

The New Risk Perception Emerged on: An Analysis on Articles of SARS on the People Daily¹

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This paper analyzed the report frameworks on SARS² and described the process of transformation on risk perception of Chinese government. Articles on SARS were collected from November 2002 to 31th July 2003 by using the data of the People Daily (1946-2005) which was available on the internet. The writer analyzed 1408 reports on SARS and defined 4 report frameworks as *Safety, Be Able to Effectively Control, Crisis* and *Institutionalization of Emergency Management*. Then I investigated the governmental transformation of risk perception beyond the frameworks. Overcoming the crisis of SARS, a national emergency response plan system for natural disaster management was set up in China. Overcoming SARS is also a process that new emergency management emerged in China. The new emergency management is a result of change of governmental risk perception. This article called new emergency management that focus on the social safety.

In September 2008, dangerously high levels of the industrial chemical melamine in powdered baby milk, which is called “China Milk Scandal”, sparked worldwide safety concerns. Not only this, but also rumor on oranges caused serious lost to the fruit grower. The meat dumplings had seriously stroke on the image of Chinese food among Japanese customers. Recently, there are lots of crisis event took place in China. This article aims to point out relations between the frequent crisis and the increase of the socialized crisis. Socialized crisis means the crisis are reported as social problems and attracted social focus. Why are there more and more socialized crisis events?

Reviewing the reports of the People’s Daily on SARS, the article described the transformation of the emergency management concept of the administrative against SARS and pointed out the fact that Chinese government transferred from focusing on

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² SARS is short for Severe Acute Respiratory Syndrome.

emergency management on political security to social safety. Because of the new concept of emergency management emerged in China, crisis could be reported frequently by the media. SARS is the turning point of emergency management in China. The review and study on SARS event still has important realistic significance today.

The break out of SARS from March to July 2003 led to 8098 SARS infection in 26 countries, with 774 deaths (WHO 2004a:4). The cost to the economy has been estimated to be US\$ 30 billion in the Far East alone (Moria & Xu 2003). SARS broke out from China and spread to the other areas of the world, China always stayed in the center of the whirlpools.

At the beginning of the SARS, Chinese government was criticized by the world because of the nondisclosure of information. Crisis management became frequently used phrases by academy³ and media after SARS. Finally, SARS became the turning point of Chinese government's construction of Emergency system with *Yingjiyu'an* (emergency preplanning) mainly.

Analyzing the news reports on SARS of the People Daily, the article serially described the concept of *Emergency Management* in China and the transformation of the risk perception of SARS. The reason why new emergency management emerged is that the individuals request the government to expose administrative information properly and rapidly under new circumstances. With the globalization, SARS as the endemic disease spread in the world. The control of the disease is also depended on the global surveillance (Omi and Iue 2003). The SARS marked the *Globalization of Disasters* (Tanaka 2007). "Many disasters these days cut across international, national, regional or other formal governmental boundaries" (Quarantelli 2005:378). We need to study disasters beyond globalization. Also, globalization became the factor that could not be ignored in Chinese emergency management.

THE CONCEPT OF NEW EMERGENCY MANAGEMENT

The breaking out of SARS showed that Chinese society began to have the characteristic of risk society. Past research on SARS could be divided as the research on emergency management (Xue and Zhang and Zhong 2003), research on rumors (Zhou 2003; Du 2003), criticism on Chinese mechanism (Zhu 2003; Wang 2003), advocacy on the construction of social safety (Yang 2004), and research on transforming China beyond the risk society (Lulu Li 2004). According to Lulu Li's research, there are flowing

³ I run website searches and 790 articles were reached with "emergency management" used in the title. Though I can search articles from 1994, articles named with "emergency management" appeared from 2003 (<http://www.cnki.net/index.htm>, June 5, 2005).

resources appeared beside *Danwei* with the development of Chinese economy, and social control could not play well through the *Danwei*. With the diversity of interests and changing of society, China is facing more and more risks (Li 2004).

The overcoming of SARS, marked the appearance of *New Emergency Management* in China. Emergency management is a concept from military area which aims to comprehensively restrain the nuclear war. Today the concept spread to economic area and the natural disaster area, like the response against Petrolane Crisis and Monetary Crisis and serious earthquake(Sasaki 2004:1-2). In Japan, purpose of emergency management enlarged from maintaining of political security to social safety. In this article, the emergency management maintaining political safety is called *Emergency Management by far*, the one aims at social safety is called *New Emergency Management*. Although there was no concept of emergency management in China for a long time, the emergency management existed to maintain the stability of socialism regime and prevent the subversion attempt of socialism regime, i.e..The emergency management of maintaining political security existed all the time. With the development of economy, Chinese society encounters the social transformation period. There are more domestic problems and China involving more in globalization. Governance should be improved in order to suit the domestic changes and also the deepening issues caused by globalization. SARS broke out under such circumstances and became the turning point for emergency management in China.

After breaking out of SARS, the phrase of emergency management was frequently used, but there was no research starting from the analysis of expanded emergency management, i.e., social safety emergency management. It is not enough to point out that China was lack of emergency management (Tang 2003), when conclusion just came from the analysis of media reports. The unique point of view of this article is the using of media reporting framework. It starts from the analysis of the reports on SARS in People's Daily. Through the analysis, it reviews the changing of Chinese government's emergency management concept and the deepening transformation of risk perception.

THE BREAKING OUT AND CONTROL OF SARS

According to the tracing investigation of WHO, SARS started from mid November 2002 in Foshan City of Guangdong Province. The non-causal disease spread in Guangdong Province in February in the whole province.

On February 21, a Guangdong doctor who diagnosed and treated SARS patients stayed in a Hong Kong hotel. Guests of the hotel were infected and the disease spread to Vietnam and Toronto of Canada. At the same time, the disease is spread to inner China

through Hong Kong. On February 28, staff of WHO in Hanoi reported the disease to WHO. WHO recognized the disease as a new epidemic disease and launched the surveillance system. On March 4, the up mentioned doctor died in the hospital in Hong Kong. One 78 years old female guest who stayed in the same hotel died in a Toronto hospital. On March 7, Hong Kong doctors who treated the Guangdong doctor reported there was symptom like bird flu found. On March 10, similar symptom reported in the hospital in Hanoi, Viet Nam. On March 12, WHO issued a global alert and declared SARS as the threat toward world health on website on March 15. On March 16, 150 people were reported infected. By the end of March, the disease spread to 13 countries, including China, 1662 people infected with 58 deaths.

While SARS were spreading to the world in March, it spread in China at the same time and finally spread to Beijing. According to tracing report, one patient from Shanxi Province received treatment in Beijing on March 5. From then on, SARS infection in Beijing enlarged. On March 27, Beijing was listed as Affected Areas by WHO but relieved from the list on April 1. After April, SARS spread wider in North China. On April 2, WHO issued new travel advisory in Hong Kong and Guangdong Province. On April 3, Minister for Health of China declared on press conference that it was safe to live, work and travel in China. On April 4, a retired doctor sent the information about SARS that he knew to Hong Kong media and 4th Channel of CCTV through email. In the early morning of April 6, one official of ILO died in Beijing. On April 7, Ministry of Health issued “*Diagnoses Standard of Severe Acute Respiratory Syndromes (draft)*”. The Times published on April 8 quoted the letter of the retired doctor. Then Beijing took the place of Guangdong Province as the focal point of the world and widely criticized. From the dismissal of Beijing Mayor on April 26 to relieve of Travelling Limitation to Beijing by WHO, China began to fight against SARS with whole state power. After the April 26’s press conference, Ministry of Health began to publicize the number of SARS infections daily. The second day, April 22, the number leaped to 482. Government explained that the reason for such a number leap in one day was because hospitals in Beijing affiliated to Ministry of Health, Beijing Municipality and army, thus there was no integrated statistics. As SARS patient number leaped, hospitals and working places with lots of patients were isolated. As the way of SARS infection was not clear at that time, some kind of horror atmosphere spread in Beijing.

By May 5, the reported new infections were increasing 100 per day. After May 6, the number reduced to 50 per day and was reducing steadily. On June 8, Beijing Municipal government declared that the new infection is 0. On July 5, Taiwan was relieved from New Infection List of WHO. The SARS was controlled in the world.

Fig.1 mainly used the resources from WHO and also collected the SARS infection number publicly announced by People’s Daily. Figure 1 shows that from November 2002 to end of March 2003, infections increased with Guangdong as the center. After April, there was few infections in Guangdong, and the infections number leaped in Beijing after April 22. After May 22, the increasing is slowed down both in China and in the world. From the changing of infection numbers, the enlarging tendency of SARS infection could be speculated. It could also be found the increase of SARS in the world from the figure, which is also why China was criticized by the world during the spread of SARS.

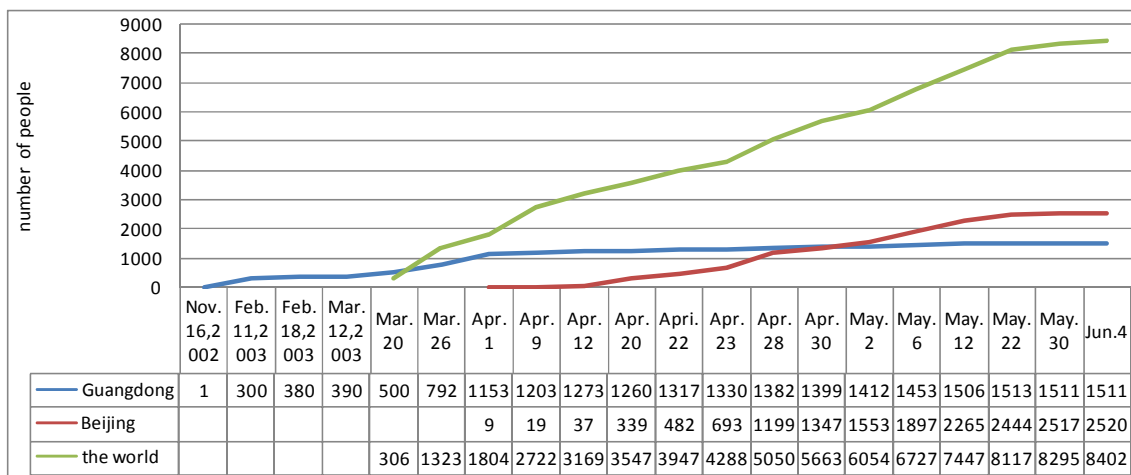


FIG.1- Changing of SARS infection numbers in different areas

RESOURCES AND METHOD OF RESEARCH

Method of Research

The article starts from People’s Daily reports and analyzes the reports about SARS. The report framework concept is used during the analysis. Report framework is the “explaining framework of an event” used by media to choose report objective from numerous events (Kawakita 2003:59). As People’s Daily is the official newspaper of the Communist Party of China, thus the report framework used by People’s Daily is the government (administrative) one. So the risk perception beyond emergency management analyzed here represents the governmental (administrative) emergency management.

In order to analyze the tendency of the reports on SARS, this article used the Searching System of the articles issued on People’s Daily website. The searching date starts from November 2002 to July 31, 2003. The time period covers the breaking out, spread and vanishing of SARS. Through the analysis of the reports searched, 4 report

frameworks as *Safety*, *Be Able to Effectively Control*, *Crisis* and *Institutionalization of Emergency Management* are acquired.

In China, SARS was called *Feidianxing Feiyan*, then abbreviated as *Feidian*. WHO named the disease as SARS, then the name of SARS⁴ began to appear in reports. After the search of *Feidianxing Feiyan*, *Feidian* and SARS, 1408 reports are reached. After reading the 1408 reports, comparing the contents of the reports, 4 report frameworks are acquired.

On the basis of topic search, key words were also searched. First, the report framework of *Safety* includes “do not be afraid”, “not to be panic” and “it is safe”. The *Be Able to Effectively Control* framework includes key words as “effective control”, “effective treatment”. *Crisis* framework includes “crisis” and “disaster”. The framework of *Institutionalization of Emergency Management* includes key words like “public health accidents + emergency responding” and “preplanning”.

After searching the key words, reports are verified as follows: first, reports with key words in the topic are put in priority. Second, if there are publicizing words like “ode to heroes”, the article will be deleted from the list. Third, if there are two or more than two key words in one report, the priority of the report will be confirmed according to the position of the key word, whether they are in the topic or in first paragraph. The statistic results of the reports show as Fig.2.

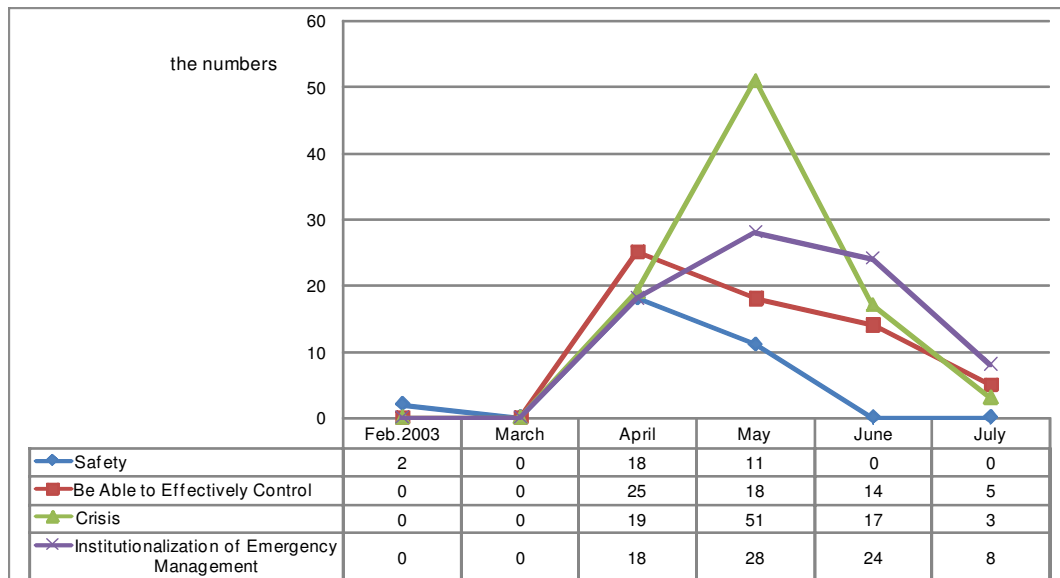


FIG.2- Changing of reports numbers under different report frameworks

⁴ *Feidianxing Feiyan*, *Feidian* and *SARS* were used in different period on the People Daily. *Feidianxing Feiyan* used from Feb.12, 2003, *Feidian* used from Apr. 10. and *SARS* from May7. This article described these as SARS.

Process of Report Frameworks

If we count the reports numbers temporally, there were 5 reports in February 2003, 1 in March. The number proliferated to 289 in April and 719 in May. The number change to 292 in June, just similar as April and 102 in July.

The process figure of SARS reports shows in Fig.2. In February 2003, *Safety* framework is dominant. In April, when numbers of reports increased, reports in 4 frameworks all increased, while framework of *Be Able to Effectively Control* peaked in April and surpassed by *Crisis* and *Institutionalization of Emergency Management* framework in May. The *Crisis* framework peaked in May. Though the absolute number of reports in *Institutionalization of Emergency Management* framework decreased in June, the decreasing of *Crisis* and other frameworks decreased rapidly. Thus *Institutionalization of Emergency Management* framework became comparatively prominent. *Institutionalization of Emergency Management* framework is prominent in July for the same reason. We can say that the *Institutionalization of Emergency Management* framework was fixed after June.

The following part describes the changing of different frameworks temporally.

ANALYSIS OF REPORTING FRAMEWORKS

Safety

There was report about SARS on People's Daily since February 2003. In the 5 reports in February, the main content is about "no need to be panic". In order to convey the information of "no need to be panic", the reports described the SARS factors like disease character, direct close contact infection and predicted the epidemic of the disease in the future.

"In recent time, some SARS cases with hyperpyrexia, dry cough, leucocytes hang down regular or slanting, the lung X line has piece infiltrating nature shadow as main clinical characteristic took place in part area of Guangdong Province consecutively. By February 9, altogether 305 examples, with 5 deaths took place in Guangdong Province.The disease turn to have certain infectivity, may be infected through direct close contact. However, it is unnecessary to be panic with proper precautions against that. There may be small-scale prevalence of infectious diseases of respiratory tract in some areas according to the prediction of experts (February 12, 2003). Of personal protective measures advocated are "go less to crowded public places; when in contact with the patient should pay attention to personal protective.....Maintain personal hygiene" (February 17).

These reports introduced the number of patients in Guangdong during SARS and put

forward the suggestion “pay attention to personal protection”, then reach to conclusion of safety without mention of the pathogenesis of SARS. The reason of such safety conclusion is to ensure political stability

In order to ensure political stability, SARS virus pathogens are reported Chlamydia in February 19 reports. After that, the People's Daily reports focused on China's political activities, especially in March only one report was about SARS. When searching People's Daily in February and March 2003, the key words “two conferences” (i.e. National People’s Congress and National People’s Political Consultative Conference) is very eye-catching. When searching the key words “two conferences”, 175 reports were reached. The “two sessions” were held from February 17 to March 24. The topic like “go all out to ensure the two conferences service” showed that the focus of Beijing Municipality is to ensure the success of the convening of the two conferences. The supplementary explanations required here is new national leaders were elected at the National People's Congress in 2003. To consider from China’s political system, the period before the election of new leaders is a political blank period. *Safety* is because SARS is a local problem and has low probability to spread nationwide and there is enough measures to deal with the crisis. So far the Chinese government approach to dealing with crisis is to ensure political stability. Information are not exposed to public until the problem is basically solved. This time the measure is also in accordance to the fundamental practice to date.

However, because of taking non-public information practices so far, China has been criticized by the foreign media. From March, even though SARS spread rapidly around the world, there were few People's Daily reports about SARS. The small number of reports is because the Government made the judge of *safety* and did not release information. For the early response to SARS, the Chinese government and individuals did not have risk judgment⁵. In the “Guangdong actively prevent and treat [SARS]”⁶ report, which concluded that “business tourism activities to Guangdong are safe” (April 9). The Austrian Chamber of Commerce in Shanghai said, “We all believe that China and Shanghai is safe” (April 10). As mentioned above, the judgment of “being safe” continued until early April. *Safety* report framework shows that at this time the Government did not acknowledge the crisis situation.

⁵ Past research on discussions of one BBS showed that there were two peaks focused on SARS. One was February 11 and the other was the end of March. Until April 10, people discussed more on Iraq war and the suicidal star ZhangGuorong (Sun 2004).

⁶ [] means quote characters is changed into SARS by the writer. It is the same below.

Be Able to Effectively Control

Early in April, the phrase *Be Able to Effectively Control* began to appear. The representative example of this report framework is “Minister of Health Answers Journalists’ Questions” (April 3). From then on, reporting framework shift from the *Safety* to *Be Able to Effectively Control*.

In April, reports of SARS surged. At this stage, there were lots of reports relevant to the administration. Searching the key words composed *Be Able to Effectively Control* reporting framework, topics like “Wen Jiabao Chaired State Council Executive Meeting” (April 3), “Ministry of Health Has Effective Cooperation with WHO” (April 3), “State Council Information Office held Press Conference, Minister of Health Answer Journalists’ Question” (April 5) and “The Chinese Government Fully Capable of Controlling [SARS]” (April 7) could be acquired. Since then, the administrative responsibility of dealing with SARS became clear. From April 3 to 5, Minister of Health continuous spoke about the emergence of SARS at the press conference, pointed out that the transmission channels was “direct close respiratory droplets spread. The disease can be prevented and cured, the overwhelming majority of patients have recovered and been discharged”. Experience from Guangdong Province showed us, “the number of incidence is now significantly reduced, the number of cured has a significant increase and the number of deaths is decreased”. Minister of Health emphasized that “the epidemic is under control”. The Government admitted further study in searching the “confirmed” cause in February (April 5). Then the Government more clearly defined that “the party and the government has always put the protection of people's health and life safety as a top priority”. The report declared that “the Ministry of Health will regularly expose epidemic to the public and through a variety of ways to introduce the masses control measures and disease prevention knowledge”, also strengthen cooperation with WHO (April 7).

At this stage, WHO played its role behind the *Be Able to Effectively Control* report framework. On April 2, WHO issued travel advisory for Hong Kong and Guangdong Province. WHO's website showed that the day when the Minister of Health frequently showed on television (April 3) is also a start date when WHO experts began their work in Guangdong Province.

Be Able to Effectively Control lied in Guangdong Province’s treatment achievements and there were no new patients appear in Guangdong. As shown in Fig.1, in April, especially after April 9, the sharp increasing number of infections in Guangdong Province level off. Accordingly, the transmission in Guangdong Province was considered calmed down and SARS *are able effectively controlled*. Moreover, in order to fight

against the foreign media's criticism, situation in Guangdong and Shanghai were reported. Although treatment and dissemination situation in Guangdong was reported and conveyed proper information, the situation in the country was not open to the public. Chinese government was accused by abroad of concealing information. On April 10, the WHO expert team in Beijing reported to the WHO that Beijing's health authorities are busy with the analysis of rumors.

The death of ILO officials in Beijing on April 6 brought tremendous changes to the report framework. The death of ILO “continued to cause considerable anxiety, particularly at embassies and among staff of international organizations” (April 8, 2003, WHO HP). On April 10, WHO expressed to Chinese government their worry towards Beijing’s systems of case reporting.

On April 12, Beijing was once again listed in WHO's “Affected Areas”. Such title as “Beijing Launches Epidemic Control Measures to Prevent [SARS]” showed the administration began a comprehensive response to SARS in mid-April. Although in the *Be Able to Effectively Control* phase, reports about Guangdong are true, because of the information nondisclosure, the authority could not fully grasp the overall spread information of SARS. On the one hand, the authority emphasized to abroad that “SARS can be effectively controlled”, on the other hand, it could not take full advantage of the spread situation of SARS in China. At this time, the administration had optimistic perception of risk and thought that the crisis was still in controlled range. Based on the risk perception, framework of *Be able to Effectively Control* became the SARS reporting framework of this period.

Crisis

With the debut of *crisis* reporting framework, the authority also began to implement a series of response measures.

First of all, administration admitted “lack of understanding on [its] infectious catachrestic” during early happening of SARS (April 20). April 20 press conference was an important turning point in admitting the crisis. At the press conference, the Ministry of Health admitted SARS as a crisis, “the Ministry of Health has inadequate preparation to deal with public health emergencies” and specifically defined the responsibility of spread of SARS. Concerning of the number of patients information open questions blamed by the abroad, it was explained that because “hospitals in Beijing belong to different systems” and “lack of collaboration among hospitals..... resources could not be integrated effectively. At present, patients treated scattered in more than 70 hospitals, Beijing Municipality does not have comprehensive and accurate

statistics". It was announced at the press conference that "after a period of time, there will be a lot of changes on the work of combating the epidemic in Beijing" (April 21).

The symbol of *Crisis* was the dismissal of Minister of Health and Mayor of Beijing on April 20 (April 21). Through the dismissal of the two officials, the government acknowledged that the *crisis* existed. Since then, the *crisis* reporting framework emerged to deal with SARS became the Government's top priority issue.

Concerning of the administrative policy, the Government issued a series of "urgent notice" to strictly control materials and people mobility. Besides administration, the National People's Congress (April 26) and the National People's Political Consultative Conference (April 26) were requested for co-operation, Departments of public security were requested to exert functions of isolation (April 27). In order to overcome the information confusion, the Government "strengthens guidance toward the epidemic prevention work in all regions", sent inspectors Group to serious infected areas (April 19). Sending steering groups ensured the transmission of information and report integration between central and local governments.

Concerning the measures of treatment, apart from quarantine measures taken by administration and the concentration of treatment in designated hospitals, the largest responses was a temporary hospital of infectious diseases - Xiaotangshan hospital built on May 1 and 1200 military medical mobilized through China. In-hospital infection was avoided in Beijing through the concentrated treatment.

In addition to the above administrative measures, in order to ensure the information conveying, relevant information was released every day through the media. Newspapers published the latest information about SARS every day, as well as statistics on the number of infected patients and so on. "The central finance allocated two billion RMB to establish [SARS] Prevention Fund mainly used for treatment of [SARS] patients. For rural residents (including farmer workers in cities) and those urban [SARS] patients (such as students, people live in difficulties in cities and towns who are not insured, etc.) who did not take part in the medical security system should be promptly admitted to hospital" (April 24). In addition, the Prime Minister visited Universities, working sites, especially construction sites the migrant workers on and expressed the willing hoped that they could understand the measures taken by the Government to deal with SARS. The Prime Minister also requested the construction company that "if the physical symptoms showed, it is necessary to immediately take measures for medical treatment and treatment costs for migrant workers should be borne by companies". He stressed that "the patients or the suspected patients should not be thrown back to their origin or the society" (April 27). The reason why Prime

Minister inspected construction sites and universities was that he worried once college students and migrant workers went home, SARS would be further proliferated. College students and migrant workers were not belong to *DanWei* and were not bound by the existing social control system. For the migrant workers, home meant security feeling toward them, thus a lot of people choose to go home. In Shanxi Province, 35% new patients were migrant workers (May 14).

Comparing with the stage of *Safety* and *Be Able to Effectively Control*, residents in Beijing rushed to panic buying of lively goods on April 24 and 25 because of the sudden switch to the *Crisis* reporting framework. According to the survey, about 50% of residents in Beijing gave out the answer “feel nervous” around April 20 (Yu 2003:114). In the survey on May 1-4, it was showed that comparing with residents in Beijing and Guangdong, residents in other places far away from SARS epidemic area felt much more nervous⁷ (Min 2003).

Psychological hotlines were opened during this period. There were not only hotlines geared to the needs of citizens, but also hotlines for physicians (April 30). In order to disseminate knowledge about SARS to the public, a same hotline phone number was set up in 25 provinces (May 15). According to the statistics from hotline cooperatively set up by Beijing Municipal Health Bureau and the psychiatric hospitals, “since opening of the hotline on April 26, there are more than 1500 consultative calls received in 10 days”; hotline set up by Beijing Psychological Counseling Association “received more than 4000 calls in 10 days”. At the initial stage of the hotlines opened, consultation focused on basic knowledge of SARS, 4 or 5 days later psychological counseling increased (May 17). Setting up of counseling hotlines is a new response solution of disasters. The solution of psychological anxiety SARS brought about had also become an aspect of crisis response.

In order to fundamentally solve the SARS crisis, the state began to input funding for research, as the phrase scientific and technological work should shift from “short-term emergency to the medium and long term scientific research and capacity-building up of public health research” (May 30) has pointed out, by end of May, when there was few increase of new patients, reporting framework began to move gradually from *Crisis* towards the *Institutionalization of Emergency Management*.

⁷ Nanking University carried out surveys on residents in Beijing ,Guangzhou, Shanghai Nanjing and Chongqing from May 1 to May 4, 2003 by telephone Analysis showed that residents far away from epidemic area felt much more nervous to SARS. For examples, 85.5% residents in Nanjing felt nervous. Meanwhile 60.7% residents in Beijing and 54% residents in Guangzhou felt nervous .(Min 2003:127-128)

Institutionalization of Emergency Management

Crisis was recognized and a series of mitigation measures are introduced. At the same time, the trend of *Institutionalization of Emergency Management* appeared. The so said *Institutionalization of Emergency Management* here means, by summing up the emergency response to SARS, the system of epidemic prevention should be re-examined from the angles of laws and regulations, as well as the development and improving of organizations dealing with this issue. The following from the People's Daily reports collated initiatives regarding *Institutionalization of Emergency Management*".

The recognition of "establishing and improving the emergency responding mechanism of public health" (April 7) existed during the reporting framework stage of *Be Able to Effectively Control*. The first step is "the Ministry of Finance has arranged special funds of 310 million RMB for the first phase of the construction of emergency response mechanisms" (April 24). Then "[SARS] will be listed as statutory infectious diseases in our country and managed in accordance with law" (April 27). Then "Public Health Emergency Ordinance" was promulgated (May 13). Bills summed up the work to deal with SARS, the message system preparedness, strengthening of public health incident command system and emergency supplies, and personnel reserve issues. Subsequently a series of measures for "national disease prevention and control system" were proposed, CDCs (Centers for Disease Control and Prevention) should be set up from state to county level, "accurate and timely information delivery network" should be established, "The medical treatment system should be improved", "A well-equipped, highly skilled and flexible medical groups should be set up at the provincial level" (May 31). By the end of June, when SARS was controlled to a certain scale, "the Standing Committee of NPC put forward advices and suggestions on the [SARS] prevention and treatment, the State Council studied and implemented promptly the recommendations and submitted a written report" (June 29).

Institutionalization of Emergency Management reporting framework could be further confirmed in July when SARS was vanishing. When Singapore laboratory infection took place in September 2003, "Beijing sets up three levels for anti-[SARS] early-warning" (September 12). At the SARS spreading area, Guangdong Province, "[SARS] Prevention Plans of Guangdong Province" and "[SARS] Observing and Implementation Plan" were formulated when SARS was vanishing. Especially in Guangzhou City, six sentinel observation hospitals were designated for observing the prevalence of influenza in Guangdong Province. In addition, the Health Department of Guangdong Province implemented a 440,000 physician training on SARS treatment by the end of July 2003 (September 14). By "November 6, 2003, Guangdong Province

officially announced [SARS] Contingency Plan” (March 20, 2004). Apart from the center Infection region as Beijing and Guangdong, the provincial governments began to make local contingency plans according to “Public Health Emergency Ordinance”.

As mentioned above, through the review of *Institutionalization of Emergency Management*, the risk perception of the Government (Administration) changed like following: from denying the existence of crisis in the society, to admit the existence of crisis in the society, and finally rose to the institutionalization of emergency management. The changing of Government (Administration) emergency management were in accordance with the perception of the risks. Behind the *Institutionalization of Emergency Management* was the government's risk perception shifted from the “uncontrollable crisis” to the “crisis exists all the time and can be managed”. The happening of SARS has changed the Government (Administration) perception of the crisis. Institutionalization of Emergency Management started firstly from institutionalization of vaccination and gradually expanded to the entire range of disaster emergency management including natural disasters. Landmark laws and regulations of institutionalized emergency management includes “National Public Health Emergency Contingency Plan” (2006) and “Emergency Law of the People's Republic of China” (2007) and so on. After SARS, construction of China's domestic emergency management system speeded up.

CONCLUSIONS

Tracing the People's Daily reports on the SARS, the paper found out that the reporting frameworks of the People's Daily changed from *Safety to Be Able to Effectively Control, Crisis* and *Institutionalization of Emergency Management*. Even though the frameworks has some duplicated period, it can be confirmed that Government (Administration) perception of SARS changed with the changing of People's Daily's reporting frameworks. Government (Administration) risk perception transformed from “deny the crisis” to “the crisis can be controlled” until “acknowledge the crisis” and finally accepted “crisis exists all the time and can be managed.” When admitting the crisis, the Government (Administration) acted. The above analysis is shown in table 1.

Before SARS expanded to Beijing, the crisis was not acknowledged. The authority judged situation at that time to be safe. In official response towards SARS, Beijing is a key factor. “Beijing” in China not only has the significance of space, but also political significance. Beijing is China's political center, spreading of SARS in Beijing finally led to a series of emergency measures.

TABLE 1

Relationship between risk perception and infection of SARS

Frameworks	Period	infection situation	representative event	risk perception
<i>Safety</i>	November 2002 to the end of March 2003	occurred in Guangdong Province	Chlamydia virus was declared	deny the crisis
<i>Be Able to Effectively Control</i>	To mid-April 2003	spread from Hong Kong to Beijing and cut across the world	WHO's experts team started to work in Guangdong	the crisis can be controlled
<i>Crisis</i>	From April 20 to the end of May, 2003	increased infection in Beijing and North China	Health Minister and Beijing Mayor's dismissal	acknowledge the crisis
<i>Institutionalization of Emergency Management</i>	After June 2003	trend of infection spread controlled	implementation of "Public Health Emergency Ordinance"	crisis exists all the time and can be managed

When SARS occurred, by the end of March 2003, in order to reduce the political shake, the People's Daily needed *Safety* reporting framework. Under the inertia in so far emergency management that focused on political stability, the crisis was not immediately recognized even when SARS expanded to Beijing. The crisis was acknowledged after a short-term of *Be able to Effectively Control* reporting framework. The symbolic case for shifting from the framework of *Be able to Effectively Control* to the *Crisis* reporting framework is the dismissal Health Minister and Beijing mayor on April 20. The two facts, death of ILO official in Beijing on April 6 and Beijing being listed as infected region by WHO once again on April 12, can't be neglected. The control of information about SARS was no longer purely domestic problem. WHO and other global factors became elements that can't be ignored in solving domestic issues. If look at the SARS transmission process, when SARS spread in Beijing and North China in April, administration required this *Crisis* reporting framework. Enacting of "Public Health Emergency Ordinance" and other series of laws and regulations signed *Institutionalization of Emergency Management*. The *Institutionalization of Emergency Management framework* was constructed on the basis of the understanding that crisis

exists all the time and can be managed.

Through this investigation on dealing with SARS, the Chinese way to deal with crisis so far could not control the spread of SARS infection, thus new reporting framework of the crisis appeared. This paper traced the changes in the People's Daily reporting frameworks and defined that different reporting frameworks were set up at different understanding basis.

The debut process of new emergency management in China is the process from emergency management focusing on political security to social safety. Debut of emergency management focusing on social safety means that there are problems could not be solved by Government (Administration) alone. With social changes, China needs to face "social management of society" issue currently.

Post-SARS, China's emergency management changed from simply response to public health cases to the development of comprehensive with *Yingjiyu'an* (preplanning) centrally. And its response to disasters extended from infectious disease to natural disasters, public security and other fields.

Through the review on the response on SARS, we can confirm that SARS was acknowledged as crisis is a gradual process of trial. Emergency management system construction with *Yingjiyu'an* centrally is not achieved overnight. Although post-SARS the emergency management has speeded up, China's emergency management is still in a process of being proved.

The cases of the various crises, including the milk powder case and poisonous dumpling case, had cut across national boundaries. If these crises are not dealt with timely, the brand's image of "Made in China" would be hit seriously in the world. Despite the improvement of the "delay management" in SARS crisis, currently the Government emergency management proved, but there is still room for improvement. In addition to the strengthening of future administrative emergency management building, in order to solve the "social management of society" issues, other sectors should also be involved in emergency management. These topics will be further explored in other papers.

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