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This volume is part of a recent welcome surge in publications about the history of medicine and public health in (East) Asia. Its editors are veterans in the field: Ka-che Yip’s 1995 *Health and Reconstruction in Nationalist China* was one of the first monographs to focus on the history of public health in China, while Liping Bu has published widely on the history of Sino-American medical exchanges. The volume stems from a workshop at the Rockefeller Archive Center (RAC) held in 2009, and Yip and Bu are joined in their editorial efforts by the Director Emeritus of the Rockefeller Archives, Darwin Stapleton. The volume is not entirely a Rockefeller Archive “festschrift”: not all of the articles draw on archival documents related to the Rockefeller Foundation. Nevertheless, most of the articles are admirably based on primary documents, if not from the RAC, then from the archives of colonial offices, NGOs, and/or national administrations. All of the essays consider the encounter between Western and Asian models of public health and medicine in the first half of the twentieth century, a phenomenon illustrated by the work of the Rockefeller Foundation that emerges in most of the articles.

Public health history in Asia is a topic that has garnered much attention in recent years, but the current volume has several features that distinguish it from other work. While several recent monographs such as *Neither Donkey nor Horse* by Sean Hsiang-lin Lei and Bridie Andrews’ *The Making of Modern Chinese Medicine* have considered shifts in medical epistemology and struggles over the basis of knowledge in East-West encounters, this volume returns our attention to the important structural issues of institution-building and the provisioning of biomedical services; advances that had direct impact on reducing mortality and morbidity due to infectious disease. And while other edited volumes, including Angela Leung and Charlotte Furth’s *Health and Hygiene in Chinese East Asia*, Ka-che Yip’s *Disease, Colonialism, and the State: Malaria in Modern East Asian History*, and Christopher Aldous and Akihito Suzuki’s *Reforming Public Health in Occupied Japan* have tended to center on single nations or cultural blocks, this volume gestures toward geographical diversity, with coverage of
multiple countries throughout Asia, from Japan to Indonesia, Hong Kong to Sri Lanka.

That being said, six of the volume’s ten essays on “Asia” do focus on countries/colonies with large ethnically Chinese populations. Contributions by Liping Bu, Gao Xi, and Bridie Andrews focus on various issues in public health in mainland China during the Republican period (1911–1949). Ka-che Yip’s essay considers themes in the epidemiological transition in colonial Hong Kong; Law Yuan Han chronicles the struggles to train medical professionals in pre-war Singapore; and Michael Shiyung Liu outlines the shift from a Japanese colonial public health administration to “American-standard medicine” in post-war Taiwan. Liu’s essay in particular highlights an important problematic: how did a public health administration embedded in foreign colonial control become a public health system of a sovereign nation, ostensibly post-colonial yet strongly shaped by foreign influence and foreign aid? Liu shows that the abrupt retreat of the colonial system (combined with the chaotic end-of-war scenario in Taiwan) resulted in a marked resurgence of infectious diseases.

The Nationalist public health professionals who moved to Taiwan brought approaches based on US models nurtured through the Rockefeller Foundation back on the mainland, such as the Peking Union Medical College and Rural Health Demonstration programs. This US-inflected model was successfully grafted onto foundations left by the Japanese presence, as Liu illustrates with the example of successful malaria eradication on the island. Advanced malaria research, already quite developed in pre-1945 Taiwan, focused not only on environmental eradication, but also on the development of improved disease treatment. And the Taiwanese population, conditioned after fifty years of colonial education and health policing, proved to be highly cooperative with invasive interventions such as house-to-house spraying and blood-sample collection. Here, the process of decolonization highlights integration over rupture in what appears to be a relatively seamless transition.

The question of public health and medicine in the process of decolonization is brought into even sharper focus by Eric Andrew Stein’s unique essay on Indonesia. In “Hygiene and Decolonization,” Stein finds that the Rockefeller Foundation “intersected with Indonesian anti-colonial nationalism in some surprising ways” (p. 52). The Rockefeller Foundation’s emphasis on rural health allowed Indonesian urban elites a way to overcome class-based differences and “engage directly with the rural masses.” The Japanese occupation furthered the decolonizing process, allowing higher education instruction in Indonesian (instead of Dutch) and promulgating a nationalist ideology that blamed Indonesians’ ill health on the evils of European colonialism. Ultimately, a second decolonizing shift came in the 1950s, with a critique of the Rockefeller Foundation itself and
“the recognition that difference in bodily practice was not primarily cultural, but was based on social and economic inequalities” (p. 66). The Rockefeller Foundation had inadvertently created a vehicle for progressive nationalism that enabled revolutionary perspectives far beyond what had been imagined by the organization itself.

Stein’s treatment of the shift from colonial to post-colonial public health in Indonesia flags a theme that is more or less absent in this volume: While the introduction does mention “colonial models and post-colonial development” as one of the concerns of the book, most of the essays focus on the inter-war years or eras before the end of colonialism in Asia. For the post-colonial perspective, readers need to examine Bu and Yip’s follow-up work, Public Health and National Reconstruction in Post-War Asia, an edited volume containing ten essays addressing public health in countries ranging from North Korea to Thailand during the 1950s and beyond. This new volume helps address the question of chronology, but lingering questions about geography and the definition of “Asia” remain. There is a notable paucity of essays in Science, Public Health and the State in Modern Asia that deal with India, which serves to contrast this collection with another recent edited volume, Robert Peckham and David Pomfret’s Imperial Contagions: Medicine, Hygiene, and Cultures of Planning in Asia. In the Peckham and Pomfret volume, half of the articles are about India, and influential scholarship on colonial medicine in India figures prominently in the volume’s analytical framework; and yet we find that mainland China is underrepresented.

Indeed, it seems difficult to stretch “Asia” to include the continent’s two largest countries. It may be the case that this gap between scholarship on India and on China is what prevents adequate thinking through of the significance of “Asia” itself in this and other recent scholarship on public health. Nevertheless, the publication of Bu, Stapleton, and Yip’s volume (along with other edited volumes recently produced by this team) demonstrate that an actual field that can be called “the history of public health in Asia” has indeed arrived. Given the tremendous rate of publication on the topic in the most recent five years, I am confident that the horizons intriguingly suggested by this volume will be explored by a new generation of scholars in the years to come.
References


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