

Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

Elsevier hereby grants permission to make all its COVID-19-related research that is available on the COVID-19 resource centre - including this research content - immediately available in PubMed Central and other publicly funded repositories, such as the WHO COVID database with rights for unrestricted research re-use and analyses in any form or by any means with acknowledgement of the original source. These permissions are granted for free by Elsevier for as long as the COVID-19 resource centre remains active.



Available online at

ScienceDirect

www.sciencedirect.com

Elsevier Masson France



www.em-consulte.com/en



LETTER TO THE EDITOR

Peer review journals publishing surveys of Chinese views on government pandemic performance: Invalid science and ethically wrong



KEYWORDS

Chinese pandemic attitudes; China government pandemic control

Dear editor.

Recently, I was sent a manuscript by a peer review journal to evaluate for publication, a study that reported findings from a survey of Chinese citizens on their perceptions of the effectiveness of measures deployed by the Chinese government to reduce community transmission of SARS-CoV-2 in that nation [1]. The manuscript originated from a Chinese university. Given the longstanding use of violent and oppressive tactics by the Chinese government to enforce Covid-19 preventive measures [2], most recently in Shanghai [3], reviewing this manuscript for journal publication presented ethical concerns. Chinese citizens are being forced to turn their homes over to government authorities to serve as Covid-19 isolation/quarantine facilities, are enduring severe lockdowns where access to food and health care is impeded, residential buildings are fenced off if occupants have had possible viral exposure, and children are forcibly separated from their parents [3].

After presenting uniformly positive survey respondent appraisal data, the authors of this manuscript concluded: "The [Chinese] public has a high acceptance of emergency prevention and control measures on the whole. With the development of the epidemic, the acceptance increased significantly ..." [1]. Other articles published in peer review journals focusing on surveys of the Chinese public regarding their views of their government's disease control measures similarly do not consider the impact of respondents' potential fears of being candid in expressing their views [4–7]. What should a journal peer reviewer do, when requested to review and assess a study reporting public attitudes and perceptions about disease control strategies/tactics forcibly imposed by a totalitarian state?

Issues of concern are both methodological and ethical. Methodologically, the survey failed to address potential social desirability bias in responses, or public fears of candidly expressing dissatisfactions with the government's

disease control measures [1]. Ethically, publishing such flawed and likely inaccurate data enables a false or distorted characterization of public perceptions of the Chinese government's Covid-19 response as acceptable and widely supported by the public. The authors also inappropriately use this biased data to argue that Chinese public views on disease control measures compare favorably to other nations, including democracies, where the kind of draconian and punitive measures deployed by the Chinese government are in fact socially, politically and morally unacceptable [1]. While ethical concerns about China's management of the pandemic are not new [8,9], there is little guidance for peer reviewers who receive manuscripts from journals requesting evaluation of Chinese public perception data that is methodologically and ethically of concern. Is it the best evidence-based practice of biomedical science to ignore these concerns, and for journals to publish such studies?

China is an authoritarian state using police force to drive universal adoption of pandemic preventive measures, where expressing a negative opinion of those measures risks potential sanctions imposed by the Chinese government. If survey respondents are fearful that criticism of governmental pandemic control measures may result in punitive retaliation, they will be less likely to respond candidly. Given the Chinese government's control and monitoring of public access to the global Internet, respondents to this web-based survey may have feared that they did not have true anonymity, and so limited their candor responding to such a politically sensitive survey. China's use of police and military force to drive public compliance with pandemic disease control measures has likely generated sufficient public fear and intimidation to corrupt the veracity of responses to surveys that seek to evaluate its citizens views of these measures.

Therefore, the favorable views found in this public survey of the government's disease control measures likely reflect the impact of these fears, rather than the actual views of respondents. The study authors offer no discussion of these critical methodological flaws in the implementation of their survey or the interpretation of its findings [1]. The results of this and similar public survey studies conducted in China cannot be accepted as accurate reflections of respondents' real views of governmental tactics to reduce spread of the virus, despite the significant imprimatur and status conveyed by peer review journal publication. No public survey data on the value, acceptability and effectiveness of Covid-19 disease control measures in China should be regarded as scientifically unbiased and objective, nor should such data

be published in peer review journals, unless captured by an independent third party beyond the influence, monitoring and control of the government, so that respondents can be highly confident that their responses will be anonymous, ensuring respondents will not be identified and at risk of governmental retaliation and sanctions.

The impact of social desirability bias and fear of candor on public responses to surveys in China, where government controls and monitors public access to the Internet, engages ubiquitous video surveillance in public spaces, and enforces pandemic response measures by brutalizing and imprisoning its own citizens, is likely profound and sufficient cause for scientific journals and peer reviewers to question the integrity of such studies and public survey data. Public respondents to such surveys may legitimately fear potential retaliatory sanctions caused by truthfully condemning governmental practices, and will likely prefer not to challenge governmental authority in a nation where this is not tolerated. In China's embrace of its "Zero Covid" policy, it is forcefully leveraging its zero tolerance of public resistance or protest.

With 18% of the world's population living in China, and given the pandemic's origins in that nation, the international public health community understandably seeks objective public perception data about China's pandemic performance. However, we legitimize use of oppressive pandemic disease control policies by publishing likely biased findings on public perceptions of these measures in peer review journals. Public surveys of Chinese citizens about their views of governmental disease control tactics are not fit for publication in peer review journals if they are not anonymous and unless certainty that their responses are de-identified is conveyed to respondents, enabling them to feel safe expressing their actual views. Survey findings in the study cited are not science, but propaganda disseminated on behalf of the Chinese government lacking scientific validity and thus utility.

Data and insights from totalitarian states like China that achieve Covid-19 disease control success through use of unethical and coercive authoritarian measures have no generalizability to liberal democracies, where governments do not enforce compliance through violent, suppressive police action, and where governmentally monitored Internet access is not the norm. Conclusions these authors draw comparing Chinese acceptance of governmental pandemic measures relative to other states are not scientifically valid for the same reasons; most states do not employ violent coercion and harsh sanctions for non-compliance to achieve disease control objectives.

Journals and their peer reviewers should consistently disqualify studies based on unscientific public survey data that ignores, rationalizes or implicitly commends the Chinese government's unethical, punitive pandemic disease control efforts. When a government is, figuratively and literally, holding a gun against the public's head to ensure they will comply with pandemic control measures, respondents will surely indicate those measures are effective and desirable, even if privately they believe otherwise.

After expressing these points to the journal's editors, the subsequent publication of the cited article was concerning. Such studies implicitly message that other nations should emulate and replicate the methods China uses to achieve effective disease control. Publication of these arti-

cles advances the disinformation and propaganda objectives of the Chinese government in its effort to rationalize draconian and inhuman pandemic control measures. While some nations may emulate what China has achieved with its ''Zero Covid'' practices, peer review journals should denounce the unethical police methods deployed by not publishing such scientifically invalid and morally compromised reports.

Human and animal rights

The authors declare that the work described has not involved experimentation on humans or animals.

Informed consent and patient details

The authors declare that the work described does not involve patients or volunteers.

Funding

This work did not receive any grant from funding agencies in the public, commercial, or not-for-profit sectors.

Disclosure of interest

The authors declare that they have no known competing financial or personal relationships that could be viewed as influencing the work reported in this paper.

References

- [1] Zhang A, Yang H, Tong S, Gao J. An investigation on Chinese public acceptance of Covid-19 prevention measures. Int J Environ Res Public Health 2022;19:5087, http://dx.doi.org/10.3390/ijerph19095087.
- [2] Lei R, Qui R. Report from China: Ethical questions on the response to the Coronavirus. Bioethics Forum Essay, The Hastings Center, January 31, 2020. https://www.thehastingscenter.org/report-from-china-ethical-questions-on-the-response-to-the-coronavirus/.
- [3] Human Rights Watch, China: Treatment for non-Covid illness denied; ensure access to medical care; stop child-parent separation; permit free speech. April 6, 2022.
- [4] Yue Qian, Yongai Jin, Yu Xie. Belief in science and attitudes toward Covid-19: a demographic standardization approach to China—US Comparison, 2020. China CDC Wkly 2021;3:645—9, http://dx.doi.org/10.46234/ccdcw2021.157.
- [5] Wang P. What do the Chinese think about their government's response to Covid-19? The Chicago Council on Global Affairs, March 26, 2021. https://www.thechicagocouncil.org/commentary-and-analysis/blogs/what-do-chinese-think-about-their-governments-response-covid-19.
- [6] Zhong B, Luo W, Li H, Zhang Q, Liu X, Li W, et al. Knowledge, attitudes, and practices towards Covid-19 among Chinese residents during the rapid rise period of the Covid-19 outbreak: a quick online cross-sectional survey. Int J Biol Sci 2020;16:1676–7, http://dx.doi.org/10.7150/ijbs.45587.
- [7] Song W, Sawafta F, Ebrahem B, Jebril M. Public attitude towards quarantine during the Covid-19 outbreak. Epidemiol Infection 2020;148:E220, http://dx.doi.org/10.1017/S0950268820002204.
- [8] Thomson S, Ip EC. Covid-19 emergency measures and the impending authoritarian pandemic. J Law Biosci 2020:7, http://dx.doi.org/10.1093/jlb/Isaa064. Accessed July 11, 2021.

[9] Gellert GA, Gellert GL. An ethical comparison of the Covid-19 national disease control performance of China, Canada and the U.S. in the first year of the pandemic. J Health Ethics 2021;17, http://dx.doi.org/10.18785/jhe.1701.04.

Received 10 May 2022; accepted 1st June 2022 Available online 15 June 2022

E-mail address: ggellert33@gmail.com

G.A. Gellert 703 Sentry Hill, San Antonio, Texas 78260, United States

https://doi.org/10.1016/j.jemep.2022.100808 2352-5525/© 2022 Elsevier Masson SAS. All rights reserved.