Editorials

Combating COVID-19:

East meets West

INTRODUCTION

Community engagement is the first line of defence in the battle against infectious diseases. Yet there are international differences in the actions, response, and empowerment of the population in building a firewall against the deadly COVID-19 virus.¹

CULTURE AND SOLIDARITY

Culture, religion, and tradition have much to do with the prompt community response in the East. Confucianism, which is a common religion in the region, places a heavy emphasis on the importance of respect for rulers, family, and social harmony. It is a national philosophy in many Eastern countries, but also a religious system of beliefs.² Even over 2500 years on, Confucian beliefs are still ingrained in mainstream ethics and religion.³ Harmony and conformity to society's ways is preferred as a way of preserving order, while in the West legalism and pursuit of 'the truth' are preferred. For example, Chinese people have a strong system of respect. Much of this comes from the Confucian system of hierarchy.

In China people generally accept what authority figures say, and express agreement. Hence healthcare policies are much more easily accepted and carried out with few questions asked by the public. There was little opposition to city lockdown, physical isolation, use of personal protective equipment (PPE), promotion of personal hygiene, surveillance, and screening measures. The public is also generally receptive to respected local key opinion leaders. In Hong Kong, for example, the quartet of four senior academic advisors to the Government have played a major role in ensuring the preparedness of the public and the healthcare community in the latest epidemic. The advice of 'mask on all the time' and hand hygiene has been a major reason why Hong Kong has escaped from major harms of COVID-19 so far. At working levels, there is trust among key workers

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within the hospital system, from supporting staff to technicians, frontline health workers, and department and hospital chiefs, which is important in ensuring togetherness in our fight against COVID-19.

Solidarity, interpreted as unity that produces or is based on a community of interests, objectives, and standards, is also an important component in the emergency response to the epidemic we currently face. COVID-19 tests our capacities to be kind and generous, and to see beyond ourselves and our own interests. These qualities have been brought forth readily for the people of Hong Kong, who have had such a painful experience with SARS in the past. On the healthcare fronts, wards with isolation facilities were immediately made available and infection control measures for staff quickly updated. Hospital chiefs and isolation team lead clinicians and nurses have all been through SARS in 2003 and were the first ones to join the combat from the beginning, which was important in allaying the anxiety of junior healthcare workers. While physicians were the primary clinicians in charge of the management of COVID-19 patients, volunteers, including senior consultants and professors, from other departments joined the frontline workforce. Family, friends, and the public have been supportive; philanthropists and non-government organisations have donated PPE; and colleagues from the private sector volunteer to see patients in public hospitals

to relieve the pressure of those combating COVID-19.

PREPAREDNESS

Disaster preparedness is essential. Countries in South Asia have experienced previous major health threats and natural disasters, and are more conscious of and apprehensive about future similar events. In general, they are more 'prepared for the worst' and organise academic exchange and conferences much more frequently.⁴ In Hong Kong, the Hong Kong Jockey Club Disaster Preparedness and Response Institute (HKJCDPRI; <https://www.hkjcdpri.org.hk>) engages with the community to prepare Hong Kong to be a more disaster-resilient city. Globally, most centres of health protection provide information through producing documents or guide books, and even survival kits for emergency response. Yet during peaceful times, these resources are often left on bookshelves and archives. The HKJCDPRI adopts innovative and collaborative approaches with the aid of its partners to enhance the capacity of practitioners. It also serves as a regional platform for multisectoral stakeholders to discuss global disaster risk reduction issues, local and regional preparedness, and community resilience; and to develop, implement, and evaluate related guidelines. Meanwhile, a series of community education programmes organised by the HKJCDPRI help raise public awareness of the importance of disaster preparedness. Philanthropy is also important, with donors acknowledging the importance of public health. The Hong Kong Jockey Club Charities Trust, one of the world's top ten charity donors, firmly believes that prevention is critical.⁵

CONCLUSION

COVID-19 is a global threat to all of us. Stringent public health measures are

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essential in controlling this infection, but cultural beliefs, religion, values, and behaviours may bring about subtle differences in the outcome and burden of this infection on us. The task now is to bring the best of who we are and what we do to a world that is more complex and more confused than any of us would like it to be.

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