Fighting the Epidemic for One Year
Consolidating Our Experience

On January 25 last year, the first day of the Chinese New Year, after returning to Hong Kong from the World Economic Forum in Davos, Switzerland, I immediately started to lead the work against the COVID-19 epidemic. In what seems like the blink of an eye, a year has passed. The COVID-19 epidemic continues its global rampage, with confirmed cases approaching 100 million and the death toll exceeding 2 million. Economies around the world have been hard-hit. Everyone hopes that the vaccines can be widely applied as soon as possible so that we can start to emerge from this predicament. Compared with the Mainland, Macao and Taiwan, epidemic control in Hong Kong has fallen short of expectations. However, from an international perspective, we have managed to keep the epidemic in check. As of midnight on January 26, the number of confirmed cases in Hong Kong was 10,223, which is less than some 130 other countries or regions; the number of cases per million people was 1,360, or about one-tenth of the global average of 12,740; in terms of testing volume, the number of tests conducted per million people was 901,940, which ranks among the top in the world.

Nevertheless, the volatile epidemic situation over the past year, as well as stringent border control measures to guard against imported cases and social distancing measures to prevent the spread of the virus in the community, have led Hong Kong’s tourism and hospitality sectors into an ice age. Many industries have been hard-hit and the unemployment rate has continued to rise. Therefore, the most important task of the Government at present is to suppress the epidemic so that our people can resume a normal life and our economy can return to an upward trend.
How the epidemic has developed

For the latest wave of the epidemic that began in late November, following the implementation of various anti-epidemic measures, the number of confirmed cases had been declining slowly from its peak in mid-December, with the seven-day average number of daily cases dropping to less than 40 by early January. However, infection clusters that emerged later on led to a spread of the virus in densely populated old districts, causing a rebound in the number of confirmed cases. On January 18, for the first time in a month, the number of cases again exceeded 100 in a single day. In recent days, the number of daily cases has been hovering at high double digits.

![7-Day Moving Average of Number of Confirmed Cases](image)

Analysed by district, Yau Tsim Mong has the largest number of confirmed cases, with this single district accounting for more than one-third of all cases in Hong Kong. Apart from the cluster of cases, the dense population and large number of old buildings and sub-divided units are believed to have caused of the spread of the virus in the district. Moreover, as we have strengthened compulsory testing efforts, more cases (especially infected persons with no symptoms) have been identified, resulting in a further increase in cases.
Anti-epidemic efforts

Because of the rebound of the epidemic, we cannot allow any error in our anti-epidemic work. The Government has already put in place the most stringent measures yet to tackle the current wave. We have stepped up testing efforts, including exercising statutory powers to mandate citizens to undergo testing. For any building in Hong Kong, if two unrelated confirmed cases are found, residents of the entire building, or those who had been present at the building for more than two hours in the past 14 days, would be required to undergo compulsory testing. For buildings within the higher-risk “specified areas”, the threshold for compulsory testing has been lowered from two cases to one. Closed community compulsory testing has been also carried out in “restricted areas” with even higher risks. Together with other kinds of testing on a mandatory, obligatory and voluntary basis, the number of tests arranged by the Government since November 15 has exceeded 3.1 million, which is 85% of the total number of tests over the preceding 10 months.

Preparing for vaccination at full steam

Vaccination remains the world’s greatest hope to help contain the epidemic. Over the past month, the HKSAR Government has been working at full steam to prepare our vaccination programme. Our goal is to arrange vaccination for the public as soon as possible according to priority groups and upon approval of vaccines for use and their arrival in Hong Kong. The Department of Health (DH) has been liaising closely with the three vaccine suppliers with which we have signed advance purchase agreements to follow up on data provision and to strive for the early supply of vaccines to Hong Kong. Meanwhile, we continue to approach a fourth vaccine supplier based on the strategy recommended by experts in the hope of purchasing a fourth type of vaccine developed from a different technology platform. Apart from this, the Central Government has earlier said that it will support Hong Kong in ensuring the supply of COVID-19 vaccines. Where necessary, it will reserve a certain number of vaccines developed or
manufactured in the Mainland for use by Hong Kong citizens. I have already made a request to the Central Government in this regard.

Consolidating Experience

COVID-19 is a new virus that we still do not know much about. In the beginning, the anti-epidemic facilities and supplies in Hong Kong were inadequate, the social unrest had not completely ended and there were street violence, political smears, false news etc. All this made the fight against the virus extremely difficult. However, with the all-out efforts of anti-epidemic personnel and the co-operation of residents, Hong Kong has successfully overcome wave after wave of the epidemic, and achieved zero local infections on many days. All that time, we have never used the extreme measures seen elsewhere such as a city-wide lockdown or curfew. Our society has maintained a certain degree of operation, and our public healthcare system has not collapsed due to overload. Looking at the global situation, these anti-epidemic results are by no means guaranteed, or due to chance.

Over the past year, Hong Kong’s anti-epidemic strategy has covered the following eight major areas:

(I) Acting in accordance with the law

A public health crisis is a matter of life and death and time is of the essence, yet the HKSAR is a society that believes deeply in the rule of law, and all measures adopted by the Government must have a solid legal foundation. As such, the HKSAR Government has invoked the Prevention and Control of Disease Ordinance (Cap 599 of the Laws of Hong Kong) to introduce ten specific regulations at different times to regulate the operation of premises, entry into Hong Kong, provision of personal information, mask wearing, group gathering, virus tests, the use of vaccines etc, and amended the regulations as needed. We will not hesitate to use our statutory powers to implement anti-epidemic measures and will continue to take law enforcement actions against offenders.
(II) Professional leadership

Apart from colleagues of the Centre for Health Protection (CHP) of the DH, I, on the first day of taking up the reins of anti-epidemic efforts, appointed four experts – Professor Gabriel Leung, Professor Yuen Kwok-yung, Professor David Hui and Professor Keiji Fukuda – to form an expert advisory group to advise the HKSAR Government. We have been paying regular attention to the advice of the World Health Organization to different places and maintaining communication and co-operation with the National Health Commission as well as various provinces and cities on joint prevention and control of COVID-19. Experts of the two places had also met to exchange views. In light of the emergence of COVID-19 vaccines, we have consulted the Scientific Committees under the DH on vaccine procurement. We also recently made appointments to the Advisory Panel on COVID-19 Vaccines and the Expert Committee on Clinical Events Assessment Following COVID-19 Immunisation, which will provide advice on the efficacy and safety of individual vaccines, and perform continuous monitoring of possible adverse effects following administration of the vaccines respectively. When planning the vaccination programme, we have invited two former heads of the CHP to join. Some have criticised me for excessively heeding the advice of experts. Nevertheless, public health is a subject about theory and practice, and the fight against the virus should be based on science.

(III) Facilities and accessories

Hong Kong has always relied on imports of anti-epidemic supplies, as there is almost no local production. However, when the Mainland, the world’s (and also Hong Kong’s) largest supplier of such goods, was also facing a shortage of supplies, there emerged tremendous difficulties with local supply. To this end, in the early period of the epidemic, we took the enhancement of our capability and facilities as an integral part of our work. This included subsidising local research and
development and production of face masks, face shields and other personal protective equipment, constructing more temporary quarantine centres, and converting AsiaWorld-Expo into community treatment facilities and dedicated quarantine facility for the elderly of residential care home. With the support of the Central Government, we have an additional 950 beds in the community treatment facilities at AsiaWorld-Expo and a brand new North Lantau Hospital Hong Kong Infection Control Centre nearby, which can accommodate about 820 negative pressure beds when opened, which provides our medical system with sufficient capability to fight the epidemic.

(IV) Application of technology

The current-term HKSAR Government has been keen to develop innovation and technology and has set up research and development teams and social networks, enabling it to respond to emergency situation in no time. In the current fight against the epidemic, items widely used include the electronic wristbands for monitoring persons under quarantine and the “StayHomeSafe” app; the “LeaveHomeSafe” QR code and app for assisting in tracing close contacts of confirmed cases; the “Local Situation Dashboard” to keep the public abreast of the latest information on cases; the CuMask+™ that can be reused dozens of times and were provided for free to the public; the reagent for rapid tests and the building sewage testing technology that help detect confirmed cases. With a view to helping businesses continue to operate amid the epidemic, the Government has allocated $1.9 billion to roll out the “Distance Business Programme” to subsidise businesses to adopt solutions such as cyber security, electronic payment and online conferencing, and subsidise merchants of small businesses to switch to electronic payment systems. The construction of the North Lantau Hospital Hong Kong Infection Control Centre used modular integrated construction technology which drastically shortened the construction time.
(V) Information transparency

When anti-epidemic work started, I instructed that it be carried out with the greatest transparency. The latest and accurate information on the epidemic situation should be conveyed to the public quickly and effectively. Since the beginning of the anti-epidemic work, press conferences hosted daily at 4:30 p.m. by the CHP and the Hospital Authority and those held by me and the Secretaries of Department and Directors of Bureau have totaled 550. The Information Services Department has issued over 3,000 press releases and about 5,000 posts on various social media platforms. I have also provided bi-lingual reports on the Government anti-epidemic work. Including this one, I have provided 12 such reports over the past year.

(VI) Precise Testing

As the World Health Organization has reiterated, virus tests are the key to anti-epidemic efforts prior to the availability and extensive use of effective vaccines. As a matter of fact, the testing capability of the HKSAR Government was a serious bottleneck in the anti-epidemic work. At the beginning, our testing capability amounted to only several thousands tests per day from the DH and the Hospital Authority plus the limited service of private laboratories. With the introduction of major laboratories of the Mainland under the support of the Central Government, and through the effort of various parties, current testing capacities have been increased to approximately 100,000 tests per day (without sample pooling). However, to give full play to our testing capability, we have a lot of work to do in respect of specimen collection, transportation and logistics, and timely release of testing results. With the staunch support of the Central Government, the 14-day Universal Community Testing Programme was launched in September last year and over 1,700,000 members of the public took the test. Currently, our three-pronged approach to enhance testing includes:-
(1) Testing on a compulsory basis: Specified persons are required under the law to complete tests within a specified time. This has covered over 500 premises/buildings visited by persons who are confirmed cases/where persons who are confirmed cases live or the sewage of which tested positive, persons with symptoms in seeking medical treatment, staff of homes for the elderly, hostels for the disabled and nursing homes, as well as taxi drivers. In this connection, the Government has set up 19 community testing centers in various districts. In response to the recent epidemic situation, we have substantially increased the issue of compulsory testing notices to buildings and imposed closed community compulsory testing on two “restricted areas” in Jordan and Yau Ma Tei.

(2) Testing on an obligatory basis: Over the past few months, the relevant Government departments have been providing free testing services for high-exposure groups (such as public transport drivers and stall operators in markets) and staff of critical infrastructure and services (such as slaughterhouse workers and designated frontline container terminal employees). More than 1.3 million specimens have been tested. Such testing schemes will be further enhanced; and

(3) Testing on a voluntary basis: As with the Universal Community Testing Programme, some members of the public wish to take tests for ease of mind, even though they are asymptomatic or do not belong to the target groups. The HKSAR Government has now provided specimen collection packs in 47 general out-patient clinics, 121 post offices and 20 major MTR stations to meet public needs as far as possible.
(VII) Bold adjustment to social distancing measures

Reducing the flow of people and social contact is an effective way to prevent the spread of disease. Some countries and regions have taken stringent measures such as a complete city lockdown and stay-at-home orders. Having regard to Hong Kong’s social situation and to maintain normal operation as an international financial centre, the HKSAR Government has not yet adopted these stringent measures. Instead, we have taken into account the epidemic development to adjust the measures so that commercial activities, social activities, work and school classes can be maintained to a certain extent. Since the outbreak of the latest wave of epidemic in late November 2020, the Government has raised all social distancing measures to the strictest level.

(VIII) Prevention of imported cases by plugging all loopholes

To prevent the importation of cases and plug all loopholes, the HKSAR Government has tightened the relevant measures, such as putting inbound travellers arriving in Hong Kong from countries outside China under “closed-loop management”, and requiring them to take designated transportation to the designated hotels for quarantine after testing negative. Recently, we have also decided to further tighten the testing and isolation arrangement for people such as crew members of aircraft in order to minimise the chance of virus transmission from imported cases into the community.

On anti-epidemic work, there is always room for improvement. While efforts made should not be dismissed, we will accept criticism with humility and sincerity, learn from experience and look for ways to improve. Though determined and diligent in the fight against the epidemic, we have no alternative but to consider the situation in Hong Kong and the feasibility of various measures. We totally understand the hardship faced by commercial premises under mandatory closure or restricted business operations, the effect on student mental health
with the lack of face-to-face classes, the worries of children for not being able to visit their parents living in residential care homes, and the disappointment of the public avoiding gatherings with families and friends. However, as we are combating an unprecedented global pandemic, we seek your endurance and ongoing concerted efforts to overcome this challenge. Let us continue the anti-epidemic work in a proactive manner and with unwavering confidence.

Mrs Carrie Lam
Chief Executive
Hong Kong Special Administrative Region
27 January 2021