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Editorial

China's response to COVID-19: a chance for collaboration

April 8 marks a year since China's lifting of the 76-day lockdown in Wuhan—the epicentre of the COVID-19 outbreak. Since the reopening of Wuhan, efforts to control the pandemic in China have thus far successfully prevented resurgence and importation of new cases, while re-establishing the country's social and economic activities. Although China has since had sporadic outbreaks of COVID-19 in several areas, including Beijing and Qingdao, they were all contained. How has China managed to control COVID-19? And is the global scientific community in a position to benefit from China's experiences?

According to the Chinese Center for Disease Control and Prevention, China's strategy was built on active case finding and case management with identification and guarantine of close contacts, as well as risk-based lifting of restrictions. Chinese authorities aim to test each suspected case and all close contacts of those infected. After three COVID-19 cases were identified in October, 2020, in Qingdao, a pooled testing approach coordinated by the government with the cooperation of residents enabled 10.9 million people-almost the entire population of the city-to be tested within 5 days. Although few COVID-19 cases have been reported, people are generally adhering to non-pharmaceutical interventions, such as avoiding large gatherings. After the government urged people to abandon travel plans, and with local governments imposing strict quarantine measures, there was a 70% drop in the number of passenger trips across the country in the 2 weeks leading up to the Chinese Lunar New Year this year, compared with the same period in 2019. China's public health measures, as well as the public's compliance, largely owing to high trust in the government, have contributed to the effective response. Elements of China's approach, such as those that involve monitoring citizens' whereabouts, might not be countenanced in many western countries. However, China's domestic successes in controlling COVID-19 stand in contrast with outcomes elsewhere, and other countries should learn what public health lessons they can.

Internationally though, there is a high level of scepticism towards China. Anti-China sentiment has intensified. With respect to science, transparency over data is a continuing point of contention. After the WHO–China joint report investigating SARS-CoV-2 origins, published on March 30, Tedros Adhanom Ghebreyesus, WHO Director-General, commented on the international team's work in Wuhan: "In my discussions with the team, they expressed the difficulties they encountered in accessing raw data. I expect future collaborative studies to include more timely and comprehensive data sharing."

Lack of transparency is also an issue for Chinese COVID-19 vaccines. China had administered over 100 million doses of domestically developed vaccines by March 27, 2021, and it aims to vaccinate around half a billion people (40% of the Chinese population) by the end of July, 2021. The first Chinese vaccine, manufactured by Sinopharm, was approved by domestic regulators on Dec 30, 2020. Other vaccines have been approved in subsequent months. However, as we go to press, no phase 3 trial results for any China-developed vaccine have been published in a peer-reviewed journal. The Chinese regulator promised to continue monitoring the vaccines, but very little post-marketing surveillance data are available. Global access to more vaccines could make an important impact on the trajectory of the pandemic, and WHO hopes to issue recommendations on Chinese inactivated vaccines by the end of April, 2021. Having comprehensive data publicly available is imperative for understanding the efficacy and safety of these vaccines, which is vital for building trust in them.

When it comes to science and health, collaboration is much more productive than antagonism. In a Viewpoint, Liming Li and colleagues argue that strong US–China collaboration on matters of medicine is crucial for efforts against COVID-19 and future pandemics. They also highlight other common health interests of China and the USA, including non-communicable diseases, global health, mental health, ageing, urbanisation, and climate change. They call for the restoration of partnerships on health and medicine between government agencies, as well as the academic and scientific communities.

Such collaborations are as important now as ever. Learning from each other has advanced health and science in China and the rest of the world. Global health challenges require global responses and cooperation. These bonds are built on transparency, trust, and mutual goals. This is not a time for blame or competition between countries but a time to work together on the common threats to all people. The Lancet





For more on China's tackling of the COVID-19 pandemic see Health Policy Lancet 2020; 396: 63-70

For more on the **rapid response** to a COVID-19 outbreak in Qingdao see N Engl J Med 2020; 383: e129

For more on the **reduction in travel across China during the Lunar New Year celebrations** see https://www.reuters.com/ article/china-travel-lunarnewyear-idCNL4N2KI08Q

For more on **vaccination aims in China** see https://www.reuters. com/article/us-healthcoronavirus-china-vaccineidUSKBN2AU0J9

For more on WHO's hopes to issue recommendations on Chinese vaccines see https:// www.reuters.com/article/ushealth-coronavirus-who-chinavaccines-idUSKBN2BN1K8

For more on the **approval of the Sinopharm vaccine** see http:// english.nmpa.gov.cn/2020-12/31/c_579192.htm

For Liming Li and colleagues' comments on US-China collaboration see Viewpoint Lancet 2021; published online April 8. https://doi.org/10.1016/ S0140-6736(21)00734-0