

2020 Wuhan COVID-19 Lockdown Oral Histories

Shaw Interview

April 28, 2021

Virtual Meeting

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Shaw Interview

ROBERT BROWNING: Okay, we'll begin here. My name is Robert Browning working in conjunction with the Reuther Library at Wayne State University. Today's date is April 28, 2021. This interview is with Shaw, which is a pseudonym about his experience of living through the COVID lockdown in Wuhan, China in early 2020. At the moment, Shaw is located in Bangladesh. This interview is being recorded remotely and will be housed at the Reuther Library, which is part of Wayne State University.

The Reuther Library will keep administrative information about this oral history project, such as interview releases and deeds of gift in its case files. [00:00:57] Case files are in a locked, non-public area of the building accessible only to the Reuther Library staff. In the event of a criminal investigation or legal discovery proceedings, the Reuther Library will be compelled to turn over holdings in case files that are otherwise closed to the public, including the case files for this oral history project.

All right, Shaw, so the first question I ask is, are you associated with Wayne State University in any way?

SHAW: I'm not associated [with Wayne State]. Actually, I am associated with no organizations.

BROWNING: Okay, are you originally from Wuhan?

SHAW: Yes, I was born there and I have lived there for more than thirty years.

BROWNING: Which district in Wuhan are you located? [00:01:57]

SHAW: Well, I am currently located in Hankou, Qiaokou District, but one year ago I was located in Hongshan District.

BROWNING: Okay, and what do you do for a living?

SHAW: Well, I used to be an English teacher, but right now I am a translator and interpreter.

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BROWNING: Okay, so going back to the time before the Coronavirus started, or even before the lockdown began, what were you doing before that?

SHAW: Okay, if you want to go back, then I can put the clock back to the the end of October when I just finished my service in the CISM Wuhan Military Games and then in November, I have just finished my exam. [00:03:02] Nothing very special happened then. And after that by the end of December, we were beginning to embrace a New Year. And, of course, I've got many friends in Wuhan. They are all fans of sci-fi and fantasy movies, so you know that the *Star Wars, The Rise Of Skywalker* was released in the cinema by the end of 2019, right? When we see that we got ourselves a big gathering of lots of friends from both Shanghai and Beijing. Um, it was back then, around December the thirtieth or December thirty-first, we saw the notice that was initiated by the Wuhan authorities to notify the hospital [door opens] if they have seen those patients with pneumonia with unknown causes and report them to the CDC. [00:04:18]

When we first saw the notice, we thought it was something that was fabricated by someone or it was just a hoax. And, at the end of afternoon on December the thirty-first, it has been confirmed that there's a kind of disease that has been spotted and most cases, as the media reported, were discovered in the Huanan Wholesale Food Market. And I think that's the first time we know that there's a kind of disease in our city, but we don't know the actual nature of the disease and further investigation was carried out. [00:05:02] But, nobody is feeling that is something back then. They know that maybe it's not as serious as SARS. Maybe it's not something like that. And, day by day, a lot more cases were discovered as we were entering 2020. That's where my story begins.

I got myself a new job in the middle of January. And, so, as far as when it began, I remember that on January the thirteenth, when my father came back from Hankou, he got sick. [00:06:05] He was, like, having a cold. In the beginning, the symptoms were very mild and then me and my Mom, we are also showing something like muscle pain and coughing. We had no idea what it was. When me and my Mom took some medicine, we recovered like around half a month [later], or like two weeks, but my Dad wasn't getting any better. Like, he's not recovering, but

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the situation is gradually becoming worse. So, on January the twentieth, you know, that's the day when Doctor Zhong Nanshan announced that the disease that a pneumonia of an unknown case can spread between people. [00:07:08] And from then, we're all on high alert. Well, back then not only was I on high alert, but I'm also in a panic because my Dad is, like, his situation keeps getting worse. And we don't know what to do. A lot of medicine doesn't work for him and he just keeps getting worse. Uh, I was not sure if my Dad was infected with that kind of disease since it is a new type of disease. Me and my Mom, we all recovered. It's just my Dad who was getting worse. And, in our opinion—so we had experience with SARS—every patient that was infected with SARS, the situation can become very serious in a short period of time. [00:08:05] Maybe you know about that?

So when Doctor Zhong Nanshan announced that kind of disease can spread from people to people, we began to wear masks and our company has all told us to work at home, but unluckily, back then, I felt like I was having some kind of symptoms. I keep my social distance with my co-workers and my clients. So far, none were infected. On January twenty-second, the situation is getting even worse. We know that the disease is infectious and every day more and more people were testing positive.

My Dad was tested once. [00:08:59] We thought it was that kind of disease, but the result came out and he was negative, but the situation keeps getting worse. And in the evening of January twenty-second, I think that we cannot bear the situation any longer. When my Mom was in disarray, I called the ambulance several times and got my father to the hospital. Actually, when we got to the first hospital, a lot of people were standing in front of the emergency room and the fever clinic. They are all having some kind of fever and they all needed to be tested. The line was—actually, if I had to admit it, I never have in my life have I seen such a situation, but there's so many people waiting in line to get themselves tested. [00:10:02] And then self-diagnose it. I don't know whether they had this kind of disease or not, but back then I can sense the panic. The panic was in the air. So after a (____? ?), we finally made our way to another hospital where my father got a sick bed. Back then, you can hardly find a sick bed, but it's not

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because there were so many patients. It is because the hospitals were caught in this epidemic all of a sudden and most of the hospitals—

BROWNING: —right, they were surprised—

SHAW: Yes, it was quite a surprise. They were caught in a surprise and they cannot arrange so many beds for an extremely infectious disease in just a couple of days. [00:11:05] And when my Dad got his bed, it was on January twenty-third, and it was in the early morning when I my father got a bed in a nice hospital. And it was the first time that I spent a whole night in the hospital. So while me and my Mom were waiting in the hospital, I got the news around 2 a.m. that Wuhan is going to lock down and all the traffic or the transport will be stopped. Other transport would not be available from 10 a.m. [00:11:59] So when my father some kind of treatment, he was not having a fever, although his oxygen level is very low—it was around fifty—and after oxygen was applied, his condition gradually improved. I still remember there's also another thing, like, that when my father was tested for COVID, he was negative, right? Like I told you he was negative, but the CT scan, which is also very important. The CT scan can show that there was fibrosis on his lungs.

BROWNING: Okay.

SHAW: So that is very crucial—which later is very crucial because fibrosis is proof that people have been infected with COVID. [00:13:01] Although the COVID test sometimes cannot be accurate and for many patients, so judging by some cases they maybe test negative, but they are actually infected with COVID and sometimes the test kits may not be very accurate. This kind of cases—

BROWNING: Right, especially at that time, you know.

SHAW: Yeah. Yes, and right now there are mutant strains, you know, which can even avoid detection of the test kits. So back then, when I know about the lockdown, I feel like it was a once in a lifetime event and I feel like after a few weeks of, like, worrying, I'm already numb.

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[00:14:08] I don't know what happened next. As we all know we were facing something unknown, especially rare—a new kind of disease. Facing the unknown can generate a lot of complex feelings. (Maybe you have heard??) Lots of them are like desperation and depression, right? So back then, when the lockdown was issued, my mother and my father was on the sick bed, they urged me to go home. So I went home in the morning. After I arrived home, I sanitized my clothes and prepared myself some simple breakfast. Facing this stress I got up, gave myself a bath and sit alongside my bed and cried and cried. [00:15:07] It was the first time in an entire year. Never had I faced such a kind of experience in my entire life.

BROWNING: Right, could I ask what happened with your father? Did you find ever find out what happened? What came of that situation?

SHAW: So, my father, who is still alive right now—my father has [recovered from] it, but his situation is very serious. It was not until January twenty-sixth that my father tested positive for the virus—on January twenty-sixth. [00:16:07] And, back then, this kind of disease, it didn't even have a name. We now know that it is a kind of pneumonia caused by a coronavirus. It didn't have a name and it's really something unknown. When I heard my Mom was calling back from the hospital, my Mom insisted on staying in the hospital and if she had not stayed in the hospital, then my father could very likely have passed away back then. Because my Mom stayed in the hospital and she supported him all the way. But my Mom was not infected.

So that also proved another thing that there is antibodies which can be generated in people, right? [00:17:01] So I'm pretty sure that my entire family was infected back then and because, later in May, when I was tested for the antibody, my IgG was positive, which indicates that I was infected, but the symptoms were very mild. My Mom was also infected back then, but when she was tested with her antibodies, her IgG was negative. But it was at the beginning of this year when my mother took a physical exam—not a physical exam. I'm sorry, I forgot my words.

BROWNING: That's okay.

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SHAW: [00:18:02] Yes, when my mother underwent a physical checkup, the doctor can see the traces of fibrosis on her lungs, and which indicate my Mom was definitely got infected. And, so, since then we began to enter the life of home alone. Actually, it was—as for me, I will say, for the first two weeks, I'm all alone in my home. Everything I'm going to prepare; I prepare it for myself. Nothing—

BROWNING: So, sorry, sorry, so you were alone after—

SHAW: —yes, I was alone—

BROWNING: —after you came back from the hospital?

SHAW: Yes, my Mom stayed there for like two weeks before she came back from the hospital.

BROWNING: Mhm, and how long was your father in the hospital? [00:19:01]

SHAW: Um, two months. Actually, it was two months. By the end of March, he was discharged from the hospital.

BROWNING: Okay. So, you return home from the hospital and you prepare to live through the lockdown?

SHAW: Yes, for the first two weeks I'm all by myself and, most unfortunately, a lot of equipment back then in my home—actually, it was my old home located in Hongshan district. A lot of equipment was broken down. A lot of equipment was very old. And at the beginning, it took a lot of effort. In the first week, it took a lot of effort for me to cook stuff. [00:19:56] There were a lot of things in the refrigerator, but they were stored for too long. Some of them became rotten, so I had to throw them away. But lucky for us, the delivery service was still available around our city, but you know that the traffic—all the traffic, the flights, the trains had all been terminated, but there are delivery people still working. Like the doctors and nurses who came from other provinces to help us. They were, like, forging another a battlefield to keep people alive, but back then I ordered a lot of stuff and I asked them to put it in front of my

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doorstep and leave as soon as they can. [00:21:00] After they left for one minute, I would go to my doorstep and begin to collect the stuff that I have ordered. So this kind of situation lasted for two weeks. And every day, the community knew that my father was infected, they sent personnel to the doorstep to send me some supplies and sanitizer, so like alcohol and—

BROWNING: Sorry, who sent this? Who organized that?

SHAW: Um, it was our community, you know, the government. [00:21:53] They have the community, like they have organized the government organization on the basic level. So back then it was the heads of the community who issued everything to be delivered by their members who were working in the government. Or they could also ask volunteers because there a lot of people in our community and most of them are elderly people. They need help and the community arranged help for them. I got myself some vegetables and some noodles alongside with some frozen meat and dumplings in my refrigerator and I've also got delivery services. So, generally, the first week was hard, but [during] the second week after I got used to it and adjusted my mood, you know, that we are facing some kind of unknown disease. [00:23:05] It took a while to pull myself together.

BROWNING: Like, in the very beginning, you kind of talked about when it first started, you returned home from the hospital. You were numb, desperate, had depression. So, how did you overcome that feeling?

SHAW: Um, as to how to overcome those feelings, I wasn't quite alarmed, but as I've mentioned, I've got a lot of friends in Wuhan and from other places who are interested in sci-fi and fiction. I got myself a little social circle. [00:23:57] When they heard about the news in Wuhan, they were very concerned and many of my friends, even my friends in the states, they all called me to ask me, how's it going on and tell me to be strong and they all support me.

BROWNING: Okay.

SHAW: They all helped pull me through this time of hardship.

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BROWNING: So, you kind of get used to the lockdown in ways, right?

SHAW: Uh, kind of. Like one week later when I know how to keep myself up during the days and when I began to adapt to the work online. [00:24:57] So back then, you know, a lot of enterprises tended to work online and I was teaching English as a part time teacher. I can also teach English online, so after one week when I finished my adjustment, I kind of feel like everything was back on track for me.

BROWNING: Okay, I'm sure that helped you get through some of it.

SHAW: Yes.

BROWNING: How did you keep busy?

SHAW: So, for me it's very simple, so you know that I am a fan of sci-fi and fantasy and got a lot of movies to watch and also play some games. Back then, when we are at home if you have a computer, you can do everything. [00:26:00] You can do everything on the computer as long as you are connected to the internet. So I spent a lot of time teaching online while in my spare time I got to play some games and keep myself distracted from those negative emotions. And every day—this is also another thing—I made a phone call to my Mom to ask if she's all right in the hospital and if my Dad is all right in the hospital. So, if you allow me, I can tell you more things about my Dad's situation.

BROWNING: Right.

SHAW: Okay, finally he got his results from the hospital. He was in a very severe condition. Not only did he need to suck on the oxygen bag, but he also had diarrhea—serious diarrhea—and the situation was very grave. [00:27:04] So, my mother had to help him in the hospital to get him up to help him when he wants to poop or pee. It was very hard back then, and since the situation is very serious, my father could barely eat. It was my mother who fed him in the hospital and it took one week for my father's situation to improve a little bit. So, it's kind of—

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the first week was very hard, but the second week, when my father's situation is becoming—there's some glimpse of hope, my anxiety started to become relieved. [00:27:58]

BROWNING: Okay, so, your mother stayed with your father for two weeks in the hospital, right? Correct? Hello?

SHAW: [Audio problems] —on February the sixth, before she was sent back February the sixth.

BROWNING: Okay, so she was with your father for two weeks?

SHAW: Yes.

BROWNING: Why was she sent home, do you know?

SHAW: So there are many reasons. First thing is, you know, initially the medical resources in Wuhan were very tight, so they don't—the arrangement in Wuhan was actually, in the beginning, a mess. But, after two weeks when the two makeshift hospitals, like, Huoshenshan and Leishenshan was established, lots more sick beds and more hospitals were made available for the COVID patients. [00:29:09] And many of those hospitals back then were opened. Huoshenshan hospital was opened for the patients with mild symptoms. They got enough sick beds to take care of almost every patient and my father was transferred to another hospital. He was relocated to another hospital for better treatment and that hospital didn't allow my mother to stay with my Dad anymore. So my Mom has to come back from the hospital, but she didn't come back to my home immediately. So back then, the arrangement is still not in place. My Mom had to stay outside of home for another evening. [00:30:01] The next day she came home on February the 7th.

BROWNING: Okay. And she stayed with you then?

SHAW: When she came home, it's, like, there would be another two weeks for her. You know, the policy—when someone was in close contact with the COVID patient, he or she must enter quarantine for fourteen days.

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BROWNING: Right, so—

SHAW: —My mother was—

BROWNING: Go ahead.

SHAW: So when she arrived home, I have already prepared a room for her and the moment she returned home, my door was closed and the moment when she returned home, I urged her to go to bed immediately. And we did not see each other for the next ten days. [00:31:07] It was kind of like when she was not at home, I had one mouth to feed. When she was home, I got two mouths to feed. I got to feed myself and my Mom. It was the first time I cooked for my Mom for a continuous ten days before she came out of the quarantine.

BROWNING: Mhm, okay, so she quarantined in your home, basically.

SHAW: Yes, she quarantined in our home, but none of us feel uncomfortable. [00:31:58] Back then, when my mother was coming home, I was very nervous. I'm afraid that she was infected, but later she's all okay.

BROWNING: That's good. So I want to ask you, in your community, or your neighborhood, how did the lockdown work? What were the rules? What were the procedures, or the guidelines, that were put in place in your community?

SHAW: Actually—okay, so then let's go into a lot of details. You know that at the beginning of the lockdown, we are already facing the unknown. Now as I already told you, when the lockdown began, this kind of disease doesn't even have a name. Not until the middle of February does the disease have a name. [00:33:01] As we know the official name is COVID-19. Um, back then, initially the lockdown—when it began, the traffic is terminated, but a lot of services in our city hadn't been terminated and people still can still go to the market to buy some food. So the infection rate hasn't been cut off and after one week of observation, the communities are ordering people to stay at home, but actually I think it could have happened a lot earlier, but what can we say? We're facing something unknown, right?

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So back then, and when the stricter lockdown upon the community was initiated, that's when the community service kicked in. [00:34:08] A lot of community workers alongside with volunteers did shopping for daily necessities for the people in the community who's living there and setting up barricades at the entrances of the community. There's one way in, one way out, which will become very easy to manage. So there were a lot of people who don't want to obey the orders. They refused to stay at home. They even refused to wear a mask when they're outside, but after—to be honest, eventually they returned to their senses and began to know the things that happened when somebody was infected and the seriousness of the disease [00:35:00] So, the first time I went downstairs it was, like, in late February. What I see is people are all wearing masks. People all very much keep their social distance and none of them take it down. And there also other people in the community—a lot of the residents when they see somebody who was not wearing masks they would urge them to put on the mask in order to avoid infection. [00:36:01]

BROWNING: So, basically, you didn't go out for almost a month, I think, right?

SHAW: Uh, maybe it's more than that. So, after the lock down, I didn't go very far from home. I didn't go out of the community. The only reason I went out is because the purchases among the community were completed, so I got to fetch things. I got to fetch my stuff for me and my family. That's the moment when I'm going down there. And, you know, when you're going out there, you always need to wear a mask, right? So, masks are also a scarce resource because a lot of the frontline workers alongside with with patients, they all need to need to wear masks. [00:36:54] So back then, I was thinking if I stay at home and keep myself safe, then I can save masks so that maybe the doctors and nurses when they are working on the frontline, they can have one more mask to use. So they can keep themselves safe and bring an end to this epidemic sooner.

BROWNING: So, let me see here. In the beginning, not everybody cooperated with some of the procedures and rules about the lockdown with masks or going out. So when people were behaving this way, what was done to maybe try to, I guess, stop it? [00:37:58]

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SHAW: The community service will get people around them to persuade them, but most of the most people will listen to the persuasion. They've all seen the news. They've all seen the media about how serious this kind of disease is. But since most of us had the experience of the SARS outbreak during 2003 or 2001—I cannot remember—we all know that this kind of disease, this coronavirus disease is very serious and we got to keep ourselves alive. We can't be too careless. Most of them wear masks and if they see someone stubborn enough to go out without a mask, then not only will the community service go ahead to persuade them, he or she will also be condemned by his neighbor. [00:39:01] You know, he or she will also be condemned by this neighbor, because there were many cases back then in Wuhan. In a lot of the neighborhood, the spread was at the community level. Like, if one person was infected and he does not wear a mask and if he keeps walking around, he will infect other people in his or her community. We all know the news. So we all know that it's dangerous, so we have to have discipline in order to keep yourself safe and keep everybody around you safe.

BROWNING: Um, right. I want to go back to your father if we could, for a little bit, and I just want to ask you—especially because you were kind of there with him in the beginning for at least, you know, for a short time. How did you feel about the hospitals and how do you feel the hospital helped your situation with your family? [00:40:03]

SHAW: So, actually, in the beginning, it was all a mess. But after my father was hospitalized and got his sick bed, I think what they did was kind of in time and I cannot be more grateful. To cure this disease needs a lot of resources and a lot of personnel and my father was treated in an all-round way. Also, more importantly, is that all the treatments are free. Initially, when my father was becoming sick, he took a lot of medicine, got a lot of injections and those fees are all covered. [00:41:05] So, in a word, my family didn't spend a dime on curing this disease and the treatment they got is—how can I say? This kind of a once in a lifetime disease—it's kind of, like, when the patient was hospitalized, technically, you don't have to worry about anything. My father is kind of a very stubborn person, so initially in the first two weeks, he still needed my Mom's company. [00:42:00]

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BROWNING: Right. So, your father was in the hospital for two months you said, right?

SHAW: Yes, two months. After he was transferred to another hospital. He stayed there for one and a half months as his situation kept getting better.

BROWNING: So, do you remember when he was released or sent home?

SHAW: I remember it was on the—by the end of March, around—how shall I say? Around the twenty-second. Maybe the twenty-fourth? I still remember it, but I don't remember the exact time of my father's return. It was on April sixth when my father returned home.

BROWNING: Okay, so, your father came home, or was starting to improve, just as the lockdown in Wuhan was beginning— [00:43:05]

SHAW: —Was lifted, yes—

BROWNING: —to be relaxed. When the restrictions were starting to be relaxed, how did you feel, for example, when you could go out a little bit more for the first time?

SHAW: I feel very calm back then. When I went out before, I felt like it was dangerous. And then, there is some kind of unknown disease and that spreads like wildfire and when I was going out, I feel little bit scared. But after keeping social distance with everybody around me, I wore a mask and kept my time outside as minimal as possible. It's fine. [00:43:57] It's just like when you are going to outer space, you have to wear a space suit. [Laughs] Something like that.

BROWNING: [Laughs] Yeah, yeah. That's true. That's a very good metaphor, or a good way to—

SHAW: Yeah, something like that. If you don't wear a mask, if you don't know about social distancing, you might well end up in the in the graveyard.

BROWNING: Yeah, of course. Yeah.

SHAW: Yes, that's correct. A lot of people didn't make it back then. My entire family was lucky.

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BROWNING: Mhm, yeah. Of course, I think so. It's very good that you still have your father with you, I think.

SHAW: So, yeah, I still got my family.

BROWNING: Mhm, yeah, so when your father came home or when he was released from the hospital, how did you feel? [00:45:01] How did your mother feel?

SHAW: We felt relieved. The moment I heard the news that my father was discharged from the hospital with no further symptoms, that he is in good condition—actually, he was not in good condition, but when the patient was discharged from the hospital (unintelligible). And the hospital and the doctors and nurses were very meticulous. Back then, because a lot of patients, some elderly patients, they're, like—how should I say it? It still is like we don't have much understanding about the disease, but they discharged those that have basic illness. They still have basic illness when they were discharged. [For] some of the elderly people who were infected, it can trigger some other symptoms resulting in a series of complications. [00:46:05] And even though the virus was eliminated from the body, it can still leave, like, a series of other kinds of damages in the body. And some elderly people when they were discharged, they seemed fine, but they weren't. They were still going to die in a short period of time because of the damage inflicted on their body. So that's why my father had to stay in the hospital for two weeks, even though he is not relying on oxygen at the beginning of March.

BROWNING: Huh, so, like— [00:47:01]

SHAW: Those are all the experiences. We don't know about this experience. We are crossing this river. We have to touch the bottom of the river and see if there are any rocks for for us to pass. Something like that.

BROWNING: Hhm. Um—

SHAW: —And—

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BROWNING: Go ahead.

SHAW: And most of those experiences are just, like, earned from a lot of sweat and even a lot of blood, a lot of sacrifices. So, [for] a lot of patients, their family has agreed to donate their patient's body. If the patient has passed away because of COVID, this has helped the doctors and nurses a lot to save lives and keep the death rate lower. [00:47:58] That's at least what I know. My father was going to go to a more stable status after the first week.

BROWNING: Okay, and so they just wanted to keep him in a hospital and make sure that you knew that he would be, I guess, okay in the future, right?

SHAW: Yes, yes.

BROWNING: How is he now?

SHAW: He is fine, but his stamina is not as good as what it was before and he cannot perform labor for a very long time and he cannot run. You know, generally he is not as strong as he used to be. But he is already sixty-six this year. [00:49:00] And, most importantly, what worries me the most is not his physical condition, but he's a very stubborn person—he's very stubborn person. So, it's very hard to get along with him when he is coming back.

BROWNING: Why is that?

SHAW: But that's another story—

BROWNING: Why is that?

SHAW: Because my family, we have a lot of bickering. Both of my parents they want to get the upper hand when they are quarreling. Technically, they cannot reach any agreement on almost anything, and even after the end of this epidemic—even after my Mom took care of my Dad for two weeks in the hospital, he still won't come to his senses, but that's another story. That's another story. [00:50:07]

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BROWNING: I mean, may I ask, what were they arguing about? Hospital conditions or just maybe—

SHAW: Um, nothing. Nothing. It relates to our normal life. It's when the epidemic ends and everything went back to normal. In my family, normal is my family members are quarreling with each other, but that's my family stuff. It's not related to the epidemic.

BROWNING: Okay. All right. Yeah, I'm sure that had to be maybe make things a little bit more complicated for you. [00:50:59]

SHAW: Yes, so, actually, [for] my father's current situation, there's no requirement for a doctor, but—

BROWNING: Right now, you mean?

SHAW: Yes, yes. Right now, my father is not in need of a doctor. Maybe a psychiatrist will help him more.

BROWNING: [Laughs] I see.

SHAW: But it's not related to the epidemic.

BROWNING: Right, I understand. I understand. It's like every family has their issues we say, you know.

SHAW: Yeah, yes.

BROWNING: That's completely understandable. So, how did you feel when the lockdown ended? That was April eighth, or April sixth.

SHAW: April the eighth. The lockdown was lifted at zero o'clock—0:00 a.m. in the morning. [00:51:59] And that night, I had a sound sleep. I feel that we are finally free, but actually, the public transport was restored in Wuhan at the end of March, since there were no local cases. But after then, a very important thing happened. In the middle of May, a very important thing,

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which is a very decisive thing. You guess it doesn't happen? It will offer a very valuable experience, so you want to go through that part first?

BROWNING: You are talking about something that happened in May last year?

SHAW: Yes, so actually—

BROWNING: Yeah, go ahead—

SHAW: It is something after the lockdown. We thought we were very safe. But, in the middle of May, a cluster of COVID cases were spotted in a very remote area in a community where a bunch of elderly people tested positive. [00:53:00] A lot of them had symptoms. It's like when the lockdown was lifted, new cases were found. I don't remember quite well, but maybe at the end of April, a case was spotted. So that is some kind of weak link in our defense, where you are finally safe and no new cases, then suddenly a new a bunch of new local cases were detected. A lot of people started to panic, but back then we already got experience so that we are taking very swift moves towards these cases. The community was locked down and the close contacts were all traced. [00:54:01] You know, we already established a system that can allow the CDC to track down the patient alongside with the close contacts to put them in quarantine. And, but, in order to make sure we are totally out of the woods, the Wuhan government decided to perform a COVID test for eleven million people around the city.

So maybe you have already heard the news, some people think it's a waste of resources and such kind of task won't be pulled off. But after two weeks—a lot of people have doubts about it—this task was completed. [00:55:00] And during the entire process, only two hundred symptomatic cases were detected, which means that generally our city was out of the woods. So how to perform such a large-scale test in such short notice has also served as an important experience—a model for further outbreaks across China. For example, in the Dongbei provinces and in Beijing. You know, in the Xingfadi—also a market—over six hundred cases were detected, but it wasn't very widespread. Because it's the laboratories where they're collecting the samples. They make ten person group samples and test them. [00:56:02] If the ten persons

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have tested negative, then that sample is negative. When a sample is tested positive, then those individuals who are tested in that batch will be tracked down and tested once again to make sure if they are positive. So back then, it's a very important experience for us to counter further outbreaks in the other cities.

BROWNING: Okay, so it's kind of like it helped develop a system of—

SHAW: —Yes—

BROWNING: —controlling the virus. Mhm.

SHAW: Yes.

BROWNING: Interesting, yeah, so to go back just really to the end of the lockdown, do you remember what was the first thing that you did after the lockdown ended? [00:57:05]

SHAW: Actually, I didn't go out of my home. I'm still staying at home because, you know, it was the first time. So I'm still staying at home because my company didn't return to its normal business back then. I got to stay at home to do everything online. It's very convenient. After all, I got the community services to help me to purchase stuff. There was no need to go around. And, most importantly, the community service didn't end even after the lockdown ended, so we can still purchase things. You can still purchase things through their network, and I have to tell you I bought a lot of strawberries at a very cheap price. [00:58:03] Because during the epidemic, which eventually turned into a pandemic at the beginning of March, the logistics system was partly paralyzed because of the lockdown. A lot of local farmers cannot sell their products in time, the fruits, for example, like strawberries. They are only available at the beginning of the year. When the weather gets hotter, they won't be available, and they can only be stored for one or two days. So they have to ask for the community for help and that's the moment we started to buy their products. So I got to say it brings a lot of us foodies a chance to eat something at a very cheap price. [00:59:00] The last year it was strawberry, but this year it's cherries.

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BROWNING: [Laughs] Interesting.

SHAW: So yes, maybe we cannot always look at the things on the bad side. So that may be a perk. But, yes, they are still telling us that the COVID-19, which is now a pandemic, is still very serious around the world. And, indeed, it's influence did bring a lot of changes to our lives.

BROWNING: Mhm, that is true. I think what you say is kind of relevant to my next question, is that for you, how have things changed since the lockdown in Wuhan? [01:00:05]

SHAW: Um, a lot of things. For me personally, a lot of things have changed and some of those things that have changed is also related to my political views. So, during the lockdown, I've already surfed the internet and read news every day. I also got a VPN available to allow myself to be on Twitter to see the news updates. And after the lockdown and saw everything happen, especially after one year—I am right now in Bangladesh—and everything from then to now has made me more certain about my career as a translator and interpreter. [01:00:58]

BROWNING: Okay, why is that?

SHAW: There are many reasons. So first things first, during the epidemic we learned a lot about many terms, for example, an asymptomatic patient, which means that a patient that was infected with COVID, but still doesn't show any symptoms. Asymptomatic patients can also be infectious and that is the question that should be answered by scientists. The scientists—we knew back then, when we were in SARS, right?—only patients with symptoms can infect other people. But, this kind of disease, it can infect people even when the infection source are asymptomatic carriers. So, this is something that scientists should answer and during the lockdown, the government has put people's lives first and has also made a lot of scarce medical resources available in the frontline. [01:02:00] For example, you know, the ECMO system, right? You know, the artificial heart and lung which can help people to absorb oxygen? So the ECMO system—very rare, very expensive—not many people are using it, but during the epidemic—during the outbreak, China has imported many sets of ECMO system from abroad. That's one

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lucky thing. But, for Iran, so you know about that even in the middle of February things are getting worse in Iran, right?

BROWNING: Mhm, yeah.

SHAW: So Iran—they don't have the privilege. [01:03:01] They don't have the medical resources because of the embargo imposed by the United States. They are very short of those high-end medical services, among them the ECMO. So that's why initially their death rate was very high. So judging by the current Sino-US relationship, it kind of worries me. So if the US decided to impose more sanctions and even lock down or embargo against China—for example, like what they have done with Huawei. So if they are going to restrict us from accessing those better medical services, then what can we do? [01:04:03] So we can only develop science and technology to make ourselves proficient and to make ourselves capable of countering the upcoming crisis—stop a coming crisis. So that's what I'm saying. After that, I think the science and technology are the first productive forces and it has to be stressed very often. Right now, China] realizes this point and they're also making improvements. For example, in the middle of July, one of the enterprises have already devised their prototype of ECMO system and right now another enterprise—the mRNA vaccine is about to enter its clinical trial of service, which is also very inspiring. [01:05:00] But still, I came to the realization that China is developing in a rapid way in recent years, but there are still gaps in the technology between China and the Western world.

BROWNING: So, how does this affect your decision to become a translator?

SHAW: Um, you know, there are a lot of other countries, for example, I am in Bangladesh, right? Right now, I'm in a third world country. [01:06:01] And I have to say that coming here also made me think that the Chinese people are very lucky. Not only [does] the government have a very strong execution, but they also abide by science and principles, and they get they can get things done. It's good execution in accordance with science and technology. You know, it can really do things. And, for those developing countries, their condition is even worse.

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[01:06:54] Every country has their own status, which differs from country to country, but for some of those countries, especially those underdeveloped countries, they really need help in an all-around way, not just empty words. But that's why I'm more determined to become of service in this trade.

BROWNING: I know that things are quite bad in India right now, which is like near—next to Bangladesh. How are things in Bangladesh at the moment?

SHAW: So Bangladesh has already locked down the border between these two countries. A few days ago, six million SINOVAQ vaccines were transported from China to Bangladesh. [01:08:00] Right now, the head of states are having a meeting—so I assume that you already seen the news that they're having a meeting, which will pose deeper cooperation between our two countries. So, on the one hand that is good, but on the other hand I have to refer to India. So you know that the conflicts at our border last year in June? You know that the conflict resulted in massive clear casualties on India's side. Since the conflict, the populism has been boosted in India. A lot of people are riding a wave of crazy hatred upon China. But this year, when the situation is getting worse, our government is asking them to allow us to send help, but they refused. [01:09:06] You know, when I'm out here, I'm watching the news every day, I see the people piling up the wood to burn the bodies. I really think that is a real humanitarian disaster.

BROWNING: Hm, yes.

SHAW: Right now, China has the capability to help them and the government began to refuse them. I think no country in the world should take geopolitical factors into the control and prevention of the disease.

BROWNING: Right, mhm, of course. I definitely agree.

SHAW: Yes, what I can't understand though are the ordinary people. They're dragging their loved ones [who are dead] to burn them. They're not dying with dignity and decency. That screams with sadness. None of these people really want to be torn apart. Whether it's in China

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or in the United States or in India. Those kinds of stories, they're horrible. I see on Twitter and all kinds of social media about—I still remember—do you know the news that one of the journalists who was standing there who is calling for help because his oxygen level is dropping very low, but he cannot get a sick bed? [01:11:06]

BROWNING: I've heard many stories like that.

SHAW: There's so many stories and so much sadness like when we were experiencing back then. A lot of people are really unfortunate and this kind of unfortunate stuff is right now happening in a way that is unimaginable. In the last century, I don't know how people managed to hold themselves together. I don't know how people managed to hold themselves together during the time of 1918 influenza. I don't know how they had restored themselves after the black plague, but it is happening to our generation and right now our society—our world is more developed than what it used to be. [01:12:10]

BROWNING: That is true.

SHAW: Yeah, and this is the time to call for solidarity and unity among the people around the world. A lot of people do not have the privileges—they do not have a system which can execute science with precision. They don't have that and they don't have vaccines. They do not have mRNA vaccines like Pfizer, Moderna, and they really need help. That's why I really feel like I have the obligation to do my part as a citizen of the world. [01:13:05]

BROWNING: Okay, so that's terrific and I think that's great that you're doing it. And maybe you have answered my next question. I only have a couple more questions to ask you. Maybe you've already answered one or two of these questions, but I just want to ask, is there anything that you think is important now that wasn't before the the pandemic?

SHAW: You know, it's very complicated from my perspective. Yeah, just like Doctor Tedros said, this pandemic has brought out the best part and worst part of humanity. [01:13:59] So, the most important thing that I've realized is that nothing should be taken for granted. The people

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in China can enjoy their lives. The reason we can enjoy our lives is simply because there are lots of sacrifices and energy that has been spent during the time of the outbreak.

BROWNING: Yeah.

SHAW: Like, also, this pandemic has also brought out the worst part of humanity, so you still remember that back then in January, right? [01:15:00] When Donald Trump, the former president, he received the news about the epidemic, he said China is doing this in a transparent way. And, at the beginning of March, he began to use the terms Chinese virus or kung flu and started to say he will make us pay. And he even said these kinds of terms in his election rallies. Probably he is just saying this for the purpose of the election, but by doing this, he has ignited a powder keg. He is the ignition. He is the spark. And, by doing this, a lot of uncertainties have been caused or maybe it has made us to make Chinese people to realize that this is how the world really is. We're still living in a jungle of a survival of the fittest. [01:16:01] And the United States, since the trade war began, a lot of people—before the trade war and this serious event that happened from last year to this year still think that America—maybe not the American people, but the government—the White House—we think they are decent. But, after last year, and what happened after the Biden destruction took power, a lot of peoples' opinions have changed, including me.

BROWNING: Right, so, what's something positive that you think has come out of this experience? [01:17:02]

SHAW: Something positive is that countries cannot be friends, but the people, they can still be friends and they can support each other. Back then, when I was in the lockdown, my friends in the United States they called me to support me. I was grateful and when I heard that there are cases in their community, I urged them stay at home, wear a mask when you always go out and keep sanitizing everything when you came home. [01:17:57] And, most importantly, if you have got vaccines available, get your entire family together to get their jab in order to reduce your possibility of infection.

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So, in a manner of speaking, a positive thing is that this pandemic has made me a firm believer in science and technology and also makes me more dedicated to my career in order to help more people, to boost cooperation, even if only a bit to boost the mutual understanding of cooperation between countries. [01:18:53] That's why I'm still doing this and I think the world right now needs cooperation and solidarity more than ever. More than ever. It's related to our future generations, and we all have the obligation to do our part in order to secure a better future for our kind. And we have to take actions, timely and accordingly, because we if we don't—if we stand idle, then sooner or later, it will hit us. Our latency, our laziness, our idleness will eventually boomerang on ourselves. We have really learned a lesson from the last year. We really hope that this kind of lesson won't repeat anymore. [01:19:57]

BROWNING: That is true, that is true. Okay, so I have no more questions for you unless you have anything else you wish to share.

SHAW: Um, maybe what I'm saying is about, like, kind of political. I am not a political individual. I'm just news watcher, so my opinions only come out after I see things, when I see stuff. Maybe some of my opinions are not very good here especially after last year when, well, like—

BROWNING: Don't worry about it. Don't worry about it because I just want to know your perspective.

SHAW: Okay, so let me dig into it a little bit further. [01:21:02]

BROWNING: Okay.

SHAW: So, the last things about why I give up my English name and I choose only a Chinese name.

BROWNING: Okay.

SHAW: So since the right wing started this hatred towards China, towards Asian people, I began to reflect on the Sino-US relationship and China's future position in the world. Now, I think that

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we are, as a developing country, I feel when we see things happen, we go through a lot of hardship in order to improve our life. And I can still remember when the first Metro line in Wuhan was set up in 2004 and the second Metro line was set up in the 2020. [01:22:06] Since then, China—actually, the city of Wuhan is undergoing a rapid development of the infrastructure and people's life are getting more and more convenient. And the living standards are becoming better as, like—something like this is happening all across the country. Of course, the regional imbalance is something that we cannot avoid, but it's a big country with a 1.4 billion population and sometimes it will exist. But that doesn't mean that this kind of issue will stay like that always.

You know, in China, the first job is to improve the people's life quality. [01:23:00] Allow everyone to have better resources and contribute more to the society alongside with personal development. That's what I'm thinking. So, you know about the issue in my family guarantees some kind of stuff—that is, some kind of obstacles that has kept my family from getting a better life. But still, I'm a believer that individuals can change a lot of things if they can take their efforts in the right direction in order to get a better life. So that's the reason why I am in Bangladesh to serve as an interpreter to help and this is why I am having this conversation with you today. [01:23:56]

So, I gave up my English name at the beginning of this year and it seems, if you allow me to say, I would like to now use my Chinese name. This is my identity and [should] keep it. Sure, I'm not going to say I'm proud to be any kind of person. I'm just saying this is my identity and I have respect and I think every person around the world, as long as they are willing to make a contribution to the world and change themselves for better, they are all equal. They all deserve to be respected. But it's very pitiful that a lot of people in the Trump administration doesn't understand that. [01:24:53] Or maybe what they're doing is actually pulling off the makeup and letting our people see what they truly are. For example, like some other people, like Michael Pompeo or like Senator Tom Cotton. I use the VPN and see their Twitter. The secretary—former secretary—has said that I wish Chinese people to become successful. He treated that (??)

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during October, but in the public, he's still using the term China virus. And Tom Cotton—you know that Republican senator, right?

BROWNING: Mhm, yes.

SHAW: So, he's massively using those doctors' names. You know about Doctor Li Wenliang, right?

BROWNING: Yeah. [01:26:00]

SHAW: You know about Doctor Li. So he's using Doctor Li's name to target us to say that our government is not transparent. But, in fact, Doctor Li is a CPC member. And Tom Cotton, he's actually in all aspects, and from his record, he's a racist and he's using this name to target us. There's a kind of hypocrisy. That is a kind of, like, where are the standards? Where is the respect? And, right now, after the Biden administration took power, I kind of feel like they're still doing the same thing. [01:27:00] Actually, what they have done since they took power is like nothing different from the Trump administration. The only thing is that they can talk big. They can talk very loudly. You have to see what they're doing. Right now, I feel if you want to judge White House, don't judge them by what you've heard, but judge them by what they have done, so maybe I need to ask you about one question. If you can accept it, may I ask?

BROWNING: Uh, well, I mean, maybe after we're finished recording, because really this interview is about you.

SHAW: Okay.

BROWNING: But feel free to ask me after. [01:27:58]

SHAW: Okay, so—it's not very sensitive.

BROWNING: Okay.

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SHAW: Are you going to use the Astra Zeneca Oxford vaccine? So, if this is the only vaccine that is available, are you going to use it?

BROWNING: Well, I will answer that question after the interview.

SHAW: Okay, maybe that's a very acute question. Maybe it's a little too sharp.

BROWNING: No, no, no. It's okay. There's no problem to ask me, but, you know, this interview is just about you, really.

SHAW: Yes, maybe a sensitive question—

BROWNING: No, don't worry, I can tell you after. It's all right. No problem.

SHAW: Okay.

BROWNING: Okay, so, I forgot where we were. [01:29:00] [Laughs] I think I have no other questions for you and if you don't have anything else to share, I can stop recording and we can even continue to talk about things.

SHAW: Okay.

BROWNING: And there's some other things that I need to tell you as well. I do want to say before we stop recording, I thank you very much for doing this and I really do appreciate it.

SHAW: Okay.

End of interview