

Government Legitimacy and International Image: Why Variations Occurred in China's Responses to COVID-19

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This paper examines the Chinese government's response to four epidemic crises, including COVID-19, and analyzes the similarities and differences in these responses. It argues that while the Chinese government learned from previous epidemics and improved its handling of subsequent outbreaks, a significant variation occurred during the COVID-19 pandemic, which had a detrimental impact globally. Existing scholarly research on China's epidemic responses has often been limited in scope, focusing on individual crises and neglecting the central-local government relationship in crisis decision-making. By adopting a comprehensive approach, this paper delves into the nuanced dynamics of China's responses to these epidemics. It highlights the variations in responses, attributing them to the Chinese government's fear of undermined legitimacy and its consideration of its international image. The government's recognition of the importance of public perception and trust, both domestically and globally, has shaped its crisis management strategies. Through a detailed analysis of these factors, this paper contributes to a deeper understanding of the variations observed in China's epidemic responses. It emphasizes the significance of the central-local government relationship and the government's international image in determining its actions during epidemics. Recognizing these factors can provide policymakers and researchers with insights to shape future epidemic response strategies and foster effective global health governance.

Keywords: China, epidemic response, COVID-19, central-local government relationship, legitimacy, international image, public perception, crisis decision-making, global health governance.

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Introduction

The Chinese government's handling of the COVID-19 pandemic presents a compelling study when compared to its management of the past three major epidemics—SARS in 2002-2003, H1N1 in 2009, and H7N9 in 2013. The SARS epidemic marked a turning point for China's disease control, prompting substantial reforms. Initially, China was criticized for its lack of transparency and slow response, which contributed to the virus's spread. The Chinese government, learning from the international backlash, revamped its health surveillance and public health emergency response system. In 2009, when H1N1 emerged, the Chinese government demonstrated a marked improvement in its response. Notably, it adopted a more proactive approach, such as early reporting of the cases to the World Health Organization (WHO) and implementation of stringent control measures. During the H7N9 outbreak in 2013, China further refined its approach, showing more transparency and cooperation with international health agencies. It promptly reported cases, shared virus samples for global research, and implemented aggressive control measures. However, the COVID-19 pandemic in 2019-2020 saw a mix of advancements and regressions. China's early response was criticized for its lack of transparency, reminiscent of the SARS epidemic. However, once the severity of the situation was recognized, China implemented unprecedented containment measures, such as the large-scale and swift lockdown of Wuhan.

The variations in China's responses to the four major pandemics of the 21st century — SARS, H1N1, H7N9, and COVID-19 — pose a conundrum for scholars and policymakers. At first glance, one might anticipate a linear progression in the Chinese government's management of these health crises, given the chronological unfolding of events and the expected accumulation of expertise. However, the reality deviates from such a straightforward trajectory. The disparities in China's pandemic responses aren't solely attributable to evolving biomedical insights or enhanced capabilities. Rather, they seem influenced by shifting political dynamics, both domestically and on the international stage. These shifts aren't uniform, and pinpointing the exact reasons behind each one is often elusive. What makes this variation even more compelling is its occurrence within a consistent political backdrop: the authoritarian governance of the Chinese Communist Party. In contrast to comparative studies spanning nations with varied political, economic, and societal structures, these variations emerged within a singular, fairly consistent political setting. These differences are particularly intriguing given their potential ramifications for global health governance. With its vast population and global ties, China's pandemic management strategy holds significant weight. Grasping the rationale behind these variations is pivotal for forecasting and gearing up for ensuing global health challenges. Consequently, the challenge lies in decoding this enigma, pinpointing the core drivers behind these differences, and understanding their broader implications. This endeavor is not only vital for a scholarly grasp of China's public health approach and crisis handling but also for the practical aspects of global health security.

Applying the lens of political economy, this paper critically examines the varying approaches adopted by the Chinese government in managing the four significant pandemics of the 21st century: SARS in 2002-2003, H1N1 in 2009, H7N9 in 2013, and COVID-19 in 2019-2020. This approach enables a comprehensive exploration of how political objectives and economic realities have influenced policy choices and crisis management. Through a systematic review of China's

pandemic responses, this study seeks to understand the underlying factors driving these variations. The central argument presented in this paper is that the variations in China's pandemic responses were largely influenced by two interrelated factors: the Chinese Communist Party's fear of an undermined legitimacy and its consideration of its international image. Firstly, the paper explores how the Chinese government's concern for maintaining domestic legitimacy significantly shaped its management of these health crises. Under the Chinese Communist Party's rule, public health crises can be double-edged: while successful management may bolster the regime's legitimacy, failure or perceived failure can have destabilizing effects. Thus, each of these pandemics presented unique challenges and opportunities for the government in terms of domestic legitimacy. Secondly, this paper examines how China's consideration of its international image influenced its pandemic response strategies. In the era of globalization, China has been increasingly mindful of its role on the global stage. Its handling of public health crises, particularly pandemics that threaten global health security, significantly impacts its international reputation. This paper argues that China's pandemic responses were not only driven by domestic public health considerations but also by its strategic foreign policy interests. By examining these two factors, this paper contributes to a more meticulous understanding of the political dynamics underpinning China's public health responses. It sheds light on the complex interplay between domestic politics and international relations in shaping state behavior during public health crises—a topic of increasing relevance in our interconnected world.

1.1 Research Methods

To effectively investigate our research questions, this study employs a multi-method approach, incorporating comparative case study analysis and literature review. The comparative case study methodology involves an in-depth exploration of the Chinese government's responses to four different epidemics - SARS, H1N1, H7N9, and COVID-19. This approach is valuable as it allows for detailed understanding of the intricate interplay of political, economic, and social factors shaping China's responses to these health crises, situated within their unique real-world contexts. Contrasting and evaluating China's responses across these different epidemics will provide a platform to underscore the variations and commonalities, thus elucidating patterns, trends, and underlying driving forces. Each case represents a unique intersection of disease characteristics, global context, and China's domestic political-economic conditions.

Alongside case study analysis, a literature analysis forms an integral part of the research process. It entails a thorough examination of previous scholarly works, academic articles, and theoretical concepts related to China's epidemic responses, political economy, and the central-local government relationship. The literature review helps establish the theoretical foundation, locate the current research within the broader academic discourse, and identify gaps that the present study aims to address. Data collection incorporates primary and secondary sources. Primary sources include official Chinese government communications, policy documents, and speeches that reflect direct government decision-making and strategy during each epidemic. Secondary sources include academic articles, news reports, and health organization records, offering a diverse range of

perspectives and supplementary contextual understanding. The paper also applies the Political Economy framework to each case. This systematic process involves examining the government's decisions and actions in light of the prevailing economic considerations. It aims to unearth how political and economic factors have influenced China's responses to each epidemic and understand the domestic and international implications of such decisions.

By integrating comparative case study analysis with literature review and underpinning it with the application of the Political Economy framework, this offers a robust and comprehensive approach, aiming to yield a comprehensive understanding of the complexities of China's epidemic response strategies, their evolution, and their broader implications.

2.1 The Political Economy of China's Response to Epidemics

In understanding China's diverse responses to epidemics, it's vital to embrace a theoretical framework that recognizes the intertwined nature of political actions and economic realities. A pertinent perspective is the Political Economy theory, a salient instrument that underscores the intricate interplay between political and economic influences in policy formulation processes (Hall & Soskice, 2001). Economic scenarios can mold political actions, and reciprocally, chosen political strategies can sway economic outcomes (Hodgson, 2019).

Employing this framework to analyze China's epidemic responses yields a holistic comprehension of these public health challenges. It underscores the Chinese government's strategic equilibrium between political aspirations and economic objectives. As elucidated by Shambaugh (1995), China's relentless pursuit of economic stability deeply influences its policy choices.

This interrelation becomes palpably evident in the early phases of an epidemic. Swift acknowledgment and thorough management of a health crisis could usher in economic disturbances, encompassing hampered trade, dwindling tourism, and a decline in consumer assurance (Bloom et al., 2018). In contrast, political resolutions in addressing an epidemic, such as measures for disease containment, public outreach, and resource orchestration, can profoundly affect the nation's economic vitality (Morse, 1995).

Consequently, the Political Economy theory serves as an illuminative lens in dissecting China's choices during assorted epidemics. This model fosters an understanding of the nexus between political actions and economic realities, revealing the nuances in China's approach to public health challenges. Thus, examining China's epidemic actions through this theoretical prism enhances the overarching comprehension of the dynamic confluence of political and economic variables in sculpting national health responses.

This investigation stands as a pivotal theoretical addition to the domain of political economy, as it harnesses its principles to dissect China's reactions to four separate epidemics. Through the prism of political economy, the manuscript brings forth a fresh viewpoint on the intricate dance between political drives and economic variables amidst public health emergencies. Explicitly, the research delves into the convergence of economic drivers with political imperatives in molding the Chinese government's tactics during epidemic events. By harnessing the Political Economy theory, the

paper unravels foundational economic motivations and limitations that steer decision-making trajectories. A distinguishing feature of this study is its deep dive into the relationship between central and local governance within this framework. Such scrutiny reveals the ebb and flow of economic agendas across governance tiers and their synthesis with overarching political objectives. By spotlighting how economic drivers evolve within a stratified governance landscape, the manuscript amplifies our grasp of the sophisticated power interplay guiding epidemic response stratagems.

The study's theoretical framework gains further prominence through its comprehensive analysis of responses to four distinct epidemics. By juxtaposing the responses to various epidemics, the paper allows for the identification of commonalities and variations across cases, unveiling overarching trends that might have been overlooked in isolated analyses. Unlike previous studies that individually address specific epidemic cases (Lee and Warner, 2007; Ryan, 2014; MacPhail, 2009), this study systematically examines all four cases collectively, adding depth to the understanding of how political economy dynamics interact with epidemic responses.

While earlier studies offer valuable insights into individual epidemics, this study's contribution lies in its application of Political Economy theory to understand the reasons underlying response variations. By synthesizing these factors within the theoretical framework, this study offers a holistic understanding of how economic interests, political dynamics, central-local governance, and public sentiments interact and shape China's crisis management strategies. This novel approach contributes to the existing literature by presenting a comprehensive analysis that examines the broader context within which China's responses to epidemics unfold, highlighting the multifaceted intersections of economic and political considerations.

2.2 The Chinese Government's Responses

From the Chinese government's perspective, an epidemic is defined as an infectious agent that necessitates actions by the Chinese central government. This definition encompasses diseases such as SARS, Avian Influenza, H1N1, and COVID-19. During the SARS outbreak between 2002 and 2003, the epidemic infected at least 8,098 people and killed a minimum of 774 people worldwide, yielding a fatality rate of 9.6% (Smith, 2006). The local provincial authorities received reports on the new virus from hospitals within their jurisdiction but chose not to inform the central government for several months. Initially, the Chinese government discouraged its media from reporting on SARS and deliberately delayed its reports to the WHO (Huang, 2004). The central government also refrained from informing other provinces and Chinese citizens outside the Guangdong province—the origin of the virus—about the disease during the early stages of the outbreak (Smith, 2006). It was not until April 2003 that the Chinese government finally shifted its policy on concealing the truth and severity of the virus, a change influenced in part by significant international criticism (Fewsmith, 2003). The WHO team that was sent to China was denied permission by the central government to visit Guangdong for several weeks (International Dimensions of Ethic Education in Science and Engineering, 2009). These decisions were collectively made by the central government and the Ministry of Health, informed by

recommendations from the local government of Guangdong. Once the central government altered its stance on disclosure, they began welcoming foreign aid and experts to combat the virus. For instance, just in Fanxi city of Hubei Province, the city hosted 60 foreign experts and their families from over 8 countries (Office of CCP Hubei Foreign Affairs Committee, 2003). Domestically, while the central government did not impose a complete lockdown as it did in Wuhan for COVID-19, schools were closed, and major events, including the Chinese Jia-A Soccer League 2003, were either canceled or postponed (China News Site, 2003). An important policy to note, implemented after the SARS outbreak, is the central government's new law. This mandates local governments to report to the central authorities within a specified timeframe if a new infectious disease emerges (Science Net, 2003).

During the SARS epidemic, the initial choice of the Chinese government to withhold the severity of the situation can be interpreted through a Political Economy lens. The decision to suppress the reality of the outbreak was a political maneuver, heavily influenced by potential economic consequences. Unveiling the epidemic's truth prematurely could have induced a level of economic instability, particularly due to potential impacts on trade, tourism, and overall business confidence.

However, the consequences of this cover-up had profound implications. When the true extent of the SARS epidemic came to light, the political fallout was immediate and severe, leading to significant damage to China's international reputation. Economically, the repercussions included disruption to global supply chains and increased hesitation among international businesses and investors to engage with China. Thus, the Chinese government's initial political decision, driven by economic considerations, had substantial political and economic consequences on an international scale.

The H1N1 flu, although it did not originate in China, infected at least 120,398 people and killed at least 648 people in the country (PRC Ministry of Health, 2013). The central government made no attempt to hide the H1N1 situation; in fact, it demonstrated transparency about the disease. Notably, all the information regarding the H1N1 epidemic came from sources outside of China, delivered directly to central government officials. The local governments were not involved in the early decision-making process, except for executing quarantine measures. The Chinese Ministry of Health, following the central government's guidance, issued a swine flu prevention guide at the end of April 2009, two weeks before the first reported case in China. After confirming the first case, the government promptly shared the travel information of the country's patient zero (Wei, 2016). During the H1N1 flu outbreak, China also welcomed foreign aid and support. With assistance from WHO and USCDC, the central government expanded its influenza-like illness (ILI) and virologic surveillance system to 411 laboratories and 556 sentinel hospitals. The China-US collaboration during the outbreak bolstered the country's capacity to manage epidemics by providing training and introducing new laboratory testing technologies (Shu et al., 2019). The central government employed the same quarantine measures as those used during the SARS outbreak. Before reporting its first confirmed case, the country banned flights from Mexico, a region heavily affected by the virus. For over two months, China was the only country conducting on-board temperature checks and quarantining groups of passengers. Two months after its first confirmed case, the central government had placed tens of thousands of people, including foreign

schoolchildren, into government-designated quarantine facilities (Huang, 2009).

During the H7N9 avian flu outbreak, recognizing that transparency could help quell rumors and maintain social stability, the central government opted for transparency once more (Wei, 2016). Notably, this epidemic began by spreading among birds, indicating to scientists and governments the potential for human transmission. From the onset, the central government of China took the helm, sidelining local governments. Upon confirming the first H7N9 avian flu case on March 30, 2013, China released the patient's comprehensive medical history. Merely four days later, on April 3, the Chinese Ministry of Health published a H7N9-infection prevention guide (Wei, 2016). The international community observed China's heightened commitment and cooperation in addressing the epidemic (China Daily, 2013). China emphasized its dual role as both a donor and a recipient of international assistance. For instance, with the support of the U.S. Department of Health and Human Services, China and the U.S. co-developed a platform focusing on infectious diseases, primarily avian flu (Congressional-Executive Commission on China, 2006). Domestically, the government imposed rigorous restrictions on not only human travel but also on the movement of birds and other animals (The Press Office of the PRC Ministry of Agriculture, 2013). Concerned about potential economic fallout on its poultry industry and food security, the government acted decisively, closing live poultry markets and culling birds. Despite these measures' economic implications, public health and the prevention of international spread remained paramount, highlighting the intricate balance between economic and political factors.

For COVID-19, at the beginning of the outbreak, the Chinese government's transparency faltered. Echoing the SARS situation, this coronavirus initially emerged in one Chinese province. The local governments of Wuhan and Hubei, upon identifying the potential new virus, initially kept it under wraps. This concealment decision rested with the local government. Notably, Wuhan's government even arrested and publicly shamed the whistleblowers who warned of a novel virus outbreak (Steinbuch, 2020), possibly reflecting economic and political apprehensions. Being forthright might have incited panic, with consequent economic and political ramifications. This stance mirrored the considerations during the SARS outbreak. Given the central government's public censure of Wuhan and the dismissal of local officials, the decision to stifle whistleblowers and obfuscate the virus's real situation likely involved several key figures, including Jiang Chaoliang, Wang Xiaodong, Zhang Qin, Xia Guohua, Meng Wukang, and Huang Zhitong (RFI, 2020). Furthermore, the central government initially displayed reluctance to international cooperation, rebuffing assistance from the WHO and the U.S. until February when infections surpassed 35,000 (Italiano, 2020). It's probable that Xi Jinping, as the paramount leader, endorsed this stance. Xi has asserted his leadership and decision-making role throughout the epidemic (RFI, 2020).

It is instructive to present an overview of China's responses to the four major epidemics under examination in this study: SARS, H1N1, H7N9, and COVID-19. The Chinese government responses are divided into three different perspectives: its transparency of the reporting of the epidemic, its willingness to cooperate, and its domestic measures taken, and in each category, the Chinese government's response are characterized as either low or high. See table 1 for a concise

overview of China's varying responses to the SARS, H1N1, H7N9, and COVID-19 epidemics, as well as the annotations that explain the rationale behind categorizing each response as low or high in terms of transparency, willingness to cooperate, and domestic measures. The death toll for each epidemic is also provided for context. Please see table 1 for a comparison of the variation of the Chinese government's response to the four outbreaks. The data are collected from various sources including, CDC, WHO, and government files.

Transparency in Reporting the Epidemic: The level of transparency a government exhibits during a pandemic are critical to both domestic and international responses. Transparency, or the lack thereof, can significantly impact the speed of response, the effectiveness of containment measures, and the level of public trust. By examining China's transparency during these epidemics, we can better understand the interplay between political considerations and public health communication.

Willingness to Cooperate Internationally: Infectious diseases do not respect national borders, making international cooperation crucial for effective response and mitigation. Studying China's willingness to cooperate—its sharing of information, collaboration with international organizations, and participation in global health initiatives—provides insights into the dynamics of global health governance. It also speaks to China's role in the international community and its evolving foreign policy strategies.

Domestic Measures Taken: Examining the range and efficacy of domestic measures China implemented—such as lockdowns, testing regimes, and healthcare mobilization—sheds light on its capacity for emergency response and crisis management. This analysis can inform our understanding of the government's capabilities, its prioritization of public health, and the potential social, economic, and political impacts of its measures.

Table 1

A comparison of the variation of the Chinese government's response to the four outbreaks.

	Outbreak Time and Location:	Chinese Government's Transparency of the reporting of the epidemic:	Chinese Government's Willingness to Cooperate:	Chinese Government's domestic measures:	Death Toll:
SARS	November 2002, China	Low	Low	Low	774 killed worldwide (CDC, 2017).
H1N1 Flu	April 2009, Mexico	High	High	High	18,036 killed worldwide (WHO, 2010).
H7N9 Avian Flu	March 2013, China	High	High	High	Approximately 620 killed (CDC, 2017).

COVID-19	January 2020, China	Low	Low	High	Ongoing
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The evaluation of the Chinese government's responses to different outbreaks in terms of transparency, cooperation, and domestic measures reveals a distinct pattern. In the case of SARS November 2002 outbreak in China, characterized as "Low" across all categories, the government's lack of transparency is evident as it concealed the situation for six months. Furthermore, the government's reluctance to cooperate is apparent from its rejection of the WHO research team and initial delays in reporting. Domestic measures were limited, with no cities placed under lockdown and only cancellations of schools and major events.

In contrast, the H1N1 outbreak in Mexico marked a significant shift towards a "High" rating in all categories. The Chinese government proactively shared warnings and travel guides ahead of the first case in China, displaying transparency. High levels of cooperation were witnessed through acceptance of foreign aid and close collaboration with the U.S. The government's willingness to cooperate extended to the implementation of measures such as banning flights from Mexico and pioneering in-flight temperature checks for an extended duration.

The March 2013 H7N9 outbreak in China also showcased "High" ratings across the board. The government demonstrated transparency by publishing detailed medical information promptly after the first confirmed case. Robust cooperation was observed through mutual support between China and the U.S., as well as immediate acceptance and provision of foreign assistance. The domestic response was robust as well, with the imposition of quarantines on humans and animals alike.

In the case of COVID-19 outbreak in China, the government's responses varied. The government's response was marked by a lack of transparency, as evidenced by the arrest and public shaming of whistleblowers who had forewarned about the potential virus outbreak. Moreover, the government's willingness to cooperate remained relatively low, as it only accepted help from the U.S. after a considerable number of infections had occurred. On the domestic front, stringent measures were enforced, including city lockdowns and event cancellations.

The Chinese government's approach to handling COVID-19 contrasts sharply with its responses to earlier epidemics. If lessons were indeed learned from past outbreaks, the question arises: why such variance in reactions from the central Chinese government? Our exploration of China's epidemic responses isn't merely because some of these diseases originated there, but rather due to China's intricate web of global ties. A single decision from Beijing can reverberate worldwide. The globalization movement, fortified by President Deng Xiaoping's 1980s economic reforms, catapulted China to its position as the world's second-largest economy (World Bank, 2020). An economic setback in such an economic behemoth, boasting the world's largest population, would inevitably ripple globally (International Monetary Fund, 2018). Epidemics, while primarily health concerns, also cripple economies by sidelining the sick and their caregivers, thereby eroding labor

productivity. Even with a limited health footprint, the economic aftershocks of an epidemic can be extensive (Bloom, 2018). Hence, decoding the Chinese government's epidemic response is vital, especially considering China sees over 140 million inbound travelers yearly, averaging 400,000 daily (TCG, 2020).

A further incentive for closely examining China's responses lies in the unpredictable nature of its policies. Operating under a single-party authoritarian regime, China's policymaking isn't always transparent. Unlike democracies such as the U.S., the inner workings of China's decision-making process remain elusive. Turning to historical literature that unpacks China's past decisions offers valuable insights, especially when the one-party system often obscures events from immediate public view.

3 The Decision-making Process

Swaine et al. (2006) posits that since the Deng Xiaoping era, the decision-making mechanism of the Chinese government has evolved to be more collective. This means that the bureaucratic and political inclinations of both civilian and senior leaders can sway Beijing's decisions. Using the Jiang Zemin and Hu Jintao administrations as case studies, Swaine et al. underscores that senior leaders have become more reliant on subordinate bureaucracies for vital information. State, party organs, policy-making procedures, and even government-affiliated scholars have progressively influenced the crisis perceptions of leaders like Jiang Zemin and Hu Jintao in the post-Deng era (excluding Xi Jinping). This intricate and institutionalized decision-making process implies that the paramount leader possesses limited control over facets like intelligence gathering and policy implementation (Swaine, 2006). This theory is evident during the avian flu outbreak when President Hu Jintao relied heavily on his subordinates for policymaking (People's Daily, 2004).

Scobell and Wortzel (2005) scrutinize the Chinese government's decision-making during the SARS outbreak. While Swaine et al. (2006) does not directly link epidemic responses to Chinese leadership decision-making, Scobell and Wortzel's findings resonate with his theory. They highlight the role of subordinate entities like Huang Qingdao of the Guangdong Health Department and the Guangdong Party Secretary, Zhang Dejiang. For instance, in February, the CCP propaganda organization instructed media to underscore that the SARS situation was under control. Sun (2013) delineates that daily national security affairs fall under the paramount leader's jurisdiction. However, emergencies warrant the Politburo Standing Committee of the Communist Party of China's (PBSC) intervention. Significant policy shifts are determined by the Politburo, with critical amendments requiring the Central Committee's vote. Although Sun doesn't expound on epidemic-related decisions, his classifications would categorize such crises as strategic issues under the PBSC.

Contrastingly, He (2018) suggests that under President Xi Jinping, there's been a deviation from the decentralization trend of the past two decades. President Xi seems keen on reclaiming the unchallenged authority reminiscent of Mao and Deng. A key feature of his tenure is the formation and fortification of "leading groups" in economic policymaking. Wang and Zhang (2018), renowned professors at Peking University, assert a shift in the decision-making process from a top-down approach to one where local governments are more public-responsive. While their

observations align with Sun's for regular policymaking, they overlook crises, especially those challenging the CCP's authority. Yu (2015) perceives a budding civil society in China's modern decision-making matrix, leading to legal system overhauls and grassroots elections in rural regions. While this may be true for China's hinterlands, it seems inapplicable to central government-led crisis decisions.

Zheng, Jong, and Koppenjan (2010) have concluded that the body of the policy network theory is useful to describe and explain decision-making processes in the Chinese context. However, certain restrictions occur in the generic model when capturing the fundamentally different political and administrative systems, crucially different cultural values in the applicability of some research methods common in Western countries. The context and theory are indeed applicable in most cases, however, again, the authors did not consider the case of an epidemic crisis. Allison (1999) claims that corporate structures (what he names SOP, "standard operating procedures") and bureaucratically influenced policies affect decisions, and that objective decision-taking judgments (national security) do not adequately reflect the factors that shape policy making and execution. Although Allison did not take the Chinese government as an example, his organizational process model and governmental politics model could somewhat apply to the Chinese government's decision-making process during the epidemic outbreaks. Lieberthal (2004) discusses the application of the fragmented authoritarianism which argues that the authority below the very peak of the Chinese political system is fragmented and disjointed. The model somewhat echoes Allison's point that rational problem-solving and decision-making often occur. However, the structure of bureaucratic authority and the realities of bureaucratic practice that affect both the elites at the top and the basic institutional blocks of the system.

When it comes to decision-making processes regarding foreign affairs, Jakobson and Manuel (2018) argue that 'Leading Small Groups' (LSGs) or committees that advise the leaders on how they should proceed on any given issue of interest are often the key decision-making body. The most important LSGs are attached to the Central Committee, and through that, they report to the PSC. All of the major LSGs dealing with foreign or security decisions have at least one or two representatives from the propaganda organs of the Party, and they often outrank all the other members in the small group. The existence of the LSGs and representatives from the propaganda organs is to make sure that China looks good in the international community when making a foreign affairs decision. Mintz, Redd, and Tal-Shir (2017) indicate that the decision-makers are sensitive to both cognitive and environmental constraints and are much more likely to concentrate on the political consequences of their decisions. Although this theory has been widely tested on cases of Western countries, it seems rather naïve due to the cultural and systematic difference between the Chinese government and that of a Western country. This, however, does not mean it will not provide value to this research.

The literatures we currently have regarding the Chinese government's decision-making process either did not consider the decision-making process during the epidemic crisis happened in China or did not look at these crises comprehensively at the same time, and they often ignored the

relationship between central authorities and local authorities during crisis decision-making. This research examines the Chinese government's decision-making process by looking at its behaviors during the current, and the past 3 epidemics that occurred in China, while identifying the critical factors that caused the variations in its policy in connection with the Political Economy Theory; no scholars have done this previously. The paper contributes by providing a clearer image of how Chinese government makes decisions in a crisis and answers the question of why variation occurred in the Chinese government's responses during the epidemics.

The central government's decision-making process regarding epidemic responses, within the political economy framework, can be understood as an intricate interplay of political stability, economic factors, and health outcomes. This process is not linear, but rather cyclical and dynamic, contingent on multiple variables and interests.

The first variable influencing decision-making involves the inherent tension between political stability and economic prosperity. The central government, to ensure its political legitimacy, places a high priority on maintaining economic stability. Therefore, in situations where epidemics threaten economic stability, such as COVID-19, the initial response often leans towards minimizing economic disruption. This explains why during the onset of COVID-19, China delayed implementing rigorous containment measures that could have hampered economic activity.

The second variable involves international relations and global economic positioning. In the era of globalization, China's standing in the global economy greatly influences its decision-making (Naughton, 2021). For example, China's desire to appear as a responsible global player and an appealing trading partner shaped its handling of the H1N1 and H7N9 epidemics. This understanding allows us to view China's acceptance of international cooperation during these outbreaks, not merely as a health response, but also as a strategic maneuver to maintain its international image.

The third variable is the relationship between central and local governments. In the Political Economy context, this interplay can be seen as the balance between centralized decision-making, often geared towards national interests, and localized implementation, frequently influenced by local economic circumstances and capacities (Montinola et al., 1995). This dynamic was particularly apparent during the COVID-19 crisis, where provincial and local governments played significant roles in containment measures, often influenced by local economic considerations and capacities.

In sum, the decision-making process of the Chinese central government in the face of epidemics should be seen as an iterative and dynamic process. It balances the overarching political goal of maintaining stability, the pursuit of economic prosperity, and the reality of health crises. This perspective provides a fresh insight into understanding China's varied responses to epidemics, including the contentious response to the COVID-19 pandemic.

4.1 The Fear of an Undermined Legitimacy

One reason behind the Chinese government's initial response during the COVID-19 pandemic is

its fear of an undermined legitimacy. The similarity between the SARS outbreak and the current COVID-19 pandemic is that both were initially covered up and buried by the local Chinese government, specifically by the Guangdong government for SARS and the Wuhan government for COVID-19. It should be noted that they weren't attempting to conceal the situation from the rest of China and its citizens; instead, they were trying to hide the truth from their superiors in the central government of China. It is important to realize that the disease started to spread in November 2002, and the Guangdong provincial authorities did not officially report the situation to Beijing until late January. When Guangdong did report to Beijing, the rate of infection and death rate were underestimated purposefully (Larry and Wortzel, 2005). In a SARS-related document published by the Guangdong health department in January 2003, the report claimed there were only 28 total infections (South Daily, 2013). Similarly, although the first patient reported was on the first day of December 2019 (BBC, 2020), the Hubei provincial authorities and the Wuhan officials did not acknowledge the spread of a new disease until the very end of December (Now News, 2020).

Legitimacy holds significant importance for the Chinese leadership due to its crucial role in securing political stability, social cohesion, and maintaining the ruling party's authority. Legitimacy refers to the acceptance and recognition of the government's right to govern by its citizens and external actors. In the context of China, the CCP relies on legitimacy to legitimize its rule and maintain social order (Tsai, 2007). The Chinese leadership recognizes that legitimacy acts as a foundation for their political power and is essential for their long-term governance. Without a sense of legitimacy, the government may face challenges to its authority and stability, potentially leading to social unrest or even regime collapse (Zhou, 2012). Therefore, the Chinese leadership is acutely aware of the need to maintain and strengthen legitimacy as a cornerstone of their governance. Legitimacy holds immense significance for the Chinese leadership as it is integral to securing political stability, social cohesion, and the long-term legitimacy of the ruling party. Through performance legitimacy, ideological cohesion, and addressing societal grievances, the leadership strives to maintain public support, reinforce its authority, and ensure the continued legitimacy of the CCP. Undoubtedly, a frightening pandemic breakout would be seen as a challenge to the CCP's legitimacy, hence the cover-up.

4.1.1 The Central-Local Government Relationship

The relationship between China's central and local governments significantly impacts the implementation of national policies and the distribution of power and resources within the country. While the central government lays out broad policy guidelines, local governments have a notable degree of discretion in policy implementation. This decentralized system allows for policy flexibility, but it can also result in variations in implementation across different regions, mainly because local officials, who wield significant influence, might prioritize regional over national interests.

In China's decentralized authoritarian framework, local governments, endowed with substantial

autonomy, often act as the primary responders during health emergencies. Their distinct capacities, resources, and strategies can lead to varied regional responses. This was evident in the initial handling of the crisis in Wuhan compared to other regions. The flow of information between local and central authorities can critically shape the response trajectory, with potential delays or inaccuracies affecting the national response's timing and scale (Montinola et al. 2011). The performance evaluation system for local officials, which incorporates health indicators, may result in inconsistencies in case reporting and control measures as local leaders navigate the political landscape (Dickson 2016). The tradition of policy experimentation at the local level can introduce further response variations, with regions tailoring their strategies to local contexts. The multifaceted relationship between the central and local governments adds a layer of complexity to China's pandemic response, emphasizing the significance of both national policies and local actions in comprehending China's COVID-19 approach.

Historical, political, and economic factors have molded the central-local relationship, which has evolved over time. Historically, the central government exerted limited control over its local counterparts, granting them substantial decision-making independence. Although the central government has progressively exerted more control, local entities retain significant policy discretion. Why do local governments occasionally refrain from conveying unfavorable news to the central authority? The CCP prioritizes maintaining its legitimacy as the sole governing party in China. The Chinese leadership believes unfiltered information flow could weaken the CCP's credibility. Episodes, like the unchecked spread of a deadly disease, could indeed challenge the CCP's credibility and thus its legitimacy, explaining the actions of the Guangdong government and Hubei officials.

Contrary to many Western nations, the relationship between China's central and local governments is vertical. The central government directly controls provincial government resources and makes official appointments (Zhang 2010). This hierarchical structure clarifies why local entities might fear central authorities. The central government, emphasizing information control that safeguards the CCP, expects local governments to enforce this directive. Mintz and Reddz (2017) highlight this local government behavior. Here, non-disclosure of unfavorable events to the central government or punitive actions against whistleblowers can have immediate and severe political repercussions for local entities. Under ordinary circumstances, actions like arresting whistleblowers might even be commendable due to China's frequent stability maintenance programs, which have doubled in cost over the past decade (Palmer 2020). This dynamic between local and central authorities contributed to the pandemic's initial mishandling. Supporting this, the central government often avoids responsibility, redirecting blame to local entities, as observed during both the SARS and COVID-19 outbreaks.

Within the Political Economy framework, the central-local dynamic is pivotal to China's epidemic response. Central decisions are continuously shaped by balancing economic stability with health crisis management. As these decisions are locally executed, regional economic factors influence compliance with central directives, which can lead to response disparities across locales. By refraining from reporting an outbreak, local governments signal their well-managed and economically thriving status to the central authority. For example, local governments, cognizant

of their region's economic realities and the possible ramifications of epidemic control measures, may calibrate their responses in accordance with their economic resilience and growth goals. These regional economic factors can influence the level of compliance with central directives, potentially resulting in variations in epidemic response strategies across different localities. By not reporting a disease break out, the local government is assuring to the central government that the province is well-maintained and economically prosperous.

4.1.2 Public Perception and Trust

Public trust and perception are vital assets for any government, and this importance is magnified during a public health crisis such as the COVID-19 pandemic. These factors have been a significant influence on China's approach to managing the pandemic, contributing to variations in response strategies over time. Early in the pandemic, China faced substantial domestic and international criticism for perceived lack of transparency and delays in acknowledging the extent of the virus (Palmer, 2020). This period was marked by a significant incident involving Dr. Li Wenliang, an ophthalmologist who initially raised alarms about the novel virus and later died from it. His death triggered an unusual wave of public outrage and mourning on Chinese social media platforms, which was a clear indication of the public's dissatisfaction and mistrust towards the government's handling of the situation (Steinbuch, 2020). The Chinese government recognized the need to restore public trust and reshape public perception, both domestically and internationally. It responded with an aggressive and highly visible set of measures aimed at controlling the virus's spread. These included stringent lockdowns, construction of hospitals in record time, and comprehensive testing and contact tracing programs. The government also increased its efforts to disseminate information about these measures, portraying a narrative of decisive action and competence.

The government's public health response evolved over time, reflecting the shifting demands of public perception and the need to maintain trust. For instance, China's approach to reporting COVID-19 cases changed in response to domestic and international scrutiny. After initial accusations of under-reporting, the government began to provide more comprehensive and frequent updates on case numbers and policy measures, aiming to foster a sense of transparency and openness (Bloom, Cadarette, & Sevilla, 2018). Public perception and trust also played a role in shaping China's diplomatic approach during the pandemic, often referred to as "mask diplomacy." The government sought to improve its global image by providing medical aid and expertise to other countries, promoting a narrative of global leadership and goodwill (Huang, 2020). In conclusion, public perception and trust played a significant role in the variations observed in China's handling of the COVID-19 crisis. These factors influenced the government's decision-making process, driving changes in strategy and policy to restore public trust and reshape both domestic and international perceptions.

4.2 The Chinese Government's Consideration of its International Image

Another significant aspect China recognizes in its decision-making process is its role within the

international community. With China's influence continuing to grow and its impact on the globe rising, the country is facing increasing international criticism on how it approaches both domestic concerns such as human rights issues and foreign problems such as tensions in the South China Sea. The Chinese government's consideration of its international image played a significant role in why variations occurred in China's responses to COVID-19. China's international image and its handling of epidemics cannot be dissociated from its economic agenda on the world stage. As a global economic power, China seeks to project an image of economic competence and stability. This image management is a political decision that directly links to China's economic interests. In the face of a global health crisis, this involves showcasing the country's ability to control the epidemic swiftly, efficiently, and with minimal disruption to its economy and global supply chains. China's desire to project this image may affect its transparency about disease outbreaks, cooperation with international organizations, and aid to other countries. The global pandemic posed a significant challenge for China, not only in terms of its public health crisis but also in terms of its reputation on the global stage. The Chinese government was well aware of the importance of its image and the impact that its response to the pandemic would have on its relationships with other countries. An outbreak of a deadly disease can be both treated as a domestic affair and an international affair; therefore, in dealing with COVID-19, the Chinese government's concern about its international image certainly affected some of its decisions. If the Chinese government does not want the rest of the world to discover more information about a disaster, the simplest way is to prevent foreigners from investigating.

During the SARS outbreak, the Chinese government rejected the WHO team to Guangdong because it did not want the world to find out the Chinese government had underreported the real situation. During the H1N1 outbreak, the Chinese government welcomed help and support because there was nothing to be discovered in China due to the fact that the virus originated in Mexico. During the H7N9 Avian flu, the Chinese government also welcomed foreign aid and support as the disease was primarily found and transferred between birds and animals. COVID-19 is one of those episodes that can damage China's image internationally. In addition, the Chinese news media have also warned foreign media that criticism of the Chinese central government's leadership in dealing with the epidemic is counterproductive and fearmongering (Chinese Ministry of Foreign Affairs, 2020). The Chinese government's behavior aligns well with Linda Jakobson and Ryan Manuel's observations on the existence of the LSGs. In this case, a LSG was sent to Wuhan from the central government to investigate the real situation of the outbreak (Xinhua, 2020). When deciding whether to allow the WHO and other foreign experts to step in, the same LSG is central to the decision-making process. The LSG has witnessed the true situation in Wuhan, and it is up to them and the representatives from the propaganda organs to decide whether allowing foreigners to see this will damage the international image of China or not. Clearly, the external reputation of China is taken into account during the decision-making process, and it is this concern that made the Chinese government refuse foreign assistance to Wuhan at the outbreak's onset.

4.3 Other factors

Various factors have contributed to the variations observed in how China has handled COVID-19 and previous epidemics. Disease characteristics play a significant role, as the severity,

contagiousness, and affected population can influence the response strategies employed (Wang, 2013; Wei et al., 2016). Additionally, scientific and technological advancements have shaped China's response, with the progress of gene sequencing technology enabling rapid identification and sharing of the SARS-CoV-2 virus during the COVID-19 pandemic (Zhou et al., 2020). China's past experiences with public health emergencies, such as SARS and H7N9, have informed its response to subsequent epidemics. Lessons learned from previous outbreaks have led to improvements in public health infrastructure, emergency response mechanisms, and legal frameworks for disease control (Huang, 2004; Zheng et al., 2019). Furthermore, societal changes within China, including urbanization, increased travel, and the influence of social media, have played a role in shaping disease spread and the government's response (King et al., 2017). Economic considerations have also influenced China's approach, as the government must balance efforts to control disease transmission with mitigating potential impacts on domestic stability and international trade (Bloom et al., 2018). Taken together, these factors contribute to the variations observed in China's handling of epidemics, including COVID-19, reflecting the dynamic interaction between disease characteristics, scientific advancements, past experiences, societal changes, and economic considerations.

5. Conclusion

As demonstrated above, when it comes to dealing with the COVID-19 outbreak, the Chinese government has taken a far different approach than it has with prior diseases. Why is there such a disparity in the Chinese central government's responses if it has learned from prior epidemic outbreaks? This paper answers this important and puzzling question by examining the similarities and differences between the country's responses during the previous epidemics. This study has shed light on the complexities surrounding China's handling of COVID-19 and previous epidemics. The Chinese government's responses have exhibited variations influenced by multiple interrelated factors. The fear of undermined legitimacy, consideration of international image, central-local government dynamics, and public perception and trust have all played significant roles in shaping the country's approach to these health crises.

The emphasis on economic interests and motivations offers insights into the intricate interplay between economic considerations and political decisions. For instance, economic incentives aligned with political goals drove the government's rapid response to the COVID-19 outbreak to maintain public support and legitimacy. Additionally, the framework's examination of political considerations enhances our understanding of the balancing act between economic stability and public health, exemplified by decisions that navigate political pressures and economic constraints. Crucially, the exploration of central-local government relationships illuminates the economic dynamics at different levels of governance, showcasing the intricate interplay between economic motivations and political realities. By integrating the importance of public perception and trust, the study also showcases how economic factors intersect with public sentiments, influencing government strategies in response to public backlash. Collectively, these elements enrich the analysis by revealing the multifaceted intersections of economic motivations, political

considerations, central-local governance dynamics, and public perceptions within the context of epidemic responses, thus bolstering the theoretical foundation of the study.

China's response to COVID-19 and previous epidemics has been influenced by the fear of undermined legitimacy, as the government seeks to maintain its political standing and public support. This fear has driven efforts to control information, manage public perceptions, and demonstrate decisive action in crisis management. The central-local government relationship has also contributed to variations, with the dynamic interplay between national policies and local implementation impacting the effectiveness of responses. Furthermore, China's consideration of its international image has been a driving force in shaping its approach to epidemics. The government's efforts to restore global confidence and project itself as a responsible global leader have influenced strategies such as providing aid to other countries and participating in international collaborations. The balance between domestic priorities and international reputation has influenced decision-making and response strategies. This paper has also explored China's diverse responses to epidemics through the lens of the Political Economy framework, unveiling the intricate relationship between political decisions and economic realities that underpin health crisis management strategies. The application of this theoretical perspective has shed light on how economic considerations have significantly informed China's epidemic response decisions and, reciprocally, how these political decisions have influenced economic outcomes, domestically and globally. The framework has also illuminated the central role of central-local government dynamics and considerations of China's international image, both of which are intrinsically linked to the country's economic interests.

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