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# SARS in the hinterland : China's poor left behind

By Joshua Muldavin

**NEW YORK**— The spread of severe acute respiratory syndrome to China's hinterlands is a human-made disaster. The very economic boom now threatened by SARS is paradoxically what has allowed the virus to proliferate. China's economic reforms have brought the country's rural health care system to the brink of collapse.

The SARS epidemic is the result of a particular development strategy — one that has principally benefited a minority, while negatively affecting the poor majority. Since the early 1980s, China's economy has expanded at an extraordinary rate, bringing great material benefits to a growing middle class and a small wealthy elite. But at least half of China's 800 million peasants have had a much different experience.

Geographically, the economic boom has been very uneven, most of it concentrated in the southeast of the world's most populous nation and a few large cities elsewhere. Meanwhile, the reforms have undermined many positive gains of the Maoist period in social welfare.

Particularly hard hit have been small rural health clinics. Historically, they provided primary medical care and organized large-scale prevention campaigns against tuberculosis, leprosy, and other former scourges of the countryside.

While China's growing elite now has access to advanced health facilities, hundreds of millions of peasants no longer have even rudimentary health facilities. Funding for township and village clinics has declined, resulting in the closure of many, particularly in the country's poorest regions. Where health care is available, it is a "pay-as-you-go" system that is unaffordable for most people.

As a result, formerly controlled diseases have resurged. Tuberculosis cases, for instance, have quadrupled. And new challenges like AIDS have spread rapidly.

One British aid worker, an AIDS specialist, reports the complete collapse not only of health care, but also health monitoring. The prevalence of AIDS is a statistical black hole in rural China. True numbers are not hidden, they are impossible to gather, since the infrastructure to do so no longer exists.

It is into this void that SARS has emerged. China's leadership is responding by promising to repay

hospitals for admitting peasants without charging the usual \$250 fee (equivalent to a year's income in most rural areas). But this assumes that a rural hospital exists.

In China's 2,000 counties, each averaging half a million people, there is often just one county hospital providing advanced health care. Thus, the spread of SARS into rural hinterlands will hit already overstretched hospitals and limit access to urgent care for other maladies.

Beijing cannot make up 20 years of disinvestment in public health with quick allocations and one-time reimbursements. Providing adequate health care for China's poor majority requires long-term reinvestment in facilities, training of health care workers and rebuilding the health system in China's hundreds of thousands of villages. It requires active state participation well beyond anything currently envisioned.

Without such reprioritization of China's development policy, the human-produced tragedy of SARS will only be the latest in a growing series of fundamental challenges to the well-being of the Chinese people.

Beyond the dangers to health, the ill effects of the disease are many. Within China, fear of SARS has already intersected with politically inspired rural unrest linked to growing corruption and intensifying socioeconomic and environmental problems.

Recent violent clashes between peasants and the police highlight how SARS in China's hinterlands may amplify widespread rural discontent. The virus's spread has also damaged the economy and undermined the legitimacy of the governing Communist Party.

Many cite China as a success story of market transition. But the negative economic effects of SARS in Asia, and its direct human costs, should make us question the wisdom of our rapidly expanding global interdependence, as well as development models overly reliant on markets to provide needed social goods for the majority of the world's peoples.

By depending on the market to provide health care, the Chinese state may have made its most costly blunder yet, one for which we all may pay the price.

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