Dolly is a university English language instructor from Canada living and working in Chongqing, the most highly populated municipality in China, with a population of 31 million people. Chongqing is directly administered by the central government of the Peoples’ Republic of China.

The World Socialist Web Site spoke to Dolly, who prefers to use a pseudonym, about her experiences living through the past two years of the COVID-19 pandemic in China. Unlike the major imperialist powers in North America and Europe, which have allowed the deadly virus to run rampant and bear responsibility for the deaths of millions of people, China has pursued a Zero COVID policy that has largely succeeded in suppressing transmission and saving lives.

Dylan Lubao: Could you please describe where you live and what you do for a living?

Dolly: I’ve been living in Chongqing city for around four years. I started with a job teaching oral English to over 500 middle school students, before moving to a couple of high school programs.

DL: So, you’re not originally from China? Where are you from originally, and why did you decide to live and teach in China?

Dolly: I’m from Canada originally, but not exactly anywhere in particular as we moved—a lot. My last location in Canada was Toronto where I’d been for about five years when I made the move to China.

I’d gone back to school to get qualifications as a language teacher and was having a pretty awful time staying employed in Ontario’s College system—geared toward very short contracts for a shark tank full of untenured instructors.

I’d been to China twice as part of a team working with kids in an English Language Immersion Summer Camp program. I fell in love with the country and the people I met and saw there’d be no trouble finding solid work in a classroom.

I took Chinese lessons for about 18 months back in Toronto, secured a job through connections I’d made during those summer work trips and made the jump in 2011. [Former Conservative Prime Minister Stephen Harper had a majority, the younger Ford brother had just been elected mayor (former conservative Toronto mayor Rob Ford), and I was frankly exhausted by the bleakness of unending resistance toward real justice—toward hearing and including so many people being left out and kept down.

My own work situation was just more of the same. I wondered what changing everything—even the ground under my feet, might teach me. I was excited to go and find out and leave behind the relentless churn of short contract jobs.

DL: Can you describe the response in Chongqing to the initial outbreak in Wuhan?

Dolly: Over the few days preceding January 23, 2020, when Wuhan city launched lockdown policies and procedures that would impact some 20,000,000 people, among folks we know here in Chongqing there was only passing talk of a concerning novel virus spreading downriver from us. On the 23rd we saw the televised reports of Wuhan’s lockdown measures going into effect broadcast around the world. It seemed obvious that something similar was imminent here, but like most people anywhere in China but Wuhan, we had no clear sense of how far the virus had spread beyond that—nor did officials.

A novel virus was spreading like wildfire and filling up hospitals. The faster folks stopped moving around, the quicker health officials would be in a position to gauge the scope and scale of the problem. On the one hand, because the outbreak was properly identified around the same time that travelers nationwide were already on the move toward Spring Festival celebrations with family, it was impossible to know how far the virus had already gotten. On the other hand, the timing of Wuhan’s lockdown came just two days prior to Lunar New Year celebrations and family gatherings reaching their peak, so asking folks to shelter in place while restricting travel in and between cities wouldn’t be too bad for most people in the short term. This was certainly true for us in Chongqing as I suppose it was elsewhere around the country.

Restrictions were announced on January 26 in the form of “controlled management” to limit peoples’ movements and thereby limit the spread. Instructions were sent out regarding whom to contact in the event that someone in your house was exhibiting symptoms. Anyone anywhere outside their home had to be masked at all times. People were asked to stay home with the exception of one member of your household permitted outside their home had to be masked at all times. People were asked to stay home with the exception of one member of your household permitted.

There were restrictions—these being quite different from what most people in western countries are familiar with. In cities across China, residential developments tend toward a dozen or more high rise apartment buildings laid out within a contained green space interconnected by pedestrian-only streets, and footpaths. They’re usually fenced off from the city streets and traffic surrounding them, with at least two pedestrian gates that open onto small squares with adjacent shops, restaurants etc.

The idea behind this “gated” style community development is to provide safe outdoor space for kids, dog walkers and the residents at-large to walk and gather, somewhat removed from noise, exhaust emissions, and the
obvious dangers of otherwise being in the midst of busy traffic. In the context of pandemic mitigation strategies, it made restricting movement in and out to residents of the community quite straightforward. Security guards stationed at the gate could easily establish a checkpoint station, including hand sanitizer and temperature check. It was a simple matter to ensure those entering were residents and those going out did so to buy necessities. I want to emphasize that outside of pandemic concerns and restrictions, the gates are more or less wide open to whomever lives inside or wishes to visit someone who does.

The overwhelming majority of people in my community were immediately entirely cooperative with COVID protection policies. This was absolutely not the western journalist’s standard fever-dream of a brutalist authoritarian dictate. Speaking from my own personal experience, we were united in a common sense-driven determination to keep ourselves and others safe in the face of a sudden, novel, and terrifying virus outbreak. Among friends, colleagues, and neighbor’s, the sense that we were working collectively for the safety of the whole community was universal. People checked in often with each other by phone, making sure folks in their circle/neighborhood/family were well and had what they needed to get by.

Of course, we were all also scared—no one knew much about the virus as yet, only that it spread too easily and was pretty good at killing you. Nobody enjoyed shutting everything down and sheltering in place; we did it out of a sense of urgency, necessity, and proactive precaution to give health care workers and officials time to get ahead of the outbreak and learn as much as possible about how to fight the virus and save lives. On rare occasions, we did see some conflict between security at our back gate and folks who did not live here demanding entrance to see friends or family—I recall about two or three such incidents. I was struck by how calm and reasonable the security guards were when faced with people screaming in their face. Their tactic seemed to be to patiently wait out the screaming until whoever it was got tired and gave up—which they inevitably did.

**DL:** From that initial lockdown in Wuhan, and the subsequent response in Chongqing, how did the course of the pandemic develop over the next several months?

**D:** It was a very long stretch of sitting still, coping and keeping up with big numbers getting bigger by the day, and watching it all go global in a world that preferred to ignore or blame China rather than take warning. Chongqing municipality is a combination of densely populated city and surrounding rural counties encompassing an area of roughly 82,000 square kilometers. We’re talking about a total population of over 32 million people, more than 22 million of whom live in the city-proper—where case numbers in 2020 levelled off at 600 or so by mid spring. By fall of that year we had achieved “COVID Zero” in the sense of 30 or more days with no new cases. I can’t speak for all 32 million people here in terms of their perspectives on a cost-benefit analysis of the controlled management policy implemented here, but I do know a lot more than 600 people avoided suffering with or dying of COVID as a result.

I couldn’t say exactly when various groups of workers and businesses were allowed to resume work on site, but I know this happened gradually, according to particular circumstances, beginning as early as March 2020. Occupational health and safety experts were tasked with using the best knowledge anyone had about transmission mitigations and working as quickly as possible to get folks back to work safely. Masking, entry gate temperature testing, streamlined and centralized PCR batch testing & contact tracing, ventilation & air filtering, distancing, and surface disinfection—all and all applicable mitigation strategies were employed in combination. The logic of such a comprehensive approach should be obvious by now to anyone who ever thought any one of those things alone would end the pandemic.

Bit by bit, workplace by workplace, driven by an abundance of the precautionary principle, people went back to work. Schools and universities launch their spring semester somewhere between the last week of February and first week of March and were among the last to return to in-person operation. Millions of teachers along with tens upon tens of millions of students did their best in adapting to working together online. Primary, middle, and high school students returned to their classrooms in April. My university called us back in the first week of June, and we were back to business as usual with a few minor exceptions. We carried on masking indoors on campus until early in the fall semester and gate access was and is minimally regulated by QR code or other campus ID to enable any potential need for contact tracing.

Between January 25 and June 6, when I returned to the classroom to meet my students again for the first time since late December, I might have left my apartment as many as five times to buy fruit or vegetables from a neighborhood shop. That first day back, the 20 minute subway trip revealed just how carefully any potential opportunity for community transmission had been anticipated and planned for. Everyone was masked inside the station and on the train as well as temperature checked on their way in past security to the turnstiles.

Even taking the escalator was done single file and socially distanced. For context, it’s worth noting that escalators in China are near universally treated as an opportunity to stand two-by-two and have a little rest; so much so, it would be better to call them “chill & chat-alators” here. Happy guest workers learn quickly to take the stairs—or slow down.

Absolutely no one had any trouble cooperating with any of it. We had all seen countless pictures of exhausted health care workers’ faces rubbed raw by the straps on their masks. Compared to that and what people infected with the virus were going through, what we were asked to do to keep each other safe and give health care workers a break was next to nothing.

As far as I know, our experience here matches that of most in China with the obvious exception of Wuhan and some other cities that were hit much harder than us with community spread and new outbreaks after the first wave. Shanghai, Beijing, and some northern cities near the border come to mind. The vast majority of people here avoided infection, prolonged illness, and death by COVID through a collective commitment to do what they could to stop the spread and support their neighbors. By October of 2020, the country as a whole had largely emerged from the worst of it, returned to work and school, and adapted easily to the minimally intrusive systems in place to identify and respond to even one confirmed case in a community.

**DL:** In the corporate press of many developed countries, such as Canada and the United States, there’s an attempt to portray China’s Zero COVID program as a totalitarian attack on democratic rights. As someone who is not only experiencing Zero COVID firsthand, but also hails from Canada, what do you think of these allegations?

**D:** I think these allegations are absurd. I think about how many editorials I read in English dismissing hundreds of thousands and now millions of COVID deaths with ice cold rhetoric about comorbidities. I wonder how people rationalize the billions in COVID response funding gone unspent by Ontario Premier [Doug] Ford’s government alongside the tens of thousands who died in long-term care homes under his watch. I think about how insane it is to rattle on about “rights” with such an existential threat on the doorstep.

What rights specifically? Is it the right to exercise one’s vote? Is it the right to housing and full time wages that meet one’s basic needs? Is it the right to dignity and fairness in the workplace? In the health care system? In the justice system? None of these were on parade during the so-called Freedom Convoy that occupied the city of Ottawa for weeks on end. Those presuming that public health was prioritized over “human rights” in China talk about the tyranny of having to wear a mask to limit the spread of an airborne virus that kills, disables, and mutates—to kill and disable...
some more. They’re upset about the infringement of their “rights” to attend sporting events, eat in restaurants, and get haircuts. I’ve been eating out in restaurants for over a year and a half without fear of COVID.

What is the meaning of the so-called democratic right to willfully spread a deadly and disabling virus? Is it a democratic right to hoard and deny access to vaccines for people in the global south? What sort of democratic rights were exercised by those empowered to shelter comfortably in place while essential workers in meatpacking plants, grocery stores, and Amazon warehouses were thrown to the virus without basic workplace safety protections? Systemic inequalities driven by racism, ableism, ageism, and poverty led to dramatically worse COVID impacts for marginalized people everywhere in the so-called democratic western world. It seems their right to life and health must not be counted among their democratic rights.

I would wonder what people imagine goes on here, but I get a pretty good idea from the absolute nonsense I see repeated ad nauseam in print media and elsewhere online. I live in an ordinary district in an ordinary city where ordinary people hate the damn virus as much as anyone anywhere does. We are grateful to an army of health care workers who have shown up again and again to make war on that virus. To my knowledge, not one health care worker in China has been spat on or accused of murder—or advised by police not to wear their scrubs in the street due to the potential for violence from so-called “anti-mask/anti-vax/freedom” advocates.

A publicly funded, centralized testing system means that thousands of health care workers can administer and process millions of COVID tests practically overnight—wherever an outbreak pops up. I’ve been caught up in pre-emptive testing on two occasions. This was done, not in response to identified COVID cases, but in returning to university after a break between semesters when a great many of the some 20,000 students and staff would have travelled out of town. I will admit to being slightly annoyed by having to make a special trip to campus as I’ve chosen to stay put in Chongqing since this nightmare started. I stood in line for about three minutes and less than a minute later it was done. The only right trampled in that process was the right to begin classes wondering who among my students may have brought something extra to share with everyone.

Honestly, I think China could offer the world an open source cure for cancer that made every recipient 20 percent better at math and 50 percent more kind and compassionate and the western corporate press would call it the launching of a totalitarian assault on the democratic rights of western pharmaceutical companies to profit from cancer patients—absurdist nonsense and propaganda aimed at maintaining ignorance about and hatred for this country and its people.