandemic is a major public health emergency that has the fastest speed of spread, the widest range of infections, and the most difficult prevention and control since the founding of the People's Republic of China. Fortunately, it took China only a month to curb its spread, two months to control the daily new cases within single digits, and about three months to obtain decisive control of the disease in Wuhan City and Hubei Province. Later, China has also successively won several battles to wipe out concentrated epidemics in local areas (Ping, 2020a). With the large-scale use of vac-

cines, China's anti-epidemic measures have become more efficient. To summarize, the successful experience of China is that it has continually practiced the concept of "People First" and "Life First", proposed to the international community a brand-new concept of the "Community of Shared Future for Human Health", and contributed Chinese wisdom and Chinese solutions to global health governance.

The Main Challenges of Global Public Health Governance

The COVID-19 pandemic spread to about 200 countries and regions around the world in just a few months since the beginning of 2020, becoming the most serious security threat facing the international community since World War II. To deal with such unprecedented challenges, the world should sincerely work together, but the actual situation is that the ineffectiveness of global public health governance raises serious concerns regarding the "governance deficit" and the shortcomings of this system. Specifically, these defects are as follows:

First, global public health governance is becoming increasingly difficult nowadays. In recent years, with the accelerating exchange of people across borders, the deterioration of the ecological environment, and the uneven and unstable character of international development, the global spread of infectious diseases has further intensified. Some ancient viruses have resurrected and mutated, and some new diseases reappeared one after another at an unprecedented speed. However, humans' awareness of these viruses is slow, and the detection, clinical treatment, and vaccine research and development require long-term efforts, which makes it difficult to effectively prevent and control them. It can be

said that the threat posed by the spread of the virus is even greater than the consequences of any terrorist act (Min, 2020).

In recent years, with the slowdown in the economic development of developed countries and the increase in domestic problems, trade protectionism, unilateralism, and populism in some developed countries have become increasingly prominent, and their willingness and ability to invest in global governance have decreased.

Second, there is a vacuum in the leadership of the global public health governance system. The global public health governance system brings together many agents such as international organizations, non-governmental organizations, and multinational companies. However, due to the lack of strong leadership, there is more competition between agents than cooperation, policy coordination is lacking, and the inability to share information has worsened (Feng, 2020). For example, although the World Health Organization (WHO) is a United Nations agency responsible for health affairs, which has 194 member states as part of the most authoritative and professional international organization in the field of global public health security, many Western countries claimed that it has not played a positive role in the fight against COVID-19 due to problems such as insufficient authority and shortage of funds (Yong, 2020a).

Third, the willingness and ability of some Western powers to participate in global public health governance have declined significantly. Most of the main participants, promoters, and

leaders of global public health governance are developed countries in the West, and they provide a large amount of medical and health assistance to developing countries. However, in recent years, with the slowdown in the economic development of developed countries and the increase in domestic problems, trade protectionism, unilateralism, and populism in some developed countries have become increasingly prominent, and their willingness and ability to invest in global governance have decreased, which is not helpful to resolve the global "governance deficit" (Zheng, 2020). In particular, since the Trump administration took office, it has been holding high the slogan of "America First", emphasizing that everything should be based on the interests of the United States, and is unwilling to assume due responsibilities as a great power that is so good at flip-flops and withdrawals, which brings a major negative impact to global governance.

Fourth, the global leadership of emerging countries has not yet formed. Since the beginning of the 21st century, emerging economies and developing countries have risen in groups, and their voice and influence in international affairs and global governance have continued to increase, but they still do not have global leadership in the unbalanced international system. Their efforts to promote the supply of global public health products are not yet high enough to reach the heights reached by developed countries, thus creating a dilemma, which is that capable countries do not want to participate in global health governance, and willing countries do not have enough capacity to participate in global health governance.

Fifth, the international community's understanding of human security is seriously lagging behind the current situation. With the advance-

ment of globalization, security issues have become more and more complex, and non-traditional security issues have become increasingly prominent. However, in recent years, "high-level politics" such as competition among major powers and geopolitical competition has not only become more intense, but have also become increasingly fierce, while their attention and resources on "low-level politics", especially global public health, have become less and less, and the actions have become more limited. However, under the context of the COVID-19 pandemic, the importance of "low-level politics" is significantly increasing and the battle between humans and viruses has become the main priority of world politics today. In the future, the devastating harm to humans is likely to be non-traditional security issues like global infectious diseases, climate change, energy and environment, terrorism, network information security, data security, and security of deep sea, polar regions, and outer space (Ye & Li, 2020).



WHO is the most authoritative and professional international organization in the field of global public health security. (Liu Qu / Xinhua)

Building a community with a shared future for human health is the prerequisite, foundation, and inevitable path for building a community with a shared future for mankind.

In the face of the COVID-19 crisis, no country can stand alone. Just as Joseph S. Nye said, if the hegemony that once held a leading position has neither the will nor the ability to provide the necessary global public goods, and the emerging powers are unable to provide it, it will cause a vacuum of leadership in the global governance system, which will lead to a global security crisis, and thus fall into the “Kindleberger Trap” (Nye, 2017). The international community expects major powers to exert leadership and influence and provide global health public products through effective multilateral mechanisms. As the most powerful country in the world, the United States should have coordinated global anti-epidemic actions by exerting its global leadership, but, instead, it retreated into narrow isolationism and nationalism. This is the root of the COVID-19 crisis.

**To Build the “Community of Shared Future for Human Health”:
A Chinese Concept**

Global public health governance requires new ideas and consensus. Under the COVID-19 pandemic, China has proposed the concept of building a “community with a shared future for human health”. This new concept of cooperation is a vivid manifestation of China’s practical actions to build “a community with a shared future for mankind”, which is of increasing significance during the COVID-19 pandemic.

China is an advocate and practitioner of the concept of “a community with a shared future for mankind”. On March 23, 2013, President Xi Jinping put forward to the international community the major initiative of “community of a shared future for mankind” for the first time at the Moscow Institute of International Relations. As he argues, “the degree of interconnection and interdependence among nations has increased unprecedentedly, [and] human beings live in the same global village, in the same time and space where history and reality meet, and become a community of destiny” (Lei, 2020a: par.1). In September 2015 and January 2017, President Xi Jinping explained the concept to the international community at the United Nations headquarters in New York and Geneva respectively, which is highly compatible with the spirit of the “United Nations Charter”. Later, this concept was included in the resolutions of the UN Economic and Social Council, the Security Council, the First Committee of the UN General Assembly, and the Human Rights Council, and has been widely disseminated and arouses increasing attention.

After 7 years, on March 21, 2020, President Xi Jinping expressed his desire to “build a community of shared future for human health” for the first time in a telegram of condolences to French President Macron regarding the COVID-19 pandemic. On May 18, at the opening ceremony of the 73rd World Health Assembly video conference, Xi Jinping put forward an initiative to jointly build a community of shared future for human health, which has attracted continuous attention at home and abroad (Sheng, 2020).

For one thing, building a community with a shared future for human health is the prerequisite, foundation, and inevitable path for building a community with a shared future for mankind.



A China-Europe freight train loaded with anti-epidemic supplies departs from Yiwu, Zhejiang province, for Malaszewicze, Poland. (Gong Xianming/China Daily)

The global spread of the COVID-19 pandemic shows that compared with global issues such as climate change and terrorism, public health crises such as infectious diseases will directly threaten human life, health and safety, and its challenges to the world are fundamental and long-term. Therefore, whether it is “a community of interests and responsibilities” or “a community of security and development”, and whether it is “a bilateral or multilateral community” or “a community of shared future on any issue”, health must be the primary consideration (Hong & Yue, 2020). If there is no human health, the meaning of any community with a shared future will be worthless. Therefore, we must advocate the construction of a community with a shared future for humanity, and it should start with global public health.

Moreover, the concept of a community with a shared future for human health has provided new ethical norms for the international community. Since the outbreak of the COVID-19 pandemic, there have been various statements that contradict human rationality and civilization, such as the “China concealment theory”, “China misleading theory”, “China responsibility theory”, “China compensation theory”, “inferior product export theory”, and “mask diplomacy theory” (Wen, 2020). Some of these remarks are based on the arrogance of Western centrism, while others are based on old power politics and cold-war thinking. There are also certain remarks that uphold the zero-sum game idea, and some insist on racism and xenophobia. Such statements run counter to the core values of a

community with a shared future for humanity and is even more harmful than the virus.

Respecting the right to life and health of the people of all nations and ethnic groups in the world is a necessity. Therefore, the initiative to create a community of shared future for human health demonstrates China's respect for basic human rights.

The right to life and health has nothing to do with national boundaries, race, or social development level. Respecting the right to life and health of the people of all nations and ethnic groups in the world is a necessity. Therefore, the initiative to create a community of shared future for human health demonstrates China's respect for basic human rights and has contributed to getting rid of political system differences, transcending ideological differences, and promoting global political democratization and civilized development.

Western Accusations against China during the COVID-19 Pandemic

From the outbreak of the pandemic to the present, the relationship between China and the world, especially the United States, has roughly gone through the following four stages (Chen, 2020):

The first phase was from January 23 to March 9, when Wuhan was closed. During this period, China was the “epicenter” of the global pandemic. The Chinese people worked together to fight against the virus, and all friendly countries provided necessary assistance and support to China, while the United States was an exception. For example, U.S. Secretary of Trade Wilbur Louis Ross stated that the outbreak of

the COVID-19 pandemic would hurt the Chinese economy and help jobs and manufacturing industry return to the United States (The U.S. Secretary of Commerce, 2020). Moreover, as the spokesperson said, the U.S. government had not provided any substantive assistance to China but was the first to withdraw its consulate personnel from Wuhan, the first to withdraw some of its embassy personnel, and the first to announce comprehensive restrictions on the entry of Chinese citizens, creating and spreading panic among the world (The Ministry of Foreign Affairs of the People's Republic of China, 2020). Of course, this was not to deny the generous assistance of the American people and some civil organizations to China.

The second phase was from the Chinese leaders' inspection of Wuhan from March 10 to April 7. During this period, the pandemic was under control in China, but it was spread rapidly throughout the world. China had also begun to support countries in fighting against the pandemic to return their previous goodwill. In contrast, the US federal government started to “rob” for purchasing faces masks and ventilators around the world whether it was its allies or local governments controlled by the Democratic Party (The United States, 2020).

The third phase was the unblocking of Wuhan from April 8 to April 26. On April 8, Wuhan was reopened, and China's war against the COVID-19 won a substantial victory. From this time on, China began its second round of assistance to the international community and at the same time began to export large amounts of medical supplies to the United States. While during this period, the United States started to target the World Health Organization, criticizing that it helped China to cover up data, and has

always praised China's achievements in fighting the pandemic and its contribution to the world. However, the allies of the United States have expressed their firm support for the WHO. For example, after the video conference of G7 leaders held on April 16, the White House stated that the meeting focused on "the World Health Organization's lack of transparency and long-term mismanagement, and the G7 leaders demanded a comprehensive reform of the World Health Organization". However, the other 6 countries participating in the meeting opposed Trump's rejection of the WHO and expressed strong support for it (Can, 2020).



The United States views public health issue from the perspective of security and politics, and uses the international public health system as a tool to maintain its own interests and hegemony. (Wang Ying / Xinhua)

The fourth phase started on April 27, when the U.S. Democratic Party launched an investigation into the Trump administration's withdrawal from the WHO. At the same time, the Chinese government criticized the U.S. Secretary of State Mike Pompeo for four consecutive days starting from April 27. He had made four major mistakes: first, he threatened to withdraw from the WHO and hinder the global fight against the pandem-

ic. Second, he shifted the blame to China and deliberately incited hatred and confrontation. Third, he exerted "maximum pressure" on Iran, Cuba and other countries, leading to greater humanitarian disasters. Fourth, he stood idly by and disregarded the lives of the people in domestic pandemic prevention and control (Rare, 2020). After that, on May 4, the COVID-19 Global Pledge Conference was held online. The conference was co-hosted by the European Union, the United Kingdom, Canada, France, Germany, Italy, Japan, Norway, and Saudi Arabia. The European Union invested 1 billion euros. EU member states contributed 3 billion euros. Mr Zhang Ming, head of the Chinese Mission to the European Union, also attended the meeting and delivered a speech as a representative of the Chinese government (Representatives, 2020). On May 18, Chinese President Xi Jinping made a promise at the opening ceremony of the 73rd World Health Assembly video conference: "After the research and development of China's novel coronavirus vaccine is completed and put into use, it will serve as a global public product to achieve accessibility and affordability in developing countries" (Ping, 2020b). In contrast, the United States did not participate in this conference and on July 6, the US government announced its formal withdrawal from the WHO.

The United States views public health issues from the perspective of security and politics and uses the international public health system as a tool to maintain its interests and hegemony. Even during the emergency period of the COVID-19 vaccine production, the United States refused to participate in the COVAX (Covid-19 Vaccines Global Access Facility) on September 1, 2020. The extreme self-interest of the Trump administration reflects that the native national-

ism and national egoism of the United States are seriously threatening the overall international anti-epidemic, thus becoming the biggest unfavorable factor and produce serious negative effects on the international public health governance system.

China's Approach to Improve Global Health Governance

The question of how to solve the problem of the supply of global public health products is currently a major issue in global health governance. At present, the United States' lack of willingness and ability to promote global health governance means the end of the global health public product supply model dominated by hegemonic countries. Although China is currently the world's most populous country and the second-largest economy, it still does not have the strength to dominate the supply of global public health products. However, in the future, China should play a bigger role and contribute its approach to global health governance as an emerging power.

First, at the bilateral level, China will actively strive for cooperation among major countries in fighting the pandemic. So far, four response models have emerged around the world to fight against the pandemic, namely the life first model (China), the limited prevention and control model (South Korea, etc.), the economic priority model (the United States), and the laissez-faire model (the UK, etc.). Although the COVID-19 pandemic has been brought under control in China, the price paid is also high, especially the economic price. Therefore, the anti-epidemic strategies adopted by each country are based on differences in social values, political systems, social structures, public health governance systems, and governance capabilities, and there is no obvious distinction between advantages and disadvantages. Although the impact of the pandemic varies from country to country, its final containment is subject to the "cask theory", that is, the epidemic will only disappear after the most severe country is contained. Therefore, great powers need to build consensus and strengthen cooperation and unity, instead of mutual suspicion, mutual accusations, and each does what they think is right.

Since the outbreak of the COVID-19 pandemic, the Western countries' accusations and suspicions against China have never been stopped. From China's perspective, for the health of all humanity, it still needs to embrace hope to join hands with these Western countries. After all, the United States is still in the leading position of vaccines research, diagnosis and treatment experience sharing, and medical equipment supply chain. Back to history, during the Cold War, although the United States and the Soviet Union were rivals in the fields of geopolitics and ideology, they still cooperated in the field of health and jointly participated in the smallpox eradication



A batch of Sinovac vaccine CoronaVac donated by China arrived in the Philippines on Feb. 28, 2021, the first COVID-19 vaccine to reach the Southeast Asian country. (Xinhua, 2021)

campaign initiated by the WHO, which eliminated the smallpox virus from the world (Lei, 2020b). At present, China and the United States, which are so interdependent in the fields of economy, trade and security, should join hands to fight the epidemic, whether for self-interest or global public welfare. Only when both parties actively cooperate and govern together can they lead the international community to overcome the “Kinderberg Trap” of global health governance.

Second, at the regional level, China must use the “Silk Road of Health” framework as a starting point to enhance health cooperation with countries that are part of the “Belt and Road” Initiative. Global public health is a public good. The purpose of global health governance is to continuously and steadily provide more global public health products. For a long time, China has played the role of a “public product consumer” in the international arena, but as China’s strength continues to grow, China has begun to shift from the role of a consumer to a provider of public products. The Belt and Road Initiative is an active attempt by China to provide public goods to the world. In today’s era when global public health products are crucial and severely scarce, China should see its role in this era and be more proactive and effective at providing global public health products (Hong & Chan, 2019). The “Silk Road of Health” can provide regional public health products. If China can release more goodwill to the international community in this way, it will prove to the world that a rising China is a promoter of world peace and development rather than a threat.

However, most Western countries’ interpretations of the “Silk Road of Health” are based on Cold War zero-sum thinking. Some American scholars believe that China hopes to become a leader in the global health field, to replace the

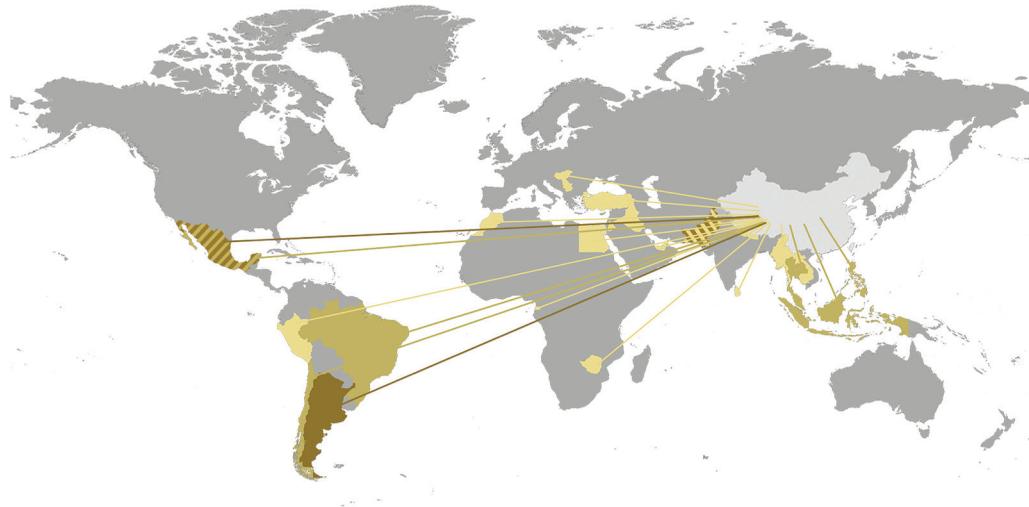
WHO, and to find new markets to advance global interests, thereby covering up the weaknesses of its domestic economy and population (Xiu, 2020). Judging from the performance of China in the COVID-19 pandemic, it has not only developed the concept of building a “community with a shared future for human health”, but also put it into action. First, China has established a regional transnational emergency response mechanism under the framework of the “Belt and Road” to handle global public emergencies. Second, China has shared the pandemic information promptly, strengthened regional joint prevention and control cooperation and policy coordination, and provided point-to-point assistance to countries along the road with more severe epidemics. Finally, the “Belt and Road” global supply chain should be restored as soon as possible to ensure the supply of urgently needed medical supplies and daily necessities around the world (Ye & Li, 2020). The “Belt and Road” Initiative is a useful supplement to the current globalization, including “market globalization”, “production globalization”, and “capital globalization”.



China joined the COVAX in October 2020 and stated that it would give priority to the supply of vaccines to developing countries. (China Daily, 2020)

Chinese vaccines distribution

A growing number of countries are now inoculating its populations with Chinese COVID-19 vaccines.



Sinopharm		Sinovac	CanSino
Serbia	Peru	The Philippines	Pakistan (Emergency use)
Hungary	Equatorial Guinea	Indonesia	Argentina (Clinical trials)
Turkey	Zimbabwe	Malaysia	Mexico (Emergency use)
Pakistan	Egypt	Brazil	
Brunei	Seychelles	Chile	
Cambodia	Morocco	Mexico (Emergency use)	
Laos	United Arab Emirates	Thailand	
Myanmar	Bahrain		
Nepal	Iraq		
Sri Lanka	Jordan (Emergency use)		

Note:
 *Countries listed in the graphic have either bought Chinese COVID-19 vaccines or received vaccine donations from the Chinese government.
 *CanSino vaccine has not been yet approved for general public use neither in China nor other countries.

CGTN

Source: CGTN, 16 February 2021

Third, at the global level, China will actively promote the construction and reform of global health governance mechanisms. The first item on the agenda is to fully support the World Health Organization’s core position in the global health governance system. As the only global multilateral organization in the field of health security, the WHO gives full play to its function of global health governance, becoming the “promoter” of

the concept of a community of shared future for global health security, the “coordinator” of global anti-epidemic cooperation, and the “provider” of global anti-epidemic norms and technologies (Yong, 2020a). Although the WHO still needs structural reforms, its concept is highly compatible with China’s concept of building a community with a shared future for humanity, and China should continue to support it.

The second item is to continue to strengthen the role of the G20 in global health governance. The G20 covers the four major groups of countries: the developed countries represented by the United States, Europe and Japan, the BRICS countries, the medium powers, and international organizations. Because the composition covers a wide range and is highly representative, and the major powers in the world are included, the total economic volume accounts for 80% of the world, so that the cooperation between G20 members can have an important impact on the world politics (Yan & Bo, 2020). One of the purposes of developed countries' support for the establishment of the G20 is to allow emerging economies to share the responsibility of providing global public goods. According to this trend, global health governance has transformed from a "Western-dominated governance" to a "Western and non-Western co-governance" (Yong, 2020b), making it possible for developed and developing countries to jointly provide global public health products.

China actively participates in global public health governance with practical actions and takes the initiative to assume the responsibility of a major country within its capacity.

The third item is to encourage civil forces from all over the world to actively participate in global public health governance. In addition to international multilateral cooperation organizations such as the WHO, the G20, and the BRICS, various non-governmental organizations (NGOs), and individuals in the international com-

munity can also participate in the field of global public health. During this epidemic, the Bill and Melinda Gates Foundation, Jack Ma Foundation, and Alibaba Charity Foundation donated a large number of funds for research and development on vaccines and donated medical supplies such as facemasks, test kits, protective clothing, protective masks, and ventilators to many countries with severe epidemics (Yong, 2020c).

Conclusion

In this great fight against the COVID-19 pandemic, China has not only won precious time for the world to prepare for the pandemic with the most comprehensive, fastest, strictest, and most active anti-epidemic prevention and control measures but also clearly proposed and implemented the concept of "community of a shared future for the human health". Besides, China also actively participates in global public health governance with practical actions and takes the initiative to assume the responsibility of a major country within its capacity.

In response to the COVID-19 epidemic, the Chinese government donated US \$20 million to the WHO. At the 73rd World Health Assembly, China again announced that it would provide "US\$2 billion in international aid within two years" (China's, 2021) to support countries affected by the epidemic, especially the developing countries for the recovery of economic and social development. In October 2020, China joined the COVAX and stated that it would give priority to the supply of vaccines to developing countries, to avoid some of the more affluent countries from launching various restrictions on vaccine sales.



To protect the lives and health of 7 billion people around the world, the international community should establish a more complete global public health governance system to respond to various long-term or sudden global public health conditions. (Zhu Xingxin/China Daily)

China's good performance in the fight against the epidemic and its firm support and assistance to the WHO have also allowed the world to see the important role of developing countries in global health governance. Based on sharing anti-epidemic diagnosis and treatment experience and material assistance with more than 200 countries and regions, China has also established a global humanitarian emergency warehouse and hub, which has greatly improved the efficiency of global anti-epidemic material supply.

China has also promised to make the vaccine a global public product and share it with all countries in the world. It is the first WHO member state to make such a statement and has established a model for the construction of a human health community. Additionally, China will also help African countries to improve their disease prevention and control capabilities and suspend the debt repayment of the poorest countries. This reflects the significance of a common desti-

ny for human health and reflects the responsibility of a major country.

The pandemic will end one day, but the warning it leaves for people is here to stay. To protect the lives and health of 7 billion people around the world, the international community should change its thinking, keep pace with the times in concept, show greater solidarity and cooperation in action, and establish a more complete global public health governance system to respond to various long-term or sudden global public health conditions.

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