

## 1.11. Chinese health cooperation in Africa

Paola Agnelli

### *Introduction*

After China was declared a republic in 1949, it rapidly built a network of cooperation with a number of countries. It was with Africa, however, that China developed its relations first and foremost<sup>15</sup>. China supported the African liberation movements of the 1960s and helped a range of States after their declaration of independence with the construction of infrastructure, such as roads, railway lines, hospitals and schools. One example is the railway line<sup>15</sup> between Tanzania and Zambia, which was built in 1976 with funding of 455 million US dollars, an amount way beyond the means of China at the time; the railway line was then modernized in 2005. Between the 1950s and 1970s, China's relationship with Africa was based on ideological and political issues, and so African countries with similar ideologies were interesting to China. From the 1980s onwards, diplomatic and commercial ties between China and southern hemisphere countries have been considerably extended, and relations have been built on specific economic interests, such as the search for raw materials (mainly oil) and potential markets for Chinese goods.

China has an egalitarian approach towards its partner countries; it does not consider itself a superior country that is helping an inferior one, but rather one developing country helping another. China's current policy of not interfering in the internal affairs of individual nations has earned it the respect of leaders and the elite, who consider this kind of relationship advantageous. Consequently, today almost the entire African continent, and part of South America, has very close ties with China. China considers the unconditional nature of its aid as the basis for long-lasting relations.

Each year China receives a host of foreign delegations that not only come to further commercial links, but also to increase assistance in the health sector. In September 2002, the Chinese Ministry of Health held a bespoke training course on malaria and tropical diseases that was attended by 30 students from 17 African countries. The same year, the first Forum between China and Africa<sup>1</sup> took place; this led to the establishment of the Forum on China-Africa Cooperation (FOCAC)<sup>2</sup>, which served as a cooperation think-tank. A specific conference on traditional medicine and pharmaceuticals was also held. It is worth noting that China is one of the world's leading producers of the counterfeit pharmaceuticals that flood the African market<sup>17</sup>. China also has a long history of health diplomacy with African and Middle East countries; up to today, it has provided Africa with 6 billion dollars in aid for 800 different projects<sup>3</sup>.

*Medical cooperation with Africa*

China sent its first team of doctors to Algeria in 1964<sup>3,4</sup> on the advice of Chu Enlai and on the invitation of the government of Algeria, which had only recently won its independence and thus had a shortage of health workers. In the years that followed, the number of countries requesting this type of cooperation grew and grew: in 1968 teams of Chinese and Vietnamese doctors were present in Guinea Conakry<sup>16</sup>, where independence had led to the breaking of ties with France and also to a severe shortage of both teachers and doctors.

As we mentioned above, this initial period of health cooperation with Africa was characterised by ideological affinity. These countries, which included Ethiopia, Uganda, Guinea Conakry, Tanzania and Zambia, had recently won their independence and, after breaking ties with European countries, gravitated towards the sphere of Socialist and Communist states.

China also continued to send medical teams during the dark years of its Cultural Revolution because it felt a “socialist” obligation towards “brother” countries in need. China currently holds diplomatic relations with 47 of Africa’s 53 countries because the only condition it imposes is the non-recognition of the Formosa government as part of its “One-China policy”<sup>2</sup>.

It is worth pointing out that Chinese cooperation had, and still has, its own characteristics. The Chinese always move in groups, which at times even include a cook; these groups often bring their own medical equipment and pharmaceuticals. They work together in a single medical facility for two years and are then replaced by another team of health workers; this means that there is no such thing as an individual cooperation worker.

For the Chinese, operating as a cooperation worker in Africa is not an individual choice, but a political one to which the individual must adhere. Although this policy may not have been a problem in the past, nowadays, skilled health workers try to avoid going because this involves a financial loss as generally Chinese doctors are paid the same as their local counterparts. Pay is defined through agreements between the two governments, but in the case of the poorest countries, China covers all of the travel expenses and provides medication and equipment free of charge. However, African countries also pay Chinese doctors through loans and donations that have come from the Chinese government.

Another characteristic is that individual Chinese provinces are responsible for work in individual African countries: Sichuan deals with Uganda, Shandong with Tanzania, Jiangsu with Zanzibar, Shaanxi with Sudan and so on<sup>5</sup>. Organization of this type means that solid, long-lasting ties are created between Africa and China and between African countries and Chinese provinces. At present, provinces are restricted in their sending doctors to Africa as their financial resources were reduced by the reform that abolished rural taxes from 2006. Some of the wealthier provinces that could not find workers willing to go to Africa were forced to recruit workers from the poorer provinces, which exacerbated the already great shortage of health workers in some areas of China.

Both Chinese and African authorities view the sending of medical teams as an

invaluable asset and in general the work of Chinese doctors is much appreciated, with them often receiving recognition and awards from African countries. China's Ministry of Health runs specific courses for team leaders, interpreters and logistics workers and holds meetings on their return.

According to figures from China's Ministry of Health, China sent more than 15,000 doctors to 47 African countries<sup>4,6</sup> between 1964 and 2006, treating more than 180 million patients. The same statistics also reveal that 45 Chinese doctors died in Africa during the same period. Thirty-five teams comprising eight hundred and sixty people currently work in health cooperation projects in thirty-seven African countries. Medical teams have certainly played an important role in Chinese diplomacy over the years, reinforcing relations between the two and helping each other in international politics (see for example the case of Darfur).

### *Current health cooperation situation*

In November 2006, Beijing was the setting for an important forum on cooperation between China and Africa attended by 41 heads of state and African governments. Forum participants agreed on a declaration for a new type of strategic cooperation partnership and a plan of action for 2007–2009. China's President, Hu Jintao, announced the following package<sup>7,8</sup>, which included:

- doubling African aid for 2009;
- supplying 3 billion dollars in soft loans and 2 billion in subsidized credit to trade partners;
- establishing a 5-million-dollar development fund to encourage Chinese companies to invest in Africa;
- building a conference centre for the African Union;
- forgiving the debt of the poorest countries that have diplomatic relations with China;
- opening the Chinese market to African products by removing customs duties for most goods;
- opening 3-5 economic and trade cooperation areas within the next 3 years.

In this way, China will become the most important financier of Africa, overtaking the World Bank. China is currently Africa's third largest trade partner behind the United States and France and ahead of the United Kingdom.

China has also undertaken to provide professional training to 15,000 Africans, to send agricultural experts and young volunteers, and to offer scholarships to 4,000 students per year, including health workers.

Regarding health intervention, China has also pledged to build 30 hospitals that will be used mainly to treat and prevent malaria<sup>9,10</sup>.

China decided to concentrate on this disease after the introduction of Artemisinin, which is derived from a Chinese plant, *artemisia annua*, one already used in traditional Chinese medicine as an effective treatment for malaria. China will also provide 37 million dollars of aid over the next three years to fight malaria and will send medicine to 33 countries for the same purpose.

A pilot project for the eradication of malaria based on a combination of Artemisinin and Piperaquine will be implemented on the island of Moheli in the Comoros with financing of 320,000 dollars<sup>11</sup>.

Joint projects have also been set up with Africa to fight AIDS<sup>12</sup> and other infectious diseases, and also to deal with alerts and responses to epidemics.

China is also collaborating with African countries over its traditional medicine. Africa sees China as a country that promotes and integrates traditional medicine; consequently joint projects have also been set up in this field with the support of the World Health Organization (WHO). Specific agreements have also been signed with several African states: South Africa in 2002 to use traditional medicine to treat AIDS; Tunisia in 2006 to set up an acupuncture centre with the aim of turning it into a centre for traditional Chinese medicine and a training centre for doctors from both African and Arab countries<sup>13</sup>; Senegal in 2007 to send a team of 16 doctors on a 2-year loan to a Dakar hospital, as well as 256,000 dollars of medicine to treat malaria; and Morocco, a country where 1,200 Chinese doctors have worked since 1975 and where 121 are currently working. As He Wenping states in her article<sup>7</sup>, "The balancing act of China's Africa policy", Africa is perhaps the most important test for the promotion of China's soft power, which encompasses a willing approach and friendly partnerships. These efforts are heading in two directions: bringing Africans to China (see the Forum commitments) and sending Chinese to Africa. In addition, five Confucius Institutes have been opened in Africa in recent years to spread the ideas of the Chinese government.

There are two particular health situations in Africa: one is the presence of medical military personnel who are there to support Chinese troops in the Darfur area, as well as to help troops from other countries and civilians; the second is the presence of Chinese doctors who have settled in Africa, especially in Tanzania, and have private clinics where they practice traditional Chinese medicine<sup>6</sup>.

### *Conclusions*

China presents itself to developing countries as a nation that has no colonial past, and this enhances its credibility. Its influence and its solid relations are the result of a lengthy policy of exchanging techniques, culture and trade in both the health and education sectors. China's approach of "not seeing demons" is one of its most characteristic features and one that other countries appreciate most; furthermore, it is also an important approach for the development of any kind of relationship.

### *References*

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