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# The Rise of Xenophobia and Nationalism in China Since the COVID Pandemic: Insights from Discourse Analysis

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## Abstract

Since the successful containment of COVID-19 in Wuhan in late March 2020, China had implemented a nationwide highly stringent and restrictive zero-COVID policy to manage the pandemic until the sudden swift away from it in early December 2022. How did the Chinese Communist Party discursively construct it as a ‘normal’ and legitimate policy? Using interpretivism and poststructuralist political theory, this paper examines how Chinese political elites constructed a discourse of danger for the COVID pandemic, with the dominant discursive narratives full of xenophobic and nationalist languages. The discourse framed ‘foreigners’ as ‘threats’ to Chinese people’s health, advocated that China should rely on home-made vaccines and medicines and, more importantly, argued that the Chinese Communist rule demonstrates ‘institutional superiority’ over Western governance. This xenophobic and nationalist discourse has lingered on after the dismantling of the zero-COVID policy. There are grounds for us to concern whether China is seeking self-reliance rather than integrating itself with the world. A Chinese decoupling from the world—a nationalist self-reliance policy similar with that in the Mao era—is not unthinkable.

**Keywords** China · COVID-19 · Xenophobia · Nationalism · Discourse analysis

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## Introduction

Since the successful containment of COVID-19 in Wuhan in late March 2020,<sup>1</sup> China had implemented a stringent, restrictive zero-COVID policy<sup>2</sup> to deal with the pandemic for 30 months until the sudden swift away from it in early December 2022. It was deemed as ‘the world’s most draconian COVID-19 containment policy’ [107]. A key theme of the Chinese discourse on its zero-COVID policy was that the Chinese Communist Party (CCP) ‘gave top priority to protecting people’s life and health’ and therefore, the policy was ‘a MUST for China’ and ‘science-based’ [80] (emphasis in original). As a result of adopting that ‘live-protecting’ policy, the discourse goes, China’s infection and mortality rates were the lowest in the world [80].<sup>3</sup> Accordingly, the CCP has claimed that this fully demonstrates the ‘institutional superiority’ (制度優越性) of China’s socialism to western democracies [139].<sup>4</sup>

However, a puzzle remains unresolved. If the zero-COVID policy were genuinely science-based and aimed to save and protect Chinese people’s lives, why did China reject Western mRNA vaccines, even it had many opportunities to have access to them? As early as 2021, Fosun, a Shanghai-based pharmaceutical company, reached an exclusive deal with Pfizer/BioNTech to distribute the mRNA vaccines to ‘Greater China’, which includes Hong Kong, Macau and Taiwan. They also planned to distribute 100 million doses to mainland China. However, Chinese authorities did not approve it [78]. Another opportunity for China to have access to the mRNA vaccine was the visit of German Chancellor Olaf Scholz to China in early November 2022 shortly after the end of the Chinese Communist Party (CCP)’s 20th Congress on 22 October of the same year. At the Xi-Scholz meeting, China made a ‘concession’ by agreeing to approve the use of BioNTech’s COVID vaccine for ‘foreigners’ living in China, but not for its 1.4 billion Chinese people [63]. Why ‘foreigners’ only? Which

<sup>1</sup> On 23 January 2020, China imposed a completed lockdown in Wuhan and other cities in Hubei in a bid to contain the transmission of COVID-19. After a 76-day lockdown, China reported there was no more domestic transmission of the disease, and the country basically returned to normal before the second wave of COVID-19 hit Beijing in July that year. Some commented that the Wuhan lockdown was ‘brutal but effective’ [53] while others indicated that the lockdown had showed that ‘containment of COVID-19 is achievable and worthwhile’ before vaccine was available [22].

<sup>2</sup> In August 2021, the Chinese government renamed its zero-COVID policy ‘dynamic zero-COVID’ strategy. According to the China CDC Weekly, this ‘dynamic’ strategy was a transitional strategy aimed to ‘dynamically’ taking action ‘when the population immunity barrier is not yet established in the face of continued risk of foreign importation and high transmission of variants’ [73]. It has two prongs: prevention and containment. Prevention focused on early detection through regular PCR tests, especially in cities. People were allowed to enter a business or public facility only if they could show a recent negative PCR test result. Control tactic was to quickly cut off the transmission chain by quarantining any cases at government-supervised facilities or by locking down buildings, communities or even entire cities [96].

<sup>3</sup> According to Worldometer (<https://www.worldometers.info/coronavirus/#countries>), up to 10 July 2023, COVID deaths per 1 million people in the USA was 3490 while China’s was 4 only. Among the 224 countries or areas which have registered COVID deaths, only four were below 10 and they are China (4), North Korea (3), Burundi (3) and Western Sahara (2). A caveat may be in order. China’s death toll, as reported in the database, was much lower than the death count it told the World Health Organization (see below).

<sup>4</sup> Qin Gang (秦剛) was appointed the Minister of Foreign Affairs in late December 2022.

countries would distribute an internationally acclaimed COVID vaccine to non-local people only? More incomprehensible is Beijing's repeated rejections of Washington's and European Union's offers of mRNA vaccines, even when the country was battling with a fast-spreading wave of COVID infections in early 2023 [12, 78]. While the Chinese government refused to import foreign mRNA vaccines, mainland Chinese people were trying to get inoculated with Pfizer/BioNTech vaccines by going 'abroad' to Macau.<sup>5</sup> Until 8 January 2023 Macau was the only place outside the mainland where mainland Chinese could travel without having to go through quarantine upon return [69].

The observed empirical puzzle drives this research, using an interpretive approach, into how the CCP regime understood the COVID-19 virus; or to be more precise, how the party elites assigned specific meanings to the COVID-19 virus, people and medications. Their constructed meanings or web of meanings were imparted to the masses via the means of language. They were demonstrated in the Chinese discourse on the sources of the virus, the trajectories of human-to-human infections and the medications, including vaccines, for the disease. By unearthing the web of meanings and the discourse, this paper argues that the discourse primarily concerned 'foreignness' in terms of virus, people and vaccines, and that the key dominant discursive narratives that underpinned the zero-COVID policy were full of xenophobia (or fear of foreign people or things) and nationalist sentiment, especially techno-nationalism. More importantly, the CCP-constructed understandings and meanings, as expressed in its official discourse, served to legitimize two major pillars of the zero-COVID policy, namely stringent border control on inbound foreigners and returned Chinese, and draconian domestic measures of quarantines, mass testings, use of health codes and lockdowns. The former was to prevent the virus from entering into the country (外防輸入) while the latter was to cut off the transmission chain to prevent internal resurgence of the disease (after Wuhan) (內防反彈). The alleged 'success' of the zero-COVID policy in protecting the wellbeing of the Chinese population, according to the discourse, bore testimony to the 'institutional superiority' of Chinese socialist governance. The meanings of the COVID virus were political in the sense that they acted to reproduce the legitimacy of the CCP rule.

Let us make it clear at the outset of this paper that we do not aim to explain the less 'science-based' zero-COVID policy following the logic of causal explanation<sup>6</sup>; instead, the primary focus is on how the Chinese understanding of the pandemic was constituted through the CCP discursive language. By assigning particular meanings to the virus, people from overseas and medications, the CCP elites constructed a 'discourse of danger' about the disease, and consequently framed its policy measures to contain the spread of the disease as 'natural', 'normal' and 'common-sense',

<sup>5</sup> The mRNA COVID-19 vaccine available in both Hong Kong and Macau is COMIRNATY, manufactured by BioNTech/Pfizer under the exclusive deal between Shanghai Fosun Pharmaceutical and BioNTech [45].

<sup>6</sup> We note the difficulty of identifying the 'real cause' of the policy, given the CCP's black-box policy-making process [18, p. 230].

and therefore legitimate. The Chinese discourse provided the ‘natural’ view of what could and should be done to stop the virus from entering into and spreading across China, and more importantly, this officially sanctioned discourse served to exclude any alternative understandings of the cause and treatment of the disease.

A key sign of Chinese xenophobia can be seen in its narratives of the sources of infectious viruses—not only SARS-CoV-2—and its stringent policy to prevent the virus from entering into the country. Chinese nationalism is shown in its refusal of importing Western mRNA vaccines while promoting home-made vaccines and traditional Chinese medicine (TCM), even though their effectiveness in treating the virus is open to dispute. These two ideological factors have lingered on well into the post-zero-COVID period. This justifies a detailed study of them. How did Beijing interpret the virus, its carriers, and the ‘proper’ treatment of the disease? How were the dominant discursive narratives constructed? Would there be any longer-term policy implications beyond the COVID pandemic?

This paper proceeds in five major steps. First, it introduces the interpretive and poststructuralist perspectives on which this paper is built. It discusses the significance of discourse and narrative in social construction of ‘reality’, ‘truth’ and ‘knowledge’. It is followed by two sections on the intensification of xenophobia and nationalism in China respectively in the course of the pandemic. “[The CCP ‘Institutional Superiority’?](#)” section sheds light on how the CCP uses the socially constructed ‘knowledge’ of COVID to argue discursively that its socialist governance demonstrates ‘institutional superiority’ over its liberal-democratic rivals. Towards the end of this paper, wider foreign policy implications of these xenophobic nationalist discourse will be explored, inquiring whether Xi Jinping would still be committed to the open-door policy launched by Deng Xiaoping since the late 1970s.

## **Social Construction of the COVID Pandemic: the Role of Discursive Narratives**

This paper draws on interpretivism and poststructuralist political theory. Ontologically, interpretivism distinguishes between natural or brute fact and social fact, and contends that social fact is not an external reality ‘out there’ that allows social science researchers to observe and discover objectively. Instead, social fact is not independently of—or indeed contingent on—human knowledge about it; the knowledge about the social world is ‘socially constructed’ and human behaviour is shaped by those social constructions [4, 101]. As human beings create the social world by interpreting the actions and beliefs of others, and by taking their own actions on the basis of the interpretations, interpretations—or a search for the meaning of actions, beliefs and desires—should form the basis of political inquiry. Meanings are significant because they give actors ‘reasons for action’ [58, pp. 41–50, 122, pp. 110–16]. To understand actions, practices and institutions, interpretivists argue, we need to grasp the situated meanings of things and people for the actors involved in a particular context and meaning-making practices of the actors themselves [6, p. 12, 100, p. 1].

This paper also rests on the poststructuralist premise that meanings shape action and meanings are produced through language. However, the issue of who can produce meanings through language is politically contingent. The questions of ‘who’ can say and ‘what’ they say are enmeshed in complex relationship of power because it is elites, notably political and business leaders and experts, who impose ‘valid knowledge’ or ‘truth’ on others to protect their interests and reinforce political and social hierarchies [84]. ‘Truth’ is indeed a mask for power. Poststructuralists explore how dominant framings of (global) politics serve to privilege certain understandings and legitimize certain courses of action while marginalizing and excluding others [17]. When poststructuralists undertake discourse analysis, they intend to understand how language limits human choices and/or creates new choices [67, p. 127]. The choices or policy responses made by elites are contingent on the political/ideational filters through which the elites discursively construct the meanings of the events under study.

A discourse can be defined as ‘a coherent ensemble of ideas, concepts, and categorizations about a specific object that frame that object in a certain way, and therefore, *delimit the possibilities for action* in relation to it’ [38, p. 2] (emphasis added). A discourse is ‘everything written or spoken about a specific practice based on specialist knowledge and bodies of experts which has the effect of *controlling* those who lack knowledge (such as the patient)’ [112, p. 197] (emphasis added). Discourse itself is a form of power exercised by a particular social group called elites [112, p. 197]. Discourses often frame and constrain courses of action by placing events or actors in the form of ‘binary oppositions’ [79, p. 229]. One set is promoted as normal, common-sense, moral and legitimate while the other is discouraged as abnormal, immoral and illegitimate. Actors are similarly differentiated between ‘us’ and ‘them’ [84]. As said, the ‘truth’ embodied in a dominant discourse serves the interests of the elites by delimiting the possibilities for action. The elites construct the shared understandings and impose them on others to legitimize and promote their interests.

Narratives form a particular subset of discourses and can be defined as ‘discourses with a clear sequential order that connect events in a meaningful way for a definite audience and thus offer insights about the world and/or people’s experiences of it’ [35, p. 3]. Narratives have three defining features. They are chronological, meaningful and social. They show the temporal qualities of social life; they render events under discussion meaningful to the target audience by structuring them into stories with a beginning, a middle and an end; and they are produced for a specific audience for a particular purpose. As summed up by Elliott, ‘the meaning of events with a narrative derives both from their temporal ordering and from the social context in which the narrative is recounted’ [35, p. 4]. The notion of plot is closely connected with the temporal qualities of narratives. The plot not only tells a temporal succession of two events (i.e. event A is followed by event B) but also hints implicitly causality by linking a prior event to the subsequent one (i.e. event A causes event B) [35, pp. 7–8]. Narratives convey to an audience how they understand the meaning of the events that combine to form the narratives and how they respond to them [35, p. 9]. In short, a discourse or

narrative, if successful, makes it virtually impossible for listeners to think outside of the permitted courses of action, which are argued to be *the* ‘normal’.

In general, discourse analysis is to explore how and why particular discourses emerge and one becomes dominant among political actors and to consider the ‘manifest political consequences of adopting one particular mode of representation over another’, but it does not ask whether a representation is correct or false [18, p. 230, 59, p. 104, 67, p. 126]. However, in the case of China, there is almost always one ‘legitimate’ dominant discourse only, which is espoused by CCP elites who use language to justify their actions to their audience at home.<sup>7</sup> Since 1949, the CCP has regarded propaganda and thought work as one of its core tasks. Anne-Marie Brady has argued that ‘in China, all forms of both traditional and new media are controlled within the CCP’s propaganda and ideology *xitong* (宣教系統; *xuanjiao xitong*), a vast policy grouping covering advertising, art, culture, education, health, political education, sport, traditional and non-traditional media, and all forms of mass communication’ [15, p. 165]. Especially after the 1989 political crisis, the CCP has understood and stressed the prominent role of propaganda and thought work in mass persuasion and political legitimation. Using discursive propaganda, the CCP has persuaded the Chinese people that the current Chinese political system is the most ‘appropriate’ one for them and their country [14, p. 453]. As discussed further below, during the pandemic Xi Jinping put forward a nationalist narrative that the CCP rule is not only appropriate for China but is more ‘superior’ to the Western democracy.

To apply this approach to China’s discursive narratives of the COVID pandemic, this article draws on both Chinese and Western sources of information to tell how CCP elites control the text and context of public discourse, how such discourse controls the minds and actions of less powerful groups such as the masses, and how such control impacts the society [116, p. 470]. The Chinese ‘textual sources’ include the speeches made by representatives of the Chinese government, in particular senior Chinese diplomats, the Chinese government’s or the CCP’s policy announcements, and Chinese state media reports or editorials. They are aided in the analysis by relevant reports in Western mainstream mass media, which pointed out the politics of representation hidden from the Chinese official sources. Our aim is to unearth what was left out of the Chinese dominant discursive account.<sup>8</sup> This is in line with the evaluative criterion of ‘intertextuality’ or ‘triangulation’ which requires that research be multidimensional, drawing on multiple sources of data and evidence [67, p. 26, 100, pp. 84–89].

<sup>7</sup> Throughout this paper, ‘Chinese discourse’ is referred to state discourse or the discourse generated by the CCP elite. In China’s political system, there is little meaningful distinction between the ruling party and the government. The CCP maintains a political monopoly on and controls every government department, the military force, and the legislative body. Under an authoritarian regime, any deviant voices from the CCP leadership are censored or cracked down by the government.

<sup>8</sup> But our aim is not to discuss how the West has seen or perceived China during the pandemic.

## A Xenophobic Narrative: ‘Foreigners Bringing the Virus to China’

What did the infectious disease known as COVID-19 mean to Chinese, and how did the CCP elites represent it to the Chinese population? Contrary to the general understanding outside China about the source of the disease, they made it mean ‘foreign’—and thus ‘dangerous’—to the Chinese people. This xenophobic fear of foreigners was produced in the Chinese narratives of the sources of infectious viruses and in the Chinese practices of screening foreign visitors when they were about to enter China. In March 2020, Zhao Lijian, then a spokesperson of China’s Ministry of Foreign Affairs as well as a high-profile ‘wolf warrior’ diplomat,<sup>9</sup> threw out a conspiracy theory which claimed that the US army brought the coronavirus to China during the 2019 Military World Games, held in October that year in Wuhan [86]. Zhao posted on his Twitter account on 13 March 2020:

‘CDC was caught on the spot. When did patient zero begin in US? How many people are infected? What are the names of the hospitals? It might be US army who brought the epidemic to Wuhan. Be transparent! Make public your data! US owe [sic] us an explanation!’ [136].<sup>10</sup>

This conspiracy theory was not held personally by him only; it was reiterated by Lu Shaye, China’s ambassador to France, in December 2022.<sup>11</sup> They pointed out a series of ‘truths’ chronologically [36]:

- An unspecified ‘accident’ in the US Army Medical Research Institute of Infectious Diseases at Fort Detrick, MD, in July 2019 and the subsequent shutdown of the laboratory<sup>12</sup>;
- An outbreak of pneumonia in the area around Fort Detrick shortly after the accident;
- The Military World Games in Wuhan in the following October;
- Five US athletes carried home for falling ill; and the ‘weird fact’ that
- The US failed to win a single gold medal in the Games.<sup>13</sup>

<sup>9</sup> In early January 2023, it was reported that he has been transferred to a lower-profile post, deputy director of the Department of Boundary and Ocean Affairs of the same ministry [11].

<sup>10</sup> On 16 March 2020, a few days after Zhao’s Tweeter message, then US President Donald Trump started to use the term ‘Chinese virus’ to describe COVID-19. In his Twitter account—which was terminated by Twitter on 8 January 2021—he tweeted: ‘The United States will be powerfully supporting those industries, like Airlines and others, that are particularly affected by the *Chinese Virus*. We will be stronger than ever before!’ [61] (emphasis added).

<sup>11</sup> There has been speculation that Lu, a ‘wolf-warrior diplomat’, would be recalled to Beijing after causing a diplomatic uproar in Europe in April 2023 [105]. In a French TV interview, he said that countries that emerged from the disintegration of the USSR have no sovereign status in international law ‘because there is no international agreement to recognize their status as sovereign countries’ [47].

<sup>12</sup> The shutdown, claimed to be caused by problems with decontamination of wastewater, was not kept secret and reported, among others, by *New York Times* in August 2019 [52].

<sup>13</sup> However, US Department of Defense said that Judith Coyle won a triathlon gold medal in that World Military Games. The US team was also awarded four silver and five bronze metals [102].

The Chinese has never rebutted this conspiracy theory. In March 2020 Cui Tiankai, then-Chinese ambassador to the US, merely distanced himself from Zhao's arguments by saying in the US that it was 'crazy' to spread rumours about the origin of COVID in a US military laboratory [111]. An unsubstantiated allegation notwithstanding,<sup>14</sup> this narrative obviously contained a plot, as it did not only tell a temporal succession of events, but also strongly hinted that the American team in the Military World Games brought the virus to Wuhan and caused the outbreak. China also pushed back against allegations that live animals were sold illegally in the country. To refute then-US Secretary of State Mike Pompeo's calls on China to shut down its wildlife animal markets which might have contributed to the spread of COVID, Geng Shuang, a spokesperson of the Chinese Ministry of Foreign Affairs, said in April 2020 that there were no so-called wildlife wet markets in China where only farmers' markets and live poultry and seafood markets exist [132].

In November 2020 Chinese state media were promoting the research findings of scientists at Milan's National Cancer Institute (INT) which suggested that COVID-19 might have circulated in Lombardy in northern Italy in September 2019, 3 months before the outbreak in Wuhan. The INT enrolled 959 healthy volunteers for a lung cancer screening trial in September 2019–March 2020 and 11.6% of them had antibodies against the COVID virus in their blood samples [123]. Wang Guangfa from Peking University First Hospital's Department of Respiratory and Critical Care Medicine was quoted by China's *Global Times* in December 2020 as saying that '... the coronavirus was circulating widely in Italy before Wuhan reported its first confirmed patient', and that '... the virus could have been brought into Wuhan from other countries, although we have no evidence on exactly which country, when and how the virus came to China'. An 'anonymous' immunologist in Beijing told the *Global Times* that 'Italy's series of evidence ... not only proved that the first patient may not be from Wuhan, but also the virus may not come from Chinese animals such as bats' [135]. This narrative also indirectly suggested a causal relationship between the alleged occurrence of COVID-19 outside China, e.g. in northern Italy as early as September 2019, and the outbreak in Wuhan 3 months later, even though the mechanisms of the transmission of the virus to Wuhan were not specified.

This 'foreign origin' narrative aligned with the fact that China has never acknowledged that the virus originated in Wuhan, China. On 27 February 2020, Zhong Nanshan, a renowned Chinese infectious disease expert, said at a press conference in Guangzhou, 'The infection was first spotted in China but the virus may not have originated in China.'<sup>15</sup> This was echoed by China's then-Foreign Minister Wang Yi who said in an interview with the official Xinhua News Agency and state broadcaster CCTV in January 2021, 'More and more research suggests that the pandemic was likely to have been caused by separate outbreaks in multiple places in the world' [37]. But he did not dwell on any detail of the 'research' findings. As soon as the Chinese official discourse began to point to the outside world as the likely origin

<sup>14</sup> Lu Shaye advised reporters to think and draw their own conclusions while he only provided 'facts' [36].

<sup>15</sup> See the video at: <https://www.youtube.com/watch?v=UILmnQNeDuE> (accessed 13 March 2023).

of COVID, Chinese experts echoed by claiming that they had failed to find the COVID-19 virus in their surveys of Chinese bats, even though the same authors had argued the opposite in their prior publications [64].<sup>16</sup>

The debate about the origins of COVID continued as Western scientists were in search of genetic evidence from Wuhan. This ‘knowledge gap’ could be filled by the clues provided in a preprint article, i.e. prior to peer review, published in February 2022 by a group of Chinese scientists, led by George F. Gao of the Chinese Center for Disease Control (CDC).<sup>17</sup> They acknowledged that swabs were taken in and around the Huanan Seafood wholesale market in Wuhan in January 2020, but they claimed that raccoon dogs were not found in the market and that ‘no animal host of SARS-CoV-2 can be deduced’ [130].<sup>18</sup> An international study led by Michael Worobey, an evolutionary biologist at the University of Arizona, however, counter-argues that the Huanan market was the ‘early epicentre’ of the pandemic, even though they admit that ‘there is insufficient evidence to define upstream events and exact circumstances remain obscure’ [129, p. 951]. The genetic data, as referred to in the February 2022 preprint, were ‘quietly’ uploaded by the Chinese CDC-affiliated scientists to GISAID in January 2023 [85].<sup>19</sup> ‘By almost pure happenstance’, a group of scientists in Europe, North America and Australia ‘spotted the [genetic] sequences, downloaded them, and began an analysis.’ As soon as they approached the Chinese researchers who uploaded the data for collaboration, the genetic data were withdrawn from GISAID [130].<sup>20</sup> Using the downloaded data and drawing on their previous research, the Western scientists found that the genetic data drawn from the swabs linked the coronavirus to raccoon dogs illegally sold there.<sup>21</sup> More interestingly, the Western scientists’ findings prompted the Chinese CDC to release a revised version of the preprint, which formed the basis of a peer-reviewed article in *Nature* in April 2023 [74]. According to Alice Hughes of the University of Hong Kong’s Department of Biological Sciences, both the updated preprint and the *Nature* article are filled with errors. Her educated guess is that the Chinese CDC was motivated to publish the ‘poor data’ because they ‘[went] out of their way to suggest that Covid could have originated from outside China’ [64]. In sum, Chinese scientists and experts toed the party line, forming part of the CCP-organized discourse construction regime.

As part of this ‘fear-of-foreigners’ narrative, China had argued that the ‘foreign’ COVID-19 virus was transmitted into China via cold chain imports such as frozen food from overseas. In January 2022 it suggested that the first case of the Omicron variant could have arrived in Beijing via a package from Canada and warned that

<sup>16</sup> Jon Cohen said in August 2022 that ‘China now insists the pandemic didn’t start within its borders. Its scientists are publishing a flurry of papers pointing the finger elsewhere’ [28].

<sup>17</sup> Available at Research Square at: [https://assets.researchsquare.com/files/rs-1370392/v1\\_covered.pdf](https://assets.researchsquare.com/files/rs-1370392/v1_covered.pdf) (accessed 9 July 2023).

<sup>18</sup> See line 225 of the preprint on page 8.

<sup>19</sup> The open-access database’s full name is Global Initiative on Sharing All Influenza Data.

<sup>20</sup> GISAID made the data accessible again in late March 2023 [77].

<sup>21</sup> Their preprint article was published on 20 March 2023 at Zenodo at: <https://zenodo.org/record/7754299#.ZBomYuzML0o> (accessed 9 July 2023).

overseas mails might contain the virus. China was the *only* country that claimed that the virus was transmitted via international shipping or mailing [49, 50, 60, 106].

This narrative regarding ‘dangerous’ foreigners was reinstated during the COVID-19 pandemic. Monkeypox (renamed mpox by the World Health Organization (WHO) in late November 2022) was another infectious viral disease that commanded global attention. First discovered in human beings in the Democratic Republic of the Congo in Central Africa in 1970, it is most commonly found in West and Central Africa. In May 2022 clusters of mpox cases were identified in several non-endemic countries; and they did not have direct travel links to an endemic area. On 23 July 2022, the WHO declared the multi-country outbreak as a public health emergency of international concern (PHEIC) [126, 127]. In September 2022, a day after China’s southwestern city of Chongqing reported its first case of mpox in a person coming from abroad, the Chinese CDC’s chief epidemiologist, Wu Zunyou, provided five recommendations for the public in his Weibo page. The first recommendation was: ‘Do not have skin-to-skin contact with foreigners’, even though it was unclear whether the person was a Chinese or a foreigner [66].<sup>22</sup>

During the COVID-19 pandemic, stigmatization and discrimination against foreigners travelling to or living inside China were prevalent. For example, in January 2021 China reportedly started using anal swab to test so-called high-risk people for COVID. It allegedly first happened in some neighbourhoods with confirmed cases in Beijing [1]. However, the invasive, ‘undignified’ anal swab tests were later extended to be administered to international travellers arriving in Chinese cities of Beijing, Shanghai and Qingdao, despite evidence proved that a nasal or throat swab is more effective in detecting the respiratory illness [44]. This invited protests from governments of Japan and the US [119]. In the southern city of Guangzhou, foreigners were denied by restaurants [44]. Africans living there have been forced under quarantines or being labelled as dangers to the country’s health [120].

Quarantine for incoming travellers was a major pillar of China’s stringent zero-COVID policy. It was not unique to China, but after most of the developed countries had gradually scraped the requirement of quarantine in 2021 for fully vaccinated international arrivals,<sup>23</sup> China’s border control policy requiring quarantine at central facilities was the most draconian in the world. Its quarantine policy remained in place until 8 January 2023. At its peak in 2022, this measure required international visitors entering China to be confined in government-approved accommodations for 21 days, although health scientists confirmed that the median incubation period of Omicron variants was 2.8 days, with the vast majority falling between 1 and 6 days only [113]. The Chinese government lowered the quarantine period to 14 days in June that year. During the confinement, travellers needed to take multiple PCR tests [99, 104]. This international arrivals policy fanned the fear that people

<sup>22</sup> This ethno-nationalist language is also akin to the narrative and stereotype about HIV/AIDS in China in the 1980s. When the first case of AIDS in China was reported in 1985, the disease was then stigmatized as a ‘dirty Western disease’ [19, pp. 57–58].

<sup>23</sup> For example, in May 2021 the European Commission proposed that EU member states lift restrictions on non-essential travel for vaccinated people travelling to the EU after vaccination was shown to be able to break the transmission chain of the virus [39].

outside China posed potential threats to Chinese health security, breeding a mutually exclusive nationalist feeling of ‘we’ vs ‘they’.

The mass protests against restrictive lockdowns in many Chinese major cities in November–December 2022, including Shanghai, Beijing, Hangzhou and Guangzhou, were a contributing factor to the scrapping of the zero-COVID policy. There was, once again, an incitement to xenophobia in China’s handling of this ‘White Paper Revolution’. The White Paper Revolution originated *outside* mainland China; protesters in Hong Kong and Russia held blank or white paper in their demonstration in the absence of legitimate channels to express their grievances and unhappiness towards government policy [43]. Zhao Lijian of China’s Ministry of Foreign Affairs on 28 November 2022 blamed ‘forces with ulterior motives’ on social media for relating a deadly apartment fire in Xinjiang’s Urumqi to strict COVID measures [109]. Police were therefore searching people’s mobile phones for ‘foreign’ social media apps, framing that the unrest was instigated by ‘foreign hostile forces’. The BBC journalist Ed Lawrence, a foreigner, was beaten and kicked by Shanghai police and taken away in handcuffs. Zhao on 29 November accused the BBC of having a ‘disreputable history of smearing and attacking China’ and asked if BBC journalists ‘report news or fabricate news’ [81]. Chinese protesters were also confronted with warnings about ‘external forces’ [42].<sup>24</sup>

To justify the easing of restrictions which abolished centralized quarantine and mandatory mass testing, the CCP constructed and advocated a new narrative, which further reinforced xenophobic sentiments. In its official WeChat account, the Chinese Communist Youth League (CYL) praised the party leaders for their high level of responsiveness to people’s demands for revising the COVID measures. This prompt response would be impossible in any *foreign* countries in the world [140] (emphasis added). Simultaneously, it also hinted that the United States stirred up the unrest and public dissent inside China. When asked by the CNN about the anti-zero-COVID protests in China on 4 December 2022, US Secretary of State Antony Blinken expressed the Biden administration’s supports for the protesters in China [3]. Blinken’s comment was interpreted by the CYL as US intention to ‘create chaos’ in China. In its WeChat post, it asked, ‘What do things happening in China have to do with the US? Were you the ones who planned these events [protests]?’ [24, 140]. On 7 December 2022 China’s ambassador to France, Lu Shaye, openly pointed the finger of blame at outsiders seeking to spark ‘colour revolutions’ in China. In his words, ‘At first, people took to the streets to express their dissatisfaction with how local governments were unable to completely and accurately implement measures introduced by the central government, but the protests were quickly exploited by *foreign forces*’ (emphasis added). He continued, ‘We can clearly smell the scent of colour revolutions that have frequently happened in developing countries in recent years.... Take the ‘white paper parade’ for example, even though it’s white, it’s still a kind of colour revolution because white is a kind of colour’ [8, 36].

<sup>24</sup> In response to the government’s narrative, protesters ironically referred to the ‘foreign’ origins of the CCP, chanting that ‘The external forces you talk about, are they Marx and Engels? Is it Stalin? Is it Lenin?’ [42]

Overall, the Chinese government has used xenophobic narratives to assign particular meanings to the disease. It was a ‘foreign’ virus brought into China by ‘foreigners’. Given this ‘foreign’ understanding of the virus, China’s zero-COVID policy of border control and domestic quarantine, mass testing and lockdowns was represented as a ‘natural’ response to the invading disease. Chinese identity is socially constructed to be victims of foreign ‘invasion’ (the Other)—by Western military forces in the past and now by coronavirus. This challenge requires a strong and centralized regime to confront and overcome, and the CCP is the only actor that can provide this remedy. The ‘demonization’ of the Other and the securitization of the Self are not restricted to the virus. After the end of the zero-COVID policy, the CCP undertook a revision of the Chinese Anti-Espionage Law in April 2023, which came into effect in the following July. The new law expands the scope of espionage and spying to the unauthorized obtaining by foreigners of vaguely defined ‘intelligence and other documents, data, materials, and items related to national security and interests’ [83]. Foreign consulting firms operating in China have been targeted by anti-espionage raids [31]. This brings us to the discussion of CCP-orchestrated exclusive nationalism in China.

## The Promotion of Chinese Techno-nationalism

Nationalism can be understood as a goal-oriented ‘ideological movement for attaining and maintaining autonomy, unity and identity for a population which some of its members deem to constitute an actual or potential ‘nation’’ [103, p. 9]. It is closely associated with the concepts of nation, national consciousness and (desire for) dignity. The notion of ‘Chinese nation’ (中華民族) did not enter Chinese political vocabulary until the late nineteenth century, even though China has had written history for about 3500 years.<sup>25</sup> It was coined by Liang Qichao (1873–1929), a late Qing public intellectual and political activist, as an ‘imagined community’. Liang’s objective was to arouse and mobilize Chinese national consciousness and nationalism to defend China and its people from Western imperialist invasion [76]. The major turning point of the growth of Chinese national consciousness was China’s military defeat in the first Sino-Japanese War of 1894–95 [121, p. 74]. Chinese nationalism has inherently been anti-foreign in general and anti-Western/Japanese in particular, in the Chinese quest for dignity and international status.<sup>26</sup>

As far as public health crisis is concerned, Chinese nationalism started in the outbreak of severe acute respiratory syndrome (SARS) in southern China’s Guangdong province in November 2002, which spread to Hong Kong in February 2003 via an infected Chinese doctor and thereafter to a total of 30 countries across six continents. At the early stage of the SARS crisis, Beijing barred a WHO delegation from visiting Guangdong province for investigation. It let another WHO team wait for

<sup>25</sup> It began in c. 1250 BC in the Shang dynasty (c. 1600–1046BC).

<sup>26</sup> For a study of how ‘everyday struggles for dignity and equality’ have driven the rise of nationalism in East Asia, see [26].

three weeks before being allowed to visit Beijing [27]. During the WHO experts' Beijing visit, the Chinese government moved patients around, creating the scene that China was not in a health crisis. Nevertheless, China's slow and patchy reporting, compounded with reluctance to share information with other countries as well as the WHO, raised suspicions of covering up the outbreak. The WHO's then Director-General Gro Harlem Brundtland openly criticized China of mishandling of the disease and issued an emergency travel advisory on 15 March 2003, advising people to postpone all but essential travel as the disease had spread worldwide [20, p. 2, 128]. This was the first-ever travel alert that the WHO issued in its history. On 2 April, the WHO issued travel advisory for both Hong Kong and Guangdong province [20, p. 2]. Beijing felt humiliated by this 'travel ban'. Furthermore, the Chinese government 'lost face' when this cover-up could not sustain after 8 April when Jiang Yanyong, a retired chief surgeon of the People's Liberation Army General Hospital, commonly known as Hospital 301, 'blew the whistle', telling *TIME* magazine that the SARS cases he had personally seen in the hospital was far more than the official figure [65]. China's Minister of Health, Zhang Wenkang and Beijing's Mayor, Meng Xue-nong, were sacked after the whistle-blowing [89]. Since then, Chinese management of public health crisis has been closely tied with the nationalist quest of national dignity and status.

Techno-nationalism is on the rise in China in the course of the COVID pandemic. As a particular form of nationalist ideology, techno-nationalism 'links technological innovation and capacities directly to a nation's national security, economic prosperity and social stability' [7]. Techno-nationalists argue that the success of a nation is contingent on how well the people innovate, diffuse and use technology [34, p. 1]. This ideology, as adopted by the CCP, aims to achieve 'a strategic decoupling from China's competitors in order to gain technological self-sufficiency' [7]. Even after scientific research has demonstrated that Western mRNA vaccines are more effective than Chinese home-made inactivated vaccines in preventing death in elderly people and in protecting against the highly transmissible Omicron variant,<sup>27</sup> China has refused to import mRNA vaccines so as to provide room for indigenizing Chinese pharmaceutical technology [29, 32, 75].

Chinese techno-nationalist narratives raised questions about the safety of the Pfizer/BioNTech vaccine. A *Global Times* editorial pointed out in January 2021 that 23 elderly Norwegian people, out of about 25,000 people vaccinated with Pfizer/BioNTech vaccine, died after being jabbed of the vaccine. It suggested that the US and UK mainstream mass media intentionally downplayed the deaths, while being keen to highlight the 'unfavorable information' about a trial of a Chinese vaccine in Brazil.<sup>28</sup> The Western mass media were holding double standards because, according to the *Global Times*, 'attacking China is their desperate goal'. The meaning

<sup>27</sup> It was first detected in South Africa which reported to the WHO on 24 November 2021 [125].

<sup>28</sup> After completing the first late-stage trial of an inactivated vaccine developed by China's Sinovac, researchers in Brazil announced in January 2021 that the Chinese vaccine only had an overall 50.4% efficacy among all volunteers. It barely met the threshold for regulatory approval [68]. A Reuters study counter-argues that Western mass media were not 'silent' about the deaths of the 23 elderly people in Norway [98].

attached to mRNA vaccines, produced by this Chinese narrative, was that they were less safe than Chinese inactivated vaccines, which used a ‘very mature’ technology backed with ‘decades of clinical testing’ and thus had ‘more solid foundation in safety than ... mRNA vaccine’. In contrast, Western mRNA vaccines were hastily introduced to the market. In addition, unlike Western countries, the Chinese government was said to be very prudential about the use of new vaccines and thus ‘no senior Chinese official has come out to openly endorse Chinese vaccines’ and Chinese elderly, aged 60 or above, were not given priority in Chinese vaccination campaign [50]. This narrative, however, excludes the ‘foreign’ findings that the Chinese inactivated vaccines initially generate lower levels of ‘neutralizing’ antibodies and this protection level falls faster than mRNA vaccines. Inactivated vaccines also offer less protection to older people because they trigger a less potent immune response against the COVID virus [75].

While using the ‘safer’ inactivated vaccines domestically, Beijing has been simultaneously sponsoring domestic development of its own mRNA COVID vaccines, although it is less than assuring. The first Chinese-made mRNA vaccine, AWcorna, was not used in China but in Indonesia [108]. Another home-made mRNA vaccine to be administered to Chinese people was said to undergo mid-stage clinical trial production in January 2023, according to the drugmaker CanSino Biologics [118]. Self-reliance was another factor that has influenced the Chinese leadership’s decision to ‘autonomously develop’ (自主研发) its own mRNA vaccines, behind which the core intellectual property is owned by Chinese entities [137]. To aid domestic vaccine industry to master the mRNA technology, China requested Moderna to hand over the core intellectual property behind its COVID vaccine as a prerequisite for selling its vaccine to China [133], but Moderna rejected China’s request [30]. The huge Chinese internal market is protected for the growth of China’s nascent indigenous pharmaceutical industry and closed to foreign companies. That is why BioN-Tech’s vaccines are available to ‘foreigners’ only.

In his address to the CCP’s 20th National Congress in late October 2022, Xi Jinping explicitly stated that the country’s overall development objectives would be to ‘build China’s self-reliance and strength in science and technology’. The phrase, ‘self-reliance and strength in science and technology’, has appeared five times in his speech at the CCP Congress [82]. This theme was reiterated in the annual session of China’s legislature, the National People’s Congress, in March 2023 [131, 132].<sup>29</sup>

Apart from supporting its domestically manufactured COVID vaccines, the Chinese government was simultaneously promoting its traditional Chinese medicine (TCM) as a twin treatment of COVID. The director of China’s National Health Commission (NHC), Guo Yanhong, proclaimed during a news briefing on 7 December 2022 that ‘both medicines (Chinese and Western) should be given equal emphasis’ [71]. Chinese health ‘experts’ have generated and promoted a discourse on the utility of TCM for managing COVID. There have been publications and reports

<sup>29</sup> Given the space limit, we cannot elaborate on the persistence of techno-nationalism in post-COVID China. Suffice it to say that China is taking steps to build a ‘techno-security state’ to compete with the US for global technological dominance [25].

by Chinese researchers, both in Chinese and English, advocating the use of TCM, especially *Lianhua Qingwen* (LHQW) (連花清瘟) capsules, for curing COVID-19 and its associated side-effects [40, 110]. Composed of more than a dozen Chinese herbs, LHQW capsules are produced by modern pharmaceutical technology and their standardized packages are similar to Western medicine ones. Chinese nationalists have urged the modernization of TCM to enhance China's international standing [70]. In the midst of the pandemic, Xi Jinping also urged the development of the TCM [87]. However, among those writings in favour of the TCM, one research article caused controversy and cast doubt on the effectiveness of the TCM. Two prominent Chinese scientists, Zhong Nanshan and Jia Zhenhua, were suspected of using their 'knowledge', expressed in scientific language, to promote the interests of a major TCM enterprise. Without declaring their conflicts of interests, they (and their co-authors) in 2021 proclaimed in an article in an international academic journal, *Phytomedicine*, that LHQW could help to reduce fever, fatigue and coughing while dealing effectively with moderate cases of COVID [62, 71].<sup>30</sup> Zhong, famous for discovering the SARS coronavirus in 2002–2003, was found to have collaborated with Shijiazhuang Yiling Pharmaceutical, the manufacturer of LHQW, since 2015. Jia, officially working with Hebei Yiling Hospital, is the son-in-law of Wu Yiling, the founder of Shijiazhuang Yiling Pharmaceutical. Both later admitted that the pharmaceutical company provided funding and LHQW capsules for their research, even though it was not involved in data collection and analysis and writing of their article [95].

In face of a surge of COVID infections after retreat from its zero-COVID rule, the Chinese government continues to promote an 'integration of traditional Chinese and Western medicine', arguing that they combine to contribute to the 'scientific and precise prevention and control' of COVID [114]. On 10 December 2022, 3 days after the central government's announcement of the relaxation of the rules, the National Administration of Traditional Chinese Medicine doubled down on promoting the TCM by issuing 'Guidelines for Home-Based Traditional Chinese Medicine Intervention for Patients Infected with COVID-19', recommending both TCM medicines and TCM therapeutic techniques, including acupressure and acupuncture [90, 91].

## The CCP 'Institutional Superiority'?

What was behind the CCP's discursive construction of the 'foreignness' of COVID? The fear of foreigners and nationalist sentiment were fuelled and inflamed by the official narratives which portrayed that deadly virus came from outside, and Chinese vaccines and medicines were better and safer than the Western ones. They served to justify Beijing's refusal to approve the use of

<sup>30</sup> Despite the positive discourse on LHQW domestically, its effectiveness to treat COVID patients has remained open to dispute. The US Food and Drug Administration (FDA) warned in July 2020 that LHQW 'is an unapproved new drug' and that selling it as a COVID-19 remedy is a violation of the law [115].

Western mRNA vaccines for the Chinese people, promotion of TCM and restrictions on foreigners' travels to China. The 'reality'—which was constructed by the government—mainly showed that the CCP managed this health crisis well without recourse to foreign resources; and has in turn demonstrated that Chinese governance model is better than and superior to the Western model. This purposely built 'meaning', 'knowledge' and 'reality' helped construct hierarchical relations between the Self and the Other.

At the heart of the efforts to sustain the discursive construction of this hierarchical relations were numerical data and their 'manipulated' representations by health 'experts'. Even after the de facto end of the zero-COVID policy on 7 December 2022, China's official cumulative COVID death toll since the outbreak in December 2019 was very 'low' [94, 97]; in comparison, the US had more than 870 times as many deaths on a per capita basis.<sup>31</sup> This substantial discrepancy, according to the Chinese narrative, has strongly borne testimony to China's 'institutional superiority' in managing the health crisis. As early as March 2020 when the COVID crisis in Wuhan was put under control while the virus was spreading in the US, the *Global Times* called on the US to learn from the 'Wuhan experience' in managing its worsening COVID situation [21]. Liu Guangyuan, a Hong Kong-based Chinese diplomat, compared the performance of China and the US explicitly in his piece in *China Daily* in late May 2022,

'Thanks to the dynamic zero policy, China has emerged stronger from the most serious epidemic situation since the outbreak in Wuhan. Shenzhen has been back on track after seven days of restrictive measures, and Shanghai has brought the epidemic under control and cut off community transmission chains. These results testify that dynamic zero is an effective policy that suits China and can stand the test of history.

By contrast, the US, despite its most advanced healthcare technology, has become 'the biggest failure in fighting the epidemic', with its COVID-19 fatalities exceeding a tragic milestone of 1 million. The appalling number mirrors the American political polarization, the rich and poor chasm, and its contempt for human rights. The lives, health, and happiness of American people at the bottom of the social ladder have fallen victims to power and capital games' [72].

The Chinese Consulate-General in Durban, South Africa echoed with Liu, arguing that China's zero-COVID policy is 'a MUST approach for China' [41] (emphasis in original). Amid the pandemic Xi allegedly urged Chinese officials to 'grasp clearly the grand trend that the East is rising while the West is declining' (東升西降) in the post-COVID world [16]. The contrast between 'Chinese order' and 'Western chaos' has also been made in official narratives [138]. There is a strong belief among Chinese leaders that the US and other Western countries are in 'irreversible decline' [33].

To uphold this 'institutional superiority' narrative, China's NHC has gone to great lengths to maintain a tight grip on the representation of the 'truth' of the scale of infections and fatality after 7 December 2022 when China began to ease the COVID measures. It halted the release of daily COVID case figures from 25

<sup>31</sup> For a comparison, see footnote #2.

December 2022 [55]. With few explanations, NHC experts also changed the official definition of COVID-related deaths, which was narrower than those used by many foreign countries, after putting an end to the zero-COVID policy. Only those who died in hospitals of pneumonia or respiratory failure caused by COVID count in China's official tally. Michael Ryan of the WHO Health Emergencies Programme said that Chinese official COVID data '*under-represented*' the true impact of the outbreak in terms of hospital and ICU admissions and in particular deaths [13, 56] (emphasis added). The credibility of the official statistics was open to intense dispute because they belied anecdotal evidence on the ground from across the country. To name but a few, China's funeral homes and crematoria were reportedly inundated with dead bodies [23, 88, 92]. On 21 December 2022 it was disclosed that as many as 248 million Chinese people, or 18% of the total population, were infected in the first 20 days of the month [9].<sup>32</sup> In early January 2023, Henan Health Commission admitted that 89% of people in the populous province, which had a population of more than 99 million, had been infected with COVID [51, 57].

In face of these credibility criticisms, government responses were divided. Some 'experts' changed their narrative by arguing that it was not 'necessary to look into the cause of death for every case at present', as the 'key task during the pandemic should be treatment', and 'each country will classify [COVID-19 deaths] according to its own situation' [2]. To the surprise of many observers, the NHC on 14 January 2023 reported nearly 60,000 COVID-related deaths in a month since the lifting of the zero-COVID policy [93].<sup>33</sup> According to China's reports to the WHO, there were 121,490 deaths from 3 January 2020 to 5 July 2023 [124].<sup>34</sup> However, this official death toll is still believed to be incredibly low. Four separate research teams, consulted by the *New York Times*, have come to a similar estimation: COVID may have killed 1.0–1.5 million Chinese people [48].

Using the Maoist metaphors of 'East' versus 'West', Xi has framed the pandemic as an ideological 'battle' between Western liberal-democracy and China's socialist governance system.<sup>35</sup> Both Mao and Xi share in believing that the West (or imperialism in Mao's terminology) is in decline in competition with socialism. To be able to mobilize China's domestic human and material resources without dependence on *foreign* resources to combat the '*foreign*' virus with remarkably 'low' death toll is of paramount importance to Xi's dignified and superior nationalist leadership. In February 2023 the CCP declared that it made a 'major and decisive victory' in the battle against COVID and 'created a *miracle* of a populous country in the history of human civilization to successfully walk out of the pandemic' [54] (emphasis added).

<sup>32</sup> The estimate was shown in minutes from an internal meeting of China's National Health Commission held on 21 December 2022.

<sup>33</sup> There were 59,938 deaths between 8 December 2022 and 12 January 2023.

<sup>34</sup> According to the same source, there were 99,292,081 confirmed cases in China, and its case-fatality rate was as low as 0.12%. In contrast, the global case-fatality rate was 0.91% and that of the United States was 1.09%.

<sup>35</sup> In November 1957 when Mao was visiting Moscow, he expressed his assessment about the prevailing international order. In his words, 'at present, it is not the west wind which is prevailing over the east wind, but the east wind prevailing over the west wind' [134, p. 160].

## Conclusion

This article has argued that although the COVID pandemic seemed to be an ‘objective’ reality for natural scientists to study and China’s COVID policy claimed to be ‘science-based’ and to aim to save human lives, the meaning of the disease to Chinese was a ‘social’ reality discursively constructed by the CCP. In assigning specific meaning of ‘foreignness’ to the virus, carriers and vaccines, the CCP has constructed a ‘discourse of danger’, with languages full of the ideologies of anti-foreignism and self-reliant nationalism. The use of domestically made ‘safer’ vaccines as well as modernized traditional Chinese medicine were meant to ‘save’ Chinese lives. This served to legitimize the zero-COVID policy as well as affirming the Chinese communist ‘institutional superiority’ over its liberal-democratic rivals, (re)producing a binary identity opposition between a virtuous China (Self) and the decadent West/the US (Other). Having ‘saved’ numerous Chinese lives whereas millions of Americans and Europeans had died from the disease, the CCP leaders ideologically declared achieving a ‘major and decisive victory’ and a ‘miracle ... in the history of human civilization’ in February 2023.

This paper has also contended that xenophobia, nationalism and the claim of ‘institutional superiority’ have lingered on after the dismantling of the zero-COVID policy. A policy implication of this finding is that there are grounds for us to concern whether Xi Jinping is still committed to the Dengist open-door policy. China’s previous discourse on ‘gearing towards international standards’ (與國際接軌; literally meaning: ‘merging tracks with the world’), prevalent since joining the World Trade Organization in 2001, is now a part of history, with little relevance to China under Xi. Despite the apparent ‘demotion’ of individual ‘wolf-warrior’ *diplomats*, ‘wolf-warrior’ *diplomacy* may likely remain unchanged. In addition, while there is ongoing debate, especially in the US, on economic and technological decoupling from China, driven by the US government [5], we may at the same time need to pay due attention to the possibility of a Chinese state-orchestrated ‘Chexit’ [46], i.e. China’s exit or decoupling from the world, when the CCP is inflaming nationalism and xenophobia. Under Xi’s supreme leadership, China is moving towards making a nationalist self-reliance policy ‘normal’ and legitimate like that in the Mao era.<sup>36</sup>

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<sup>36</sup> In addition to science and technology, two recent examples indicating China’s state promotion of self-reliance are of interest. First, there is a nationwide building of multi-storey high-rise hog farms to achieve self-reliance and self-sufficiency in the supply of pork, which is deemed to be a strategic imperative [117]; second, for the sake of protecting ‘data security’, China’s SOEs are advised to stop using the services of the four major international accounting firms as soon as the auditing contracts with them expire. Instead, SOEs are encouraged to use local auditors [10].

## Declarations

**Conflict of Interest** The authors declare no competing interests.

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