

IMPLEMENTATION OF THE NATIONAL HEALTH POLICY IN PRC (1981–2017)

HUANG KUNPENG

Belarusian State University, Minsk, Republic of Belarus

Abstract. Since the founding of the People's Republic of China, China's national health and sanitation industry has achieved remarkable achievements. Before the liberation, the Chinese people suffered from hunger, famine and infectious diseases. The average life expectancy was only 35 years old. In the early days of the founding of New China, under the condition that the national strength was extremely weak and there was a serious shortage of medical treatment and medicine, the state adopted a «prevention-based» medical and health strategy to mobilize social resources and effectively curb prevention measures such as changing people's bad habits and vaccination. The serious threat to the spread of human's infectious diseases in China has greatly improved the people's health. Since the reform and opening up, with the rapid development of the economy, people's material living standards have become increasingly rich, but new challenges have been generated in the health field.

Faced with new challenges in the health field, the Chinese medical community conducted a comprehensive analysis and discussion. Based on the summary of relevant experiences of the World Health Organization (WHO), combined with China's national conditions, it put forward countermeasures for the health of the whole people and provided suggestions for deepening the reform of China's medical and health system.

Key words: China; World Health Organization; national health care; international health cooperation; health care reform in the PRC; the «Chinese dream».

DOI: <https://doi.org/10.33581/2311-9470-2019-7-118-131>.

Introduction. The overall strategy of China's construction, adhere to the people-centered development thinking, firmly establish and implement the development concept of innovation, coordination, green growth, openness, and sharing, adhere to the grassroots focus, reform and innovation as the driving force, prevention-oriented, Chinese and Western emphasis on the integration of health into all policies, the people build a shared health and health work policy, with the core of improving people's health. Emphasis is placed on: first, prevention is the mainstay, promoting healthy lifestyles, reducing disease occurrence, promoting resource sinking, and achieving affordable and sustainable development.

Second, adjusting and optimizing the health service system, strengthening early diagnosis, early treatment, early rehabilitation, on the basis of strengthening the grassroots level, promote the development of health industry and better meet the health needs of the people; the third is to regard «building and sharing the health of all people» as a strategic theme, adhere to the government's leadership, mobilize the participation of the whole society, and promote social sharing. People are self-disciplined and achieve the health of the whole people.

Build a healthy China, actively strengthen interaction with the World Health Organization (WHO), popularize healthy living, optimize health services, improve health protection, build a healthy environment, and develop a healthy industry.

Literature review. Traditional public health governance is subject to what German philosopher Ulrich Beck puts it: «Methodological Nationalism» [1, p. 286]. Rudolph Virchow said: «Medical science is a social science, and politics is nothing else but medicine on a large scale». Interestingly, in the West, the differences in the use of concepts are related to the user's country and research interests. Hedley Bull, a famous British international political theorist, pointed out that British scholars have studied the international issues with a deep-rooted «empire» thinking tradition [2]. «Only by combining the theoretical framework of the system with the theory of foreign policy decision-making can we accurately explain the specific behavior of the state» [3, p. 64].

As a new subject, at the end of the 20th century and the beginning of the 21st century, due to the threat of new and recurrent infectious diseases, the study of global health issues in the international relations community warmed up: in 1997, Meri Koivusalo of Finland co-published with other scholars «Making a Healthy World: Agencies, Actors & Policies in International Health», starting with the organization of the World Health Organization (WHO) and international mechanisms related to global health policy, analyzes its characteristics, policies and practices, which is a comprehensive explain the academic work of the international mechanisms involved in the international health strategy.

Since the 21st century, due to the impact of infectious diseases on the international community, Andrew T. Price-Smith of the United States in 2001 «Plagues and Politics: Infectious Disease and International Policy» is based on the theory of international relations and describes the impact of

the public health crisis on global health security [4]. In 2003, David P. Fidler of Indiana University from the United States in «SARS, Governance and the Globalization of Disease» notes that the SARS crisis is an example of how to deal with the effects of the post-Westphalian system. A total of health issues, and explored China's global role in combating SARS. In 2007, Andrew F. Cooper of Canada from the role of World Health Organization (WHO) in the book «Governing Global Health: Challenge, Response, Innovation» to show the International organizations analyze the public health issues in the era of globalization, highlight the importance and challenges of global public health governance in the 21st century, and call for innovation. In 2012, Ellen Rosskam and Ilona Kickbusch published «Negotiating and Navigating Global Health: Case Studies in Global Health», which adds an overview of how to conduct negotiations in the global health arena, presenting the typical characteristics of health diplomacy in the 21st century.

Scholars Theodore Brown, Marcos Cueto and Elizabeth Fee in «The World Health Organization and the Transition From «International» to «Global» Public Health» with the connotation of the two concepts of international health and global health, for the World Health Organization's history and its role in the transformation of the two concepts are traced back [5].

Research on the World Health Organization from the perspective of sociopolitics, such as Walter R. Sharp's «The New World Health Organization» published in «The American Journal of International Law», on the role of political and economic factors in the early days of the establishment of the World Health Organization; in 1995, Wegman's «World Health and World Politics: The World Health Organization and UN system» put the World Health Organization in an international political and economic context to sort out the development and controversy of various issues [6].

In summary of the research results abroad, most scholars have explored the issue of global health governance from multiple angles, and analyzed the causes of global public health governance issues. The theory is strong, but generally mentions that developed countries have to bear for global health governance.

Related responsibilities, but more calls for developing countries and non-state actors in the international community to share global public health governance.

Research methods.

1. Qualitative analysis: the analysis of the concepts involved in health diplomacy uses qualitative analysis, which can not only deficiencies, but also propose corresponding improvement measures.

2. Quantitative analysis: this article describes China's health diplomacy, through the statistics of relevant departments and World Health Organization (WHO) statistics, trying to objectively and accurately describe the problem and analyze the reasons.

3. Historical analysis: health diplomacy as a new subject, but practical activities have a corresponding historical process in the international and national countries. This paper sorts out the history of international and national health diplomacy, and compares them vertically and horizontally. Analyze the problems and reveal the laws.

Results of the research.

1. China's interaction with the World Health Organization

In 1981, WHO established a representative office in Beijing. In 1991, Chinese Minister of Health Chen Minzhang was awarded the World Health Organization's National Health Gold Award. He is the first health minister in the world to receive this honor.

To date, China and the World Health Organization have held more than 20 coordination and organizational meetings on technical cooperation; WHO has provided more than \$100 million in assistance to our country.

In response to Taiwan's participation in the World Health Organization (WHO) needs and aspirations, and considering the exchange of information and coordination between relevant actors on both sides of the Taiwan Strait, the Chinese government agrees that Taiwan will join the World Health Organization. Chinese Taipei is an observer. In April 2009, WHO Director-General Chen Fengfuzhen (Chen Feng Fuzhen) issued an official invitation to the Chinese Taipei Ministry of Health to attend the 62nd as an observer in Geneva from May 18th to 27th World Health Organization Conference.

In China, there are 69 World Health Organization (WHO) Collaboration Centers – more than any other country in the Pacific Ocean that belongs to the World Health Organization. They hired professionals from more than 30 different medical professions. As a «show» to showcase cooperation between China and the World Health Organization in the field of

medical technology, the WHO Collaborating Centre has played an active role in promoting health technology exchange and staff training at the international and national levels.

Medical modernization has become one of our top priorities, with the goal of providing health care for all. President Xi Jinping visited the United Nations Headquarters in Geneva and the World Health Organization on January 18 this year. Xi Jinping became the first Chinese leader to visit the World Health Organization in history. This visit fully reflects the importance that Chinese leaders attach to the principle of multilateral relations. During the visit, President Xi Jinping delivered a keynote speech at the UN headquarters in Geneva.

The delegation met with the President of the UN General Assembly, the UN Secretary-General and the Director-General of the World Health Organization, and witnessed the cooperation document signed by China and the World Health Organization on the Mutual Cooperation on Mutual Cooperation in Health (the Silk Road) [7].

Li Baodong, Vice Minister of Foreign Affairs of China, pointed out: «At present, all countries in the world are increasingly interdependent. We share a common destiny and interests. At the same time, the international situation remains complex and unstable due to increasing global challenges. China and other relevant parties have promoted wisdom by promoting in-depth exchanges on issues such as promoting peace and development, strengthening global governance, promoting international health initiatives, and jointly addressing global issues. The visit of senior Chinese officials has promoted China and the world's health. Organized pragmatic cooperation» [8].

After 35 years of unprecedented economic growth, China has lifted 500 million people out of poverty and become one of the middle- and high-income countries, entering a more difficult stage of development. China will focus on a more equitable distribution of material prosperity as a result of the country's development and prosperity, and will place greater emphasis on human development (especially in health).

Today's China is different from the country 50 years ago, both in terms of technology and population. China's life expectancy (76,3 years) [8] has made unprecedented progress in achieving the Millennium Development Goals (MDGs), covering almost all basic health insurance (95 % of the population) and overall medical expenditures over the past 20 years

40 times, reaching 5,6 % of GDP. Chinese people live longer and healthier than they did 50 years ago.

Despite these achievements, there are still some differences in health indicators and per capita health expenditures between urban and rural areas, between different populations and between different regions. High costs are a major factor hindering fair access to health care. There are still 70 million people living below the poverty line, and about 40 % of them are experiencing health problems.

Rapid development has also brought new challenges. By 2053, the elderly population in China will reach 487 million, accounting for 35 % of the total population [9] (13,7 % in 2011) [10], with more than 70 % of the population living in cities (54 % in 2014). Large-scale urbanization and increased happiness have led to lifestyle changes.

The environmental degradation caused by the aging of the population, as well as past and present economic growth patterns, rely mainly on industry, exacerbating the shift from disease spectrum to non-communicable diseases (NCD). Non-communicable diseases currently account for 85 % of China's total mortality. Although the proportion of infectious diseases in general disease levels is currently small, the issue of drug resistance (including MDR-TB), the epidemic of viral hepatitis B and hepatitis C is on the agenda of the Millennium Development Goals and AIDS. The issue of comprehensive coverage of reproductive health services and services will not lose its value as part of efforts to maintain public health.

In addition, in the recently announced Sustainable Development Goals, the ambitious development goals of the health sector and other non-relevant sectors up to 2030 require early cross-sectoral planning. Reforms in the health care system and health care system are currently underway. However, providing better and more affordable health care to 1,3 billion people remains a daunting task.

An active and free market economy has led to the emergence of new players in the food, pharmaceutical and healthcare sectors, which fills many gaps in the public sector, but also means more regulation and compliance.

With a huge Internet «population», in 2014, China's Internet users reached 6,49 million, and the Internet penetration rate was 47,9 %. 90 % of Internet users have social media accounts; SMS, voice messages and

Weibo are very popular, leading to changes in the way information is exchanged in real time. The public is increasingly concerned about health issues. It seems reasonable to allocate more funds for health material support and cooperation strategies between China and the World Health Organization (2016–2020), which will create opportunities for improving public health knowledge. China is not primarily a recipient of development assistance, but is a development partner of other developing countries based on its own technical and financial capabilities.

As a member of the United Nations and the World Health Organization, China has demonstrated its activities on existing multilateral platforms (United Nations and World Health Organization); in addition, it is the home country of new organizations and initiatives in the region and around the world.

For China's changing role, it is necessary for the World Health Organization to respond to new directions and guide future cooperation. Taking into account the current analysis of China's current health care situation and the experience of implementing the previous version of the «National Cooperation Strategy», the new version of the China-WHO Cooperation Strategy Document is in the «Basic Provisions of the National Health System Development Plan» (2016-China) (proposed the Chinese government's proposal, 2020), UN China Development Assistance Framework: China (2016–2020), the 12th WHO Master Plan of Work (2014–2019) Sustainable Development Goals. The identified priorities also take into account China's commitments as a member of WHO and existing agreements between WHO and China.

2016–2020 WHO – The six strategic priorities for China's cooperation are:

1. Strengthen the health care system to achieve universal health coverage.
2. Reduce morbidity and mortality caused by major diseases, as well as threats to public health.
3. Improve the safety of food, hygiene products and related technologies.
4. Promote urban health campaigns to achieve the commitment of all parties in this regard.
5. Consider the impact of climate change on health and the environment.

6. Expand China's contribution to global health.

By supporting policy initiatives and laws, WHO can best leverage its comparative advantage and maximize its value; WHO can help build evidence-based policy changes, engage in high-level dialogue on important health issues; and use your reputation and prestige. In particular, it can use the Internet, event reporting in social networks, and changes in people's attitudes toward health care spending to guide the spread of health information [10].

China will work with WHO to promote the health of all citizens. The latter plays an increasingly important role in China's general health care system.

2. The history of cooperation between China and WHO

The history of global health includes the period of medical conferences, the period of global cooperation in global health, and the period of globalization and multilateral cooperation in this field. The various periods of our diplomacy and the characteristics of international cooperation can be divided into three phases:

1948–1977 – China's legal status in the World Health Organization is occupied by the Taiwan authorities, China and the relationship between WHO has been largely broken. China participates in major conferences of the World Health Organization and pays membership fees without any rights.

At this stage, China's health diplomacy mainly presents two main lines. First, China conducts unilateral health diplomacy to third world countries, mainly as medical assistance. Second, it begins to cooperate with a professional international organization, the World Health Organization.

This is an important step in the integration of the international system. Before that, China mistakenly cooperated with the World Health Organization and enjoyed the rights and interests that it deserves as a member state. It was regarded as being aided, refused to accept such technical cooperation, and only paid the dues. Without enjoying the rights.

1978–2002 – Start and work diversified with the World Health Organization. Coordination meetings, joint projects, technical cooperation, conferences, cooperation centers and other forms of cooperation.

China entered a new stage of development from the late 1970s. It is not only a new stage of China's domestic political, economic, and social

development, but also a new stage of rapid development of relations between China and the world. Deng Xiaoping proposed that «peace» and «development» are the themes of today's world, officially proclaiming a non-aligned and independent foreign policy of peace. In the 1990s, it was a global adaptation period, and China quickly entered the process of economic globalization.

In terms of health diplomacy, China has made full use of the stage of international organizations, actively carried out multilateral diplomacy, supported third world countries, and supported the global strategic goal of «Health for All for the Year 2000» proposed by the World Health Organization.

China actively participated in the discussion of the major conferences of the World Health Organization, and actively and targetedly spoke. In response to the new situations that occurred at the meeting, we analyzed and studied in a timely manner and proposed countermeasures. From the 1970s to the beginning of this century, the cooperation between China and the World Health Organization has developed smoothly: in the work of the World Health Organization, in planning budgets, setting priorities for planning, and on some political issues, our representatives implement national guidelines and policies.

To make it more conducive to third world countries; in technical cooperation, vigorously develop and expand technical cooperation with the World Health Organization, and introduce funds, technology, information, and talents for the development of China's health industry; opportunity to expand the impact.

2003 to 2017 – a continuation of initial joint projects, conferences, cooperation centers and other activities, the country's cooperation has risen to a strategic level. China plays an important role in the development of the World Health Organization.

From passive assistance to active activities. China participates in the activities of the World Health Organization in interactive games between the two countries and member states. Benefits and values, the direction of management, the global political and economic environment, development issues and health issues, the establishment of aid agencies, partnerships and financial support have become a means of influencing our cooperation with the World Health Organization. In the future, China will work with the World Health Organization to meet our own health needs and health

needs in terms of social security and social determinants, building health systems, disseminating knowledge, building capacity, technology development and support, and strengthening cooperation and sharing of experiences. With WHO priorities.

During this period, China's global influence and external relations continued to develop and quickly became a global power. China's multi-lateral diplomacy and big country diplomacy have both innovations and breakthroughs, such as holding a large-scale and influential Beijing Summit of China-Africa Cooperation Forum, establishing bilateral strategic cooperation and dialogue with the United States, Russia, Japan, and the European Union, enriching and strengthening China. The channels and influence of diplomacy.

During this period, Chinese diplomacy also increased its investment in international obligations and responsibilities. China actively participated in various activities of the World Health Organization. In 2006, after Ms. Chen Fengfuzhen was elected as the Director-General of the World Health Organization, China's cooperation with the World Health Organization was further strengthened. China also took the lead in achieving the goal of eradicating smallpox and polio.

Significant achievements have been made in areas such as infectious disease prevention and treatment in traditional medicine, such as primary health care, and the World Health Organization has also given strong support and useful experience. China has also worked with the World Health Organization to develop the World Health Organization's National Cooperation Strategy in China: Strategic Priorities for 2004–2008 [11]. In 2009, Chinese Health Minister Chen Hao made it clear at the 62nd World Health Assembly that China is willing to strengthen cooperation with countries and international organizations to jointly address the challenges facing human public health security.

From «health for one» to «health for all», China formulates health strategies according to its national conditions, strengthens interaction with the World Health Organization, and assumes the corresponding international responsibilities and obligations of the world's largest developing countries in the health field, and exerts international influence. To promote global health and improve the health of all people.

3. Drawing on the experience of the World Health Organization to build a healthy China

The social economy is constantly evolving and the concept of health is constantly updated. The latest definition of health in the World Health Organization is: «Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity». Health is the basic right of human beings, the inevitable need to promote the all-round development of human beings, the basis for the overall development of individuals, the enjoyment of life, study, work and caring for others. It is the resource, motivation and guarantee for social and economic development and innovation, an important symbol of national prosperity. The Director-General of the World Health Organization, Dr. Margaret Chan, said: «Beginning in the 19th century, improvements in hygiene and living conditions were followed by vast improvements in health status and life-expectancy.

These environmental improvements aided the control of infectious diseases, totally vanquishing many major killers from modern societies. Today, the tables are turned. Instead of diseases vanishing as living conditions improve, socioeconomic progress is actually creating the conditions that favour the rise of noncommunicable diseases. Economic growth, modernization, and urbanization have opened wide the entry point for the spread of unhealthy lifestyles».

China's national health undertakings are also facing enormous the challenge is that in the process of cooperation between the World Health Organization, China continues to draw on the World Health Organization's excellent experience in global health governance.

At the National Health and Wellness Conference held in August 2016, General Secretary Xi Jinping once again stressed the need to put people's health in the strategic position of priority development, this is the first time at the national level to explicitly propose to shift the focus of China's medical and health care to the promotion of universal health.

China strengthens the strategic planning of medical research from the national level, integrates resources, and builds basic research and technology product development, industry promotion, technology services, etc. The tightly integrated full chain research system is the common practice of the World Health Organization.

China draws on the experience of the World Health Organization, and needs to speed up the introduction of the «Health Promotion Law», improve the medical insurance related system, greatly improve the use ef-

iciency of medical insurance, and design incentives. Encourage people to strengthen their health management and improve their health.

Discussion of the results. Therefore, as a «Chinese Dream» for the great rejuvenation of the Chinese nation, «Healthy China» re-examines and plans the promotion of national health and strengthens the national consciousness and system building for the promotion of citizen health. All the people can participate consciously and learn internationally. WHO's excellent experience and active integration into the global health governance system are important.

Conclusion. To sum up: the national health policy in China is a part of the «Chinese Dream». It must be highly valued from the survival of the nation and must be important to the concept, the legal system, the system, and the education. Reform, strengthen cooperation with the World Health Organization, and use international advanced health concepts to continuously improve China's health care system. The national health policy will also promote the development of China's sustainable development strategy.

References

1. Beck, U. (2007). The Cosmopolitan Condition: Why Methodological Nationalism Fails. In: *Theory, Culture & Society*, December 1, Vol. 24 (7–8), p. 286–290.
2. Bull, H. (1995). The Theory of International Politics, 1919–1969 [1972]. In: *International Theory: Critical Investigations*, ed. J. Der Derian. London, Palgrave Macmillan, p. 181–209.
3. Gao Shangtao (2009). Foundations of International Relations Theory [Guojiguanxi lilun jichu]. Beijing, Current Affairs Press, 299 p.
4. Price-Smith, A. T. (Ed.). (2001). Plagues and Politics: Infectious Disease and International Policy. New York, Palgrave Macmillan, 293 p.
5. Brown, T., Cueto, M., Fee, E. (2006). The World Health Organization and the Transition From “International” to “Global” Public Health. In: *American Journal of Public Health*. January, Vol. 96, 1, p. 62–72.
6. Wegman, M. E. (1998). World Health and World Politics: The World Health Organization and the UN System. In: *Journal of Public Health Policy*, 19 (1), p. 106–110.
7. Health News Chinese and the establishment of WHO. (2011). URL: <http://www.jkb.com.cn/medicalHumanities/2011/1014/133945.html> (accessed 11.04.2018). (In Chin.).
8. Su Jingjing, Zhang Daqing (2011). Health Diplomacy in the Process of Globalization. In: *Research on Dialectics of Nature*, 27 (10), p. 60–65.
9. Wendt, A. (2000). Social Theory of International Politics, translated by Qin Yaqing. Shanghai People's Publishing House, p.82.
10. Li Chunguang (2002). Overview of the United Nations and its specialized agencies. In: *China Statistics Press*, p. 123–129.

11. Launch of WHO–China country cooperation strategy 2008–2013. (2008). URL: <http://www.wpro.who.int/china/mediacentre/releases/2008/20080520/en/> (accessed 24.10.2019).

Received: 10.10.2019.

For citation: Huang Kunpeng (2019). Implementation of the national health policy in PRC (1981–2017). In: *Actual problems of international relations and global development: collection of scientific papers*. Minsk, Vol. 7, p. 118–131.

About author: Huang Kunpeng – post-graduate student of the Department of international relations of the Belarusian State University (Minsk); e-mail: hkp19851121@gmail.com.

ОСУЩЕСТВЛЕНИЕ НАЦИОНАЛЬНОЙ ПОЛИТИКИ ЗДРАВООХРАНЕНИЯ В КНР (1981–2017)

ХУАН КУНЬПЭН

Белорусский государственный университет

Минск, Республика Беларусь

Со времени основания Китайской Народной Республики национальная индустрия здравоохранения и санитарии Китая достигла замечательных результатов. До образования КНР китайский народ страдал от голода и массовых инфекционных заболеваний. Средняя продолжительность жизни была всего 35 лет. В первые дни основания Нового Китая, когда национальная мощь была чрезвычайно слабой и существовала нехватка медицинской помощи и лекарств, государство приняло основанную на профилактике медицинскую стратегию и стратегию здравоохранения для мобилизации социальных ресурсов, способную эффективно обеспечить профилактические меры, такие как изменение вредных привычек людей и вакцинация.

Серьезная борьба с угрозой распространения инфекционных заболеваний в Китае значительно улучшила здоровье людей. После реформ и введения политики открытости, с быстрым развитием экономики материальный уровень жизни людей становился все более высоким, однако в области здравоохранения это породило возникновение новых проблем.

Столкнувшись с новыми проблемами в области здравоохранения, китайское медицинское сообщество провело их всесторонний анализ и обсуждение. Основываясь на соответствующем опыте Всемирной организации здравоохранения в сочетании с национальными условиями Китая, были выдвинуты контрмеры для обеспечения здоровья всего народа и представлены предложения по углублению реформы системы здравоохранения.

Ключевые слова: Китай; Всемирная организация здравоохранения; национальное здравоохранение; международное сотрудничество в области здравоохранения; реформа в области здравоохранения в КНР; «китайская мечта».

Дата поступления статьи: 10.10.2019.

Образец цитирования: *Huang Kunpeng*. Implementation of the national health policy in PRC (1981–2017) // Актуальные проблемы международных отношений и глобального развития : сб. науч. ст. Минск, 2019. Вып. 7. С. 118–131.

Автор: Хуан Куньпэн – аспирант кафедры международных отношений факультета международных отношений Белорусского государственного университета; e-mail: hkp19851121@gmail.com.