



May 12, 2020

Beijing's Deadly Game: Consequences of Excluding Taiwan from the World Health Organization during the COVID-19 Pandemic

Anastasya Lloyd-Damnjanovic, Policy Analyst, Security and Foreign Affairs

Key Findings

- Beijing's influence within the WHO and its pressure on the UN agency to exclude Taiwan undermined global health as the novel coronavirus COVID-19 swept the world in the early months of 2020. WHO officials consistently ignored Taiwan's attempts to exchange information about the virus and share best practices for containing it. Meanwhile, Beijing ramped up military pressure on Taiwan through a series of coercive exercises.
- Taiwan appears to have successfully contained COVID-19 by instituting early and aggressive measures informed by its experience battling the 2003 outbreak of SARS, a respiratory illness that also originated in mainland China. As of May 12, the island had just 440 confirmed cases and seven deaths.
- Taiwan's exclusion from the WHO imperils the health of the island's 23 million people and limits WHO members' access to crucial public health information, jeopardizing global health.

Beijing Intensifies Pressure on Taiwan amid the COVID-19 Pandemic

As COVID-19 spread throughout the world in the early months of 2020, Beijing operationalized ties it had developed over decades within the world's premier public health organization to exclude Taiwan from the international response to the pandemic.* Beijing's sway within the WHO, which has long refused to grant Taiwan membership, was apparent from the start of the crisis, when WHO officials ignored Taiwan's attempts to request information about the virus's potential for human-to-human transmission.¹ In the months that followed, WHO officials repeatedly ignored Taiwan's efforts to share best practices for containing the virus even as they lauded

* Beijing took Taipei's place in the UN in 1971, but its influence at the WHO has expanded dramatically over the past 20 years due to its increased participation, financial contributions, and staffing at the UN agency's highest levels. Current and former WHO directors-general have also furthered Beijing's diplomatic priorities by affirming its "One China" principle. The WHO has upheld Chinese territorial claims by referring to Taiwan as part of China and by stymieing Taiwan's participation in its bodies and technical discussions for decades. While Taiwan was briefly granted observer status to the WHO's World Health Assembly under the name "Chinese Taipei" between 2008 and 2016, it was blocked from participation entirely after President Tsai Ing-wen's election in Taiwan in 2016. China supported the election of WHO Director-General Tedros Adhanom Ghebreyesus in 2017, and the current WHO assistant director-general for communicable and non-communicable diseases is Ren Minghui, a Chinese national long affiliated with China's Ministry of Health.

China for the “transparency” of its response.^{*2} Several hundred Taiwan citizens also found themselves stranded in Wuhan for months as Beijing and Taipei wrangled over the terms of flights back to the island, while Beijing allowed the United States, Japan, and other countries to evacuate their citizens without delay.³ Taiwan’s government does not see itself as a province of China, but both China and the WHO have produced documents about the outbreak in which they portray Taiwan’s public health response as the response of one Chinese province.⁴

With the world distracted by COVID-19, China also intensified its multi-faceted pressure campaign against Taiwan. Chinese military aircraft crossed the median line of the Taiwan Strait three times in the early months of 2020, after only one such incursion in 2019.^{†5} Peoples Liberation Army (PLA) forces participated in a joint air and maritime drill over two days in February involving back-to-back circumnavigating flights around the island, while a Chinese aircraft carrier and attached group of warships sailed near Taiwan in April.⁶ Beijing also continued its efforts to poach Taiwan’s remaining diplomatic allies as the virus spread, threatening to cut off all economic ties with the African nation of Eswatini if it did not break relations with Taipei.⁷

Beijing Undermines Taiwan’s Efforts to Share Its Superior Strategy for Containing the Virus

Taiwan appears to have successfully contained COVID-19 by instituting early and aggressive measures to identify suspected cases, trace their contacts, and enforce quarantines. As of May 12, Taiwan had just 440 confirmed cases and seven deaths. Council on Foreign Relations experts Yu-Jie Chen and Jerome A. Cohen observed that these numbers are “stunningly low ... for a population of 23.6 million” and “particularly impressive given the high level of travel between China and Taiwan.”⁸ Critical measures Taiwan took to contain the spread of the virus include the following:⁹

- Taiwan began screening travelers from Wuhan on December 31, the same day it learned of the outbreak there from Taiwan-based doctors who had communicated with their counterparts on the Mainland.^{‡10}
- Informed by its 2003 experience with SARS, Taiwan’s government activated its Central Epidemic Command Center (CECC) on January 20 to coordinate various ministries’ efforts to manage the growing

* The U.S. Intelligence Community concluded in a classified report to the White House that China concealed the extent of the COVID-19 outbreak in its country, under-reporting both total cases and deaths from the disease. The municipal government in Wuhan, the epicenter of the outbreak, hid the outbreak’s severity for weeks after local medical staff sought to raise the alarm about the mysterious illness. Local authorities reprimanded those doctors for “disseminating rumors,” while China’s state censors removed local news reports about the situation in Wuhan and scrubbed social media platforms of posts from Wuhan residents pleading for medical care and supplies. In the months afterward, state security officials detained citizens who publicly criticized China’s handling of the outbreak and the central government asserted tighter control over the publication of medical research related to COVID-19. At the same time, China launched a robust global propaganda campaign to sow uncertainty about the origins of the virus. For more, see Nick Wadham and Jennifer Jacobs, “China Concealed Extent of Virus Outbreak, U.S. Intelligence Says,” *Bloomberg*, April 1, 2020. <https://www.bloomberg.com/news/articles/2020-04-01/china-concealed-extent-of-virus-outbreak-u-s-intelligence-says>; Emily Feng and Amy Cheng, “Critics Say China Has Suppressed and Censored Information in Coronavirus Outbreak,” *National Public Radio*, February 8, 2020. <https://www.npr.org/sections/goatsandsoda/2020/02/08/803766743/critics-say-china-has-suppressed-and-censored-information-in-coronavirus-outbreak>.

† The deliberate crossing of the Taiwan Strait median line by Chinese fighter aircraft in March 2019 was the first such crossing in 20 years and marked a sharp escalation in the military pressure Beijing has increasingly applied against Taipei since General Secretary of the Chinese Communist Party Xi Jinping assumed power in 2012. The fact that three of these previously rare crossings have been reported in the early months of 2020 indicate that China may be taking a more aggressive approach to the island after its favored candidate failed to win Taiwan’s presidential election in January 2020. Chinese state-affiliated media also linked the February joint drills to Taiwan Vice President-elect Lai Ching-te’s visit to the United States and asserted that the PLA’s flights and naval drills proved that “mainland military capabilities were hindered not one jot by the ongoing novel coronavirus outbreak.” For more information, see U.S.-China Economic and Security Review Commission, *2019 Annual Report to Congress*, November 2019, 449. <https://www.uscc.gov/sites/default/files/2019-11/2019%20Annual%20Report%20to%20Congress.pdf>; John Dotson, “Military Activity and Political Signaling in the Taiwan Strait in Early 2020,” *China Brief*, April 1, 2020. <https://jamestown.org/program/military-activity-and-political-signaling-in-the-taiwan-strait-in-early-2020/>.

‡ China’s health ministry confirmed human-to-human transmission on January 20, but Director-General Tedros said during a January 23 press conference that there was “no evidence of human-to-human transmission outside China” despite reports of the pathogen in at least five other countries. The WHO declined to declare the pandemic a “global health emergency” until January 30.

public health crisis.¹¹ In his capacity as CECC chief, Taiwan’s Health Minister also began providing daily briefings to the public.¹²

- Laboratories in Taiwan developed four-hour test kits and isolated two strains of COVID-19 before February.¹³
- In a single day, Taiwan integrated its national health insurance and immigration databases, creating a tool for health care professionals to identify high-risk cases by viewing a person’s travel history during clinical visits.¹⁴
- Travelers who had recently visited high-risk areas were required to quarantine at home and their movements were surveilled through government-issued cell phones; those who broke the quarantine were heavily fined.¹⁵
- Taiwan proactively retested for COVID-19 those travelers with severe respiratory symptoms who had tested negative for influenza.¹⁶
- The island also boosted the domestic production of masks, directed the state-run postal agency to distribute masks to pharmacies and health centers, instituted a cloud computing system for rationing masks, ran a creative public education campaign, established a fact-checking center to debunk virus-related disinformation, extended academic breaks, closed schools and universities with two or more confirmed cases of COVID-19, disinfected public spaces, and provided financial assistance to workers furloughed during the outbreak, among other policies.¹⁷

Taiwan researchers continue to make advancements in vaccine development, research for targeted drugs, and rapid testing for COVID-19. At least three research trials involving candidate vaccines for COVID-19 are currently underway in Taiwan, including one involving a partnership between Taiwan-based Medigen Vaccine Biologics Corporation and the U.S. National Institutes of Health.¹⁸ Taiwan researchers have made recent breakthroughs related to the production of antibodies and screening of the virus’s protease inhibitors that could aid the development of treatments for COVID-19.¹⁹ Taiwan’s National Health Research Institutes and National Defense Medical Center also announced in early April that they have developed a prototype of a rapid diagnostic test for COVID-19 that could yield results in 15 minutes.²⁰

As Taiwan acted to contain COVID-19 at home and develop globally-applicable medical treatments for the virus, the WHO stonewalled its efforts to share information and participate in public health discussions with WHO member states. According to Taiwan officials, on December 31 the island’s health authorities wrote an email to both Chinese health authorities and representatives of the International Health Regulations (IHR)—a WHO framework for the exchange of epidemic prevention and response data between 196 countries—requesting further information about reports that atypical pneumonia cases were being isolated for treatment in Wuhan.²¹ Taiwan’s Vice President Chen Chien-jen alleged, however, that the IHR ignored Taiwan’s outreach in late December as well as its subsequent attempts to share information with the coordinating body. In an interview with the *Financial Times*, Vice President Chen—who is an epidemiologist by training—said, “While the IHR’s internal website provides a platform for all countries to share information on the epidemic and their response, none of the information shared by our country’s [Centers for Disease Control] is being put up there.”²²

The WHO also published incorrect information regarding the number of COVID-19 cases in Taiwan in early February, prompting U.S. Ambassador to the UN Andrew Bremberg to call on the WHO to engage directly with Taiwan’s health authorities for accurate information.²³ Though the WHO permitted Taiwan experts to participate by video chat in a WHO forum to discuss responses to COVID-19 the same month, they could not interact directly with WHO member states’ representatives or share information about Taiwan’s public health response.²⁴ The WHO said in a March 29 statement that Taiwan’s health authorities can share information through the IHR’s electronic platforms, but Taiwan’s Ministry of Foreign Affairs disputed this characterization, arguing that in reality the information flow was one-way.²⁵

The WHO's leading official also directly attacked Taiwan's government and people in the press. After warning other world leaders against politicizing COVID-19, on April 8 WHO Director-General Tedros Adhanom Ghebreyesus took the unusual step of alleging that Taiwan was behind a slew of racist online attacks and death threats against him, a charge Taiwan's government vehemently denied.²⁶ A recent study by the Australian Strategic Policy Institute found evidence that the social media messages in question were in fact connected to a state-backed disinformation campaign originating from mainland China.²⁷ Taipei-based analyst J. Michael Cole argues that the campaign's purpose was "to discredit Taiwan, to further alienate it from the WHO, and to draw attention away from Taiwan's success in handling the COVID-19 outbreak and generous medical assistance to international partners."²⁸

Implications for the Global Health System and Taiwan

Taiwan's exclusion from the WHO during the COVID-19 pandemic has real implications both for the international community and for the self-governing democratic island. The spread of the virus to 185 countries—with more than 4 million confirmed cases and 286,000 deaths worldwide as of May 12—demonstrates the deadly ramifications of China's influence over the WHO for the international community's pandemic preparedness. Taiwan's exclusion also contributed to critical delays in WHO member states' receipt of timely and accurate guidance in the early days of the COVID-19 pandemic. Had the WHO allowed Taiwan's health experts to share information and best practices in early January, governments around the world could have had more complete information on which to base their public health policies. Such information could have prompted a faster and more effective global response to COVID-19. In this respect, the WHO's suppression of information provided by Taiwan and the delayed issuance of its own guidance undermined the national security of the very member states trusting it for authoritative public health guidance. The lives lost as a result of these missteps offer a tragic reminder of how global health is compromised by the WHO's politically-motivated exclusion of Taiwan, which possesses one of the world's leading healthcare and disease prevention systems. Taiwan's exclusion from the WHO limits timely, complete, and reliable access to its research, best practices, and expertise which in turn compromises global health initiatives.

Beijing's exclusion of Taiwan from consultations within the WHO about global health emergencies—enabled by the active assistance of WHO leadership—also imperils the health of the island's 23 million citizens. Without membership in the WHO, Taiwan's health authorities must rely on media reports or on friendly countries for information about global health crises, risking a delay of potentially life-saving information. Taiwan has so far weathered the COVID-19 outbreak better than most countries, but its lack of membership in the WHO leaves it vulnerable to the vagaries of others during future global health crises. As Council on Foreign Relations researcher Michael Collins points out, the WHO's inclusion of Taiwan as part of China's territory "also overstates the scale of the outbreak on the island, leading to unmerited economic and diplomatic consequences" such as the restrictions some countries imposed on travelers from Taiwan.²⁹

The WHO's founding charter articulates an admirable humanitarian mission: "the attainment by all peoples of the highest possible level of health."³⁰ Without Taiwan's representation in the WHO as an observer or through some other form of meaningful participation, however, this mission is compromised.

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endorsement by the Commission, any individual Commissioner, or the Commission's other professional staff, of the views or conclusions expressed in this staff research report.

Endnotes

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