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EPIDEMIC CONTROL IN CENTRAL-SOUTH CHINA BW DEFENSE AND ARMY HEALTH

On 18 March 1952, the Central-South China Antiepidemic Committee was organized. Its task is "to exercise unified leadership over antiepidemic work throughout the region, strengthen defensive measures against employment of bacteriological weapons by American imperialists, exterminate epidemics, protect the health of army personnel and civilians, and ensure the development of all phases of construction work."

The 75th administrative conference of the Central-South China Military and Administrative Committee, held on 22 March 1952, approved the establishment of the antiepidemic committee and directed the launching of region-wide Entiepidemic work.

On 23 March 1952, the Central-South China Antiepidemic Committee issued its first directive and ordered the pursuance of the antiepidemic campaign in accordance with the "First Stage Working Plan Outline of the Antiepidemic Campaign in Central-South China for 1952."

The following are articles concerning the establishment of the committee and the highlights of the 75th administrative conference of the Central-South China Military and Administrative Committee. Also included is the entire text of the "First Stage Working Plan Outline."

ANTIEPIDEMIC COMMITTEE SET UP -- Henkow, Ch'ang-chiang Jih-pao, 20 Mar 52

The Central-South China Antiepidemic Committee was officially inaugurated at its first meeting on 18 March 1952. Its chairman is Teng Tzu-hui, vicechairman of the Central-South China Military and Administrative Committee. The vice-chairmen are Chao I-min and Chao Erh-lu. Memters are Li Hsien-nien and 21 others.

- 1 -

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The task of the committee is to exercise unified leadership over antiepidemic work throughout the Central-South China Region, strengthen defensive measures against employment of bacteriological weapons by American imperialists, exterminate epidemics, protect the health of army personnel and civilians, and ensure the development of all phases of construction work.

At the inaugural meeting, Chao I-min emphasized the necessity of smashing the concept of inertia and of developing all phases of antiepidemic work.

DIRECTS LAUNCHING OF REGION VIDE ANTIEPIDEMIC CAMPAIGN -- Hankow, Ch'ang-chiang Jih-pao, 24 Mar 52

The 75th administrative conference of the Central-Scuth China Military and Administrative Committee, held on 22 March 1952, approved the "Summary Report on Public Health Activities for 1951 in Central-South China," the "Comprehensive Report Concerning Health Plans for 1952," and the establishment of the Central-South China Antiepidemic Committee.

At the conference, Teng Tzu-hui, vica-chairman of the Central-South China Military and Administrative Committee, issued detailed directives regarding public health work in the future. The directives, in part, read:

Great results have been achieved during 1951 in health work throughout the region Naturally, there is still a great disparity between the reconstruction of health work and services and the needs of the people. The most urgent task now is to start a region-wide antiepidemic campaign and to strengthen defensive measures against the employment of bacteriological weapons by the enemy in order to guarantee the health of the army personnel and the civilians and the expansion of various reconstruction programs.

To achieve these objectives, we must first strengthen our propaganda and education work. The public health agencies must coordinate with culture and education agencies, news agencies, the Hsin-hua She, broadcasting stations, trade unionc, and land-reform committees, and speed up the organization and strengthening of mass propaganda work. We must publish and distribute epidemic-prevention literature to the cadres in the rural and urban districts so that they can educate the masses.

The most basic task is the training of health cadres. Some 50,000 cadres must be trained in the Central-South China Region in 1952. In training cadres, their cultural level must be raised. Even more essential, they must be trained to have the revolutionary spirit and character necessary for rescuing the dying and helping the sick and complete devotion to caring for the ill. To facilitate the training of health cadres, the apprenticeship system must be used and the entrance examination system must be abolished.

It is also essential to remold the ideology of medical workers. The first step in this direction is to unite and reform the present Chinese-style medical practices. We must also expand the establishment of the joint Western and Chinese style doctors' disgnosis stations devoted solely for the service of the people.

The Industry Department of the Central-South Military and Administrative Committee must set up a health group, and all comparatively large publicly and privately operated factories and mines, with 300 or more people, must establish health stations by August 1952. In addition to the health organs already set up by the provincial people's governments and administrative offices, each heien people's government must establish a health section, with the chief of the section acting concurrently as chief of the health center; and each ch'u people's government must have health assistants who act as chiefs of ch'u health stations. Ch'u with no health stations must establish joint Western and Chinese-

- 2 -

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style doctors' diagnosis stations. Hsiang where land reform has been completed must establish hsiang public offices or health committees within the hsiang administrative committee organs. In this way there will be a systematic organization of health work from top to bottom.

TEXT OF ANTIEPIDEMIC DIRECTIVE -- Hankow, Ch'ang-chiang Jih-pao, 25 Mar 52

The following is the first directive issued by the Central-South China Antiepidemic Committee since its establishment on 18 March 1952:

Central-South China Antiepidemic Committee Directive

("Hui Fang" Directive No 1)

The Central-South China Antiepidemic Committee was organized on 18 March 1952 to exercise unified leadership over antiepidemic work in the Central-South China Region and to strengthen defensive measures against employment of bacteriological weapons by the American aggressors. The "First Stage Working Plan Outline of the Antiepidemic Campaign in Central-South China for 1952," which was drafted and promulgated by the committee on 23 March 1952, shall be consulted and executed in each locality in accordance with the local conditions, and progress reports concerning the outline shall be submitted periodically to this committee.

> Teng Tzu-hui, chairman Chao I-min and Cnao Erh-lu, vice-chairmen Central-Soith Chint Antiepidemic Committee

Enclosure: "First Stage Working Plan Outline of the Antiepidemic Campaign in Central-South China for 1952"

First Stage Working Plan Outline of the Antiepidemic Campaign in Central-South China for 1952

Nature and Scope

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To deal a final desperate blow, the American aggressors have employed bacteriological welpons inside our border to cause epidemics of acute infectious diseases to livestock, people, and farm crops. To protect the health of army personnel and civilians, consolidate the national defense, ensure the development of cconomic construction, expand defense work in rear areas, and increase the Resist America, Aid Korea potential, military and administrative leaders of all levels shall be personally responsible for arousing and bringing about the cooperation of army personnel and civilians in launching the region-wide antiepidemic campaign, and in strengthening defensive measures against employment of bacteriological weapons by the enemy.

Organization and Leadership

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Under the unified leadership of the Central-South China Antiepidemic Committee, military and administrative leaders of all levels shall be personally respensible for delegating to the affiliated health, public security, cultural and educational, communications, postal, telegraph, telephone, air defense, guards, agriculture and forestry, and veterinary sgencies, military units and people's organizations, etc., the responsibility for setting up antiepidemic committees, in the provinces, municipalities, special ch'u, and hsien and antiepidemic centers and teams in the ch'u, hsiang, and villages.

- 3 -

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Length of Campaign

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The first stage of the campaign, shall begin on 1 April and end on 30 June 1952.

Mobilization of Manpower

All personnel 'n military and administrative health, medical, public security, cultural and educational, agriculture and forestry, communications, chemical industry, veterinary, and other such agencies; personnel in medical associations, doctors' offices, trade unions, peasants associations, scientific wor'.rs' associations, cultural workers' associations, women's federations, science - pularization associations, youth leagues, students unions, Youth Corps, school health-maintenance committees, etc., shall be mobilized and organized into propaganda units, antiepidemic units, and relief units and assigned to rural areas, mining districts, military units, etc., to carry out the antiepidemic campaign after the completion of a preliminary propaganda and education drive.

Doctors and nurses in medical colleges and schools shall be mobilized to give antiepidemic lectures and to train antiepidemic workers. In towns and hsiang, they shall train a large number of junior antiepidemic personnel. Each province, municipality, special ch'u, and hsien shall organize antiepidemic units to go into different localities to direct and aid antiepidemic work, and by utilizing the local health teams as integral units, mobilize the local army personnel and civilians to complete this important political task.

Propaganda and Education

- 1. Propaganda
 - a. Aim

The aim of the propaganda is: (1) to enhance vigilance among the masses and to make them fully understand the crimes of the American agressors for employment of bactericlogical weapons in Korea and in China, and to build up among them the "hate-and-wreak-vengeance-on-American-imperialism" state of mind; (2) to awaken the masses to the importance of the antiepidemic work, to make them correctly recognize the bactriological warfare, to wipe out their fear hysteria oy teaching them antiepidemic knowledge and methods, and to organize them to launch the antiepidemic campaign under the correct leadership of the party and the government: (3) to propagandize antiepidemic knowledge and methods and (4) to arouse the masses to the highest pitch and launch the antiepidemic campaign.

b. Contents

The following shall be propagandized: (1) the system and method of reporting on epidemic conditions: (2) the control measures needed and the reporting of conditions in areas where the enemy employs bacteria-laden insects and materials: (3) preventive measures against gastroenterlitic diseases (cholera, typhoid, paratyphoid, diarrhea), insect-borne diseases (bubonic plague, malaria, epidemic encephalitis, yellow fever, dengue, typhus, relapsing fever), and respiratory diseases (pneumonic plague, smallpox, influenza, various types of pneumonia), and skin diseases (tetanus, anthrax, emphysematous gangrene); the following shall be emphasized. preventive measures against chlorea, bubonic plague, epidemic encephalitis, ari yellow fever: (4) the techniques of destroying flies, mosquitoes, rats, and _cc: and (5) the method of protecting water sources, the method of water purification, food and beverage sanitation, the control of garbage and nightsoil, and the development of campaigns to clean up living areas.

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c. Media

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The following propaganda media shall we used: newspapers, pamphlets, posters, blackboard news, wall pictures, comics, cartoon serials, lantern slides, ballads, music, street dramas, local dramas, operas, plays, speeches, radio broadcasts, discussion meetings, street propaganda, exhibitions, demonstrations, and parades.

2. Training

a. Give technical training to Chinese-style doctors.

b. By analyzing concrete conditions, start short-term training classes for midwives and disinfecting personnel, and train a large number of junior antiepidemic personnel.

c. Organize training schools for students and activists in factories and mines to increase antiepidemic personnel.

3. Education

a. Expand antiepidemic education in medical colleges and schools of all levels. Give bacteriological warfare lectures.

b. Start intensive research on defense against bacteriological warfare in universities and research institutes. Findings and suggestions concerning bacteriological warfare defense shall be reported periodically.

Reporting or Epidemic Conditions

1. Organization of Information Network

a. Fersonnel in air defense, railways, public security agencies, military units. health agencies. etc., and people's organizations shall be fully utilized to collect information. Each office concerned shall compile and submit the information to a higher office. Maintaining close liaison with air-defense lookout posts, customs inspection centers in each province, special ch'u, hsien, ch'u, hsiang, border defense area, and port city shall be responsible for gathering information concerning the scope and condition of epidemics in areas where bacteria-laden insects and materials have been spread by enemy planes and/or agents.

b. Information agencies of all antiepidemic committee information networks to facilitate the gathering of information.

2. Information Reporting Requirements

a. Air-defense agencies shall gather and report informations concerning the general condition at the time bacteria-laden 'nsects and materials were disseminated. The report shall include the time, location, amount, and scope of dissemination, the identification of bacteria-laden insectr and materials, and the conditions after control action has been taken.

b. Public security agencies shall gather and report information concerning the identification of bacteria-laden insects and materials disseminated by enemy planes and/or agents, the amount disseminated; any conditions ofter control measures have been taken. They shall also make a survey of each household and report the number of patients and deaths resulting from the diseases.

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c. Railway agencies shall gather and report information concerning epidemic conditions among travelers and among people living adjacent to rail-roads.

d. Military personnel and local health agency personnel shall gather and report information concerning epidemic conditions in military garrison areas and local areas.

3. Information Liaison System

a. All information-gathering agencies on lower levels shall report information to higher levels periodically by telephone and telegram.

b. Antiepidemic committees of all levels and their affiliates shall gather and report information concerning epidemic conditions to the related information agencies, which in turn shall be responsible for compiling the sports and submitting them to higher offices.

c. Each information agency of provincial, municipal, special ch'u, and hsien antiepidemic committees shall conform strictly to the following reporting system: (1) Epidemic conditions reports shall be submitted every 10 days; (2) emergency cases, such as the epidemic conditions resulting from enemy-disseminated bacteria-laden insects and materials, shall be reported immediately to higher authorities by telephone, telegram, or other such media.

d. Information on epidemic conditions compiled periodically shall be made available to the agencies concerned.

e. Factual reporting of epidemic conditions shall be made at all times. Delayed reporting or sending of confused reports will hamper the orderly pursuance of antiepidemic work.

4. The masses shall be mobilized to gather information in order to facilitate obtaining more reliable and comprehensive data.

Antiepidemic methods

1. Protection of Water Sources and Purification of Drinking Water

a. Cover and enclose wells; organize people to take care of wells; for community wells, assign persons, on a rotation basis, to protect and take care of them; gradually rebuild wells.

b. Increase inspection and purification work at drinking-water plants.

c. Cover and enclose wells located near rivers. Water in such wells shall be required to be purified since contaminated river water has the tendency of seeping through sand and soil and infecting well water.

d. Bourdwalks used in water-scooping shall be extended into the center of the river. Water shall be gathered from places where the current is very rapid.

e. Drink boiled water only: use bleaching powder in water before washing dishes and utensils.

f. Use bleaching powder to purify water (the instrument in measuring the chlorine residue in the water shall be maintained at 0.3/1,000,000 at ordinary times and at 0.5/1,000,000 during epidemics).

- 6 -

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g. Drill new wells. Obtaining water from wells will prevent drinking water from rivers and ponds.

h. When there is an indication that bacteria-laden insects and materials have been disseminated by the enemy, send samples of water from the contaminated areas to the inspection station for analysis. Do not drink water from contaminated areas until analysis proves the water is driukable.

2. Food and Beverage Control

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a. Following the principle of "first give education and than carry out control," increase control over foodstuff manufacturing and selling plants and stores; train and place employees in such plants and stores on health committees to supervise the maintenance of sanitation measures.

b. Restrictions shall be imposed on the manufacture and sale of food and beverages as follows effective 23 March 1952: (1) the manufacture and sale of apricot juice, watermelon juice, agar agar jelly. colored drinks ("ruit juice, lemon juice), ice shavings, sugar cane juice, and spoiled fruits and vegetables shall be forbidden: (2) fruit frostings, ice sticks, ice cream, carbonated water, etc., shall be subject to the following restriction: (a) ice sticks -- the bacteria content shall not exceed 10,000 per milliliter and no bacillus coli shall be found in each 1/10 milliliter: (b) ice cream -- the bacteria content shall not exceed 30,000 per milliliter and no bacillus coli shall be found in each 1/10 milliliter: (c) carbonated water and soda frostings -- the bacteria content shall not exceed 100 per milliliter and no bacillus coli shall be found in each 20 milliliters.

c. Guide and aid in the quick turnover of fresh food and beverages; place strict control over marketing, manufacture, and sale of fresh food and beverages.

3. Cleanup of Living Areas

a. Utilzing people's basic health agencies draw up health compacts, and begin campaigns to clean up living areas. In towns and cities, collect garbags and dump it in trash barrels or community trash boxes so that sanitation personnel, or specially assigned persons, can cart it away to designated garbage dumps. In heiangs and ts'uns, garbage shall be made into compost piles or buried in designated places. Encourage frequent washing and drying of clothes and frequent bathing in order to carry out the "four-clean" objective, namely, the clean household, clean clothing, clean surroundings, and the clean body.

b. Garbage dumps shall be located in marshy areas where garbage can be pressed down firmly. Garbage shall be covered with muddy soil to prevent breeding of flies and to keep rats away. If garbage is to be used as fertilizer, remove useless material, such as brick and stones, and mix useful material such as feathers and bones, with horse minure and nightsoil into compost piles. The most effective way of eliminating garbage in hospitals is to burn it in inciner-

c. Household health teams shall select health committees (or draw up health-evaluation-day systems) to inspect and supervise households in carrying out and obeying health regulations.

4. Nightsoil Control

a. Privies, pits, and bucket latrines shall be covered to prevent breeding of flies.

- 7 -

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b. After defecation, the excrement shall be covered with soil, straw ashes, stove ashes, or fresh lime to prevent its becoming infested with flies.

c. Set aside definite places for washing nightsoil containers to prevent contamination of sources of drinking water and pollution of soil Forbid indiscriminate and insanitary disposal of human excreta and washing of nightsoil containers.

d. In fertilizing fields with nightscil, encourage the method of fertilizing fields after prestorage of nightscil for maturation. The maturation tends to make nightscil much safer for use as fertilizer.

e. Under the principle of "prevent leakage, flies, rats, odors, and seepage," rebuild privies. Set up strict measures to maintain clean privies.

f. Privies, pits, and bucket latrines shall be rebuilt on higher grounds to prevent water from seeping into them. They shall also be built at considerable distances from sources of water.

g. Excreta of sick persons shall be disinfected with bleaching powder, fresh lime, or caustic soda.

5. Prevention and Destruction of Disease-Borne Creatures

a. Flies

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(1) Cover privies, pits, and bucket latrines; rebuild or discourage the building of open-air privies; use boiling water, hot stove ashes, fresh lime, or borax to kill maggots; if necessary, use 0.5/100 solution of 666 (120 to 150 milliliters per square feet of privy space) or 5/100 solution of DDT (200 milliliters per square feet of privy space.)

(2) Increase control over waste disposal in fresh-fish stores, restaurants, and fruit and vegetable stores; forbid selling of rotten or already sliced fruits or melons not properly protected from flies.

(3) All food and beverage stores shall be required to have wike, cloth, glass, wooden, or bamboo screens or coverings to prevent fly infestation. Fly traps, fly paper and fly-catching basins shall also be used.

(4) If personnel is available, maggots in soil and debris adjacent to privies, pits, and bucket latrines shall be sought out and destroyed.

(5) Fly-prevention and extermination equipment shall be used in government agencies, sc) bolt, factories, etc., where crowded conditions exist.

b. Mosquitoes

 Inspect all water holes, ponds, swamps, etc., mobilize the masses to destroy mosquito larvae.

(2) Clean up stagnant ditches and canals, fill old ponds and puddles: plug up tree holes; clean areas surrounding houses, empty water that has accumulated in crocks, buckets, etc.; and cover water buckets.

(3) Each ch'u and hsiang people's government shall, in cooperation with public security organs, call on the people to clean their nightsoil bucket each week and to prevent breeding of mosquito larvae in fire-prevention water basins.

- 8 -

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(4) In epidemic-outbreak areas or areas where bacteria-laden insects and materials are reported to have been disseminated, the water surface shall be sprayed with DDT, 666, insecticides, Paris Green, or kerosene to kill mosquito larvae.

(5) Mobilize the people to gather mosquito larvae by using long poles with net attachment on the end.

(6) Stock ponds, etc., with ducklings, minnows, turtles, etc., to get rid of mosquito larvae.

(7) Use native medicine and native methods as much as possible; hold discussion meetings to study methods: kill adult mosquitoes.

c. Rats and Fleas

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(1) In nonbubonic plague areas, arouse the masses to carry out a mass-scale rat-eradication movement. In bubonic plague areas, carry out intensive flea-extermination campaigns.

(2) Use rat traps. Use all types of native rat-catching methods.

(3) Use the following rat poisons: barium carbonic acid, calcium arsenite, sodium arsenite, hung-hai-ts'ung (江 治 资), an-t'o (子 子), 1080, etc.

(4) Spray rat holes. rat nests, baseboards, wall surroundings, under beds, etc., with DDT or 666 to eliminate fleas. If environmental conditions permit, use fumigation methods.

6. Quarantining in Communications Centers

To increase the quarantining work extensively in the Central-South China Region, additional quarantine offices shall be set up in cities and towns located in major communications centers, in port cities, and in administrative and economic centers. The provisional quarantine centers shall be established in Wuhan, Canton, Swatow, Hai-k'ou, and Shen-ch'uan. In Honan, they shall be established in Cheng-chou, K'ai-feng, Shang-ch'iu (Chu-chi Shih), Lo-yang, Hsinyang, Hsu-ch'ang, Chou-k'cu, and Chu-ma-tien: In Hunan - Ch'ang-sha, Heng-yang, Chu-chou, Hsiang-t'an, Shao-yang, Ling-ling, Li-ling, Ch'en Hsien, Yueh-yang, Liu-yang, Huang Huien, Ch'a-ling, Yuan-ling, Ch'ang-te, Ching-shih, and I-chang.

In Kiangsi, provisional quarantine centers shall be established in Nanch'ang, Kan Hsien, P'ing-hsiang. Shang-jao, Chi-an, Ching-te-chen, Chang-shu, Chiu-chiang, Ch'ac-k'ou, Ying-t'an, Nan-ch'eng, P'o-yang, and Ta-yu; in Kwangtung -- Kao-yoo, Hsin-hui, Fort Bayard, Hsing-ning, Ch'u-chiang, Mei Hsien, Chung-shan, Hui-yang, Chiang-men, Tung-kuan, Ch'ao-an, and Chieh-yang; and in Kwangsi -- Nan-ning, Liu-chou, Wu-chou, Kuei-lin, Ch'uan Hsien, Pai-se, Lungt'an (Chen-nan-kuan), Kuei Hsien, Fa-pu, Yu-lin, Wu-ming, Pin-yang, Pei-hai, Hop'u, and Tung-hsing.

7. Icolation Medical Treatment

Comparatively large cities which are communications centers shall be required to set up isolation wards, antiepidemic hespitals and other necessary facilities, to take care of acute infectious-diseases patients and to carry out isolation medica. treatment to check the spread of epidemics.

- 9 -

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April

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a. Establish antiepidemic organs of various kinds and levels, including health and antiepidemic centers.

b. Establish research and diognosis centers in Wuhan, Ch'ang-sha, and Canton.

c. Establish information and reporting networks to facilitate timely reporting of epidemic conditions.

d. Intensify propaganda and actively begin antiepidemic work.

e. Expand antiepidemic education in medical colleges and schools to train a large number of junior antiepidemic personnel.

f. Formulate effective control measures to check epidemics which arise from bacteria-laden insects and materials disseminated by the American imperialists.

g. Carry out the following preventive vaccination and inoculation work: (1) complete spring smallpox vaccination work; (2) complete the anticholera inoculation work in Kwangtung, Kwangsi, Canton, etc. and begin anticholera inoculation work in Hunar, Kiangsi, Hupeh, Wuhan, etc. and (3) increase antibubonic plague inoculation work.

h. Increase quarantine work in communications centers.

1. Carry out campaigns to clean up living areas; formulate general sanitation regulations.

j. Fursue fly-extermination and prevention work; improve and protect sources of water and purify drinking water.

2. May

a. Complete anticholera inoculation work in each province ard municipality, including Honan. Complete antibubonic plague inoculation work in Kwangtung, Kwangsi, and Kiangsi.

b. Increase control over manufacture and sale of food and beverages; strengthen control over the handling of nightsoil.

c. Conduct work on prevention and extermination of mosquitoes and fleas.

d. Begin rat-eradication campaign: in bubonic plague areas, health personnel shall direct this campaign.

e. If necessary, establish temporary examination stations and antiepidemic hospitals.

f. Begin investigation of the various level antiepidemic agencies.

3. June

a. Complete antityphoid and paratyphoid inoculation work.

b. Place antiepidemic organs of all types and levels on a sounder ba-

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c. Establish additional communications quarantine stations in inland

d. Continue to carry out various phases of environmental sanitation work.

e. Continue to investigate and supervise the work of antiepidemic agencies of all levels.

f. Summarize the work achieved in the first stage (April - June) and formulate a plan to be carried out during the second stage of the antiepidemic campaign for 1952.

Concrete Requirements

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1. Develop propaganda and education work widely and extensively: by explaining the danger of bacteriological warfare, by arousing the masses' complacency by emphasizing the feasibility of, and the measures for, defense against bacteriological warfare, by wiping out possible outbreaks of fear hysteria among the masses, and by exposing and seeking out special agents who try to sabotage this propaganda campaign by means of false rumors.

2. The antiepidemic campaign shall be effectively organized, directed, and planned: its activities shall be thoroughly investigated by organizing specialized agencies whose duty it will be to supervise and investigate the antiepidemic activities in order to guarantee their successful conclusion.

3. In areas where epidemic outbreaks are reportedly due to bacteria-laden insects and materials disseminated by American imperialism, each province and municipality shall develop effective epidemic control measures and shall transmit the experiences thus gained to other localities in the Central-South China region.

4. Place antiepidemic agencies gradually on a sounder basis. Install additional facilities. Train a large number of antiepidemic personnel. Improve techniques. Mobilize and unite manpower and materials to defend home and country against bacteriological warfare.

5. At the conclusion of the first stage of this campaign, antiepidemic agencies of all levels shall submit to higher offices a summary of experiences and activity reports so that they may be studied as references and utilized in formulating the activity plan for the second stage.

Supply of Medicine and Equipment

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1. Conduct Surveys

Make a survey to find out the rate and amount of production, and the existing amount of medicine and equipment needed in the antiepidemic and disinfecting (including anti-insect) work.

a. Each province and municipality shall take an inventory of warehouses and markets of each health, medical, agricultural, forestry, industry, and mine unit to find out the existing amount of antiepidemic and disinfecting medical supplies and equipment.

b. Make a survey of all publicly and privately operated factories and firms in the Central-South China Region to find the present manufacturing capacity of biological products and antiepidemic and disinfecting medical supplies and equipment.

- 11 -

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2. Increase Control Over Medical Supplies

a. Regulate the purchasing of disinfecting medical supplies and make a qualitative analysis of effective medicine. If necessary, antiepidemic agencies may coordinate the purchasing and distribution work.

b. Carry out strict chemical examination or qualitative analysis of antiepidemic and disinfecting medical supplies and medicine. Punish manufacturers and/or traffickers in spurious medicines.

3. Stockpile Medicine and Supplies

a. In important towns and villages, each province and municipality shall stockpile antiepidemic and disinfecting medical supplies and medicine for use in case of emergency.

b. Any shortage in medical supplies and equipment in the Central-South China Region shall be obtained immediately from elsewhere so that they may be available in case of emergency.

4. Standardize Equipment

By analyzing concrete conditions, each province or municipality shall standardize medical supplies and equipment, such as uniforms, tools, etc., to be used by antiepidemic agencies of all types and levels, including antiepidemic and disinfecting units. These supplies shall be stored in readiness ahead of time.

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