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Sarah Mak *University of California, Santa Cruz*, smak@ucsc.edu

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Science, Public Health and the State in Modern Asia (2012) is an edited volume of essays that critically examine approaches to medicine and the implementation of public health in Asia. The ten contributing authors have come together to understand the ways in which Asian societies underwent transformations in their approaches to public health. As the editors note, there exists a growing body of literature focusing on the effects of colonial medicine and health practices, Western medical science, development, and modernization in Asia. Such works have caught the attention of scholars in fields such as anthropology, history, colonial studies, and other fields within the social sciences. This interdisciplinary volume succeeds in relating its work to those in the field of global and international studies. The volume is organized around three main themes: colonial and post-colonial healthcare and public health practices, the role of transnational organizations and movements in public health development, and the role of public health in state-building. This volume ultimately examines what happens when knowledge from the West regarding health and medicine intersects with Asian understandings of health and medicine. The authors illustrate how new discourse on medical science, scientific knowledge, and public health was often met with resistance from the local community. More critically, this volume successfully highlights the ways in which medicine, the institutionalization of public health, and the dissemination of scientific knowledge can also be seen as tools for governance, nationbuilding, social and cultural transformations, and economic growth – all of which are fueled by global linkages of various sorts.

The volume begins with an examination of colonial and post-colonial models of developing public health in Asia. In his study of disease control in pre-World War II colonial Hong Kong, Ka-che Yip notes that any actions taken by the government to handle disease control was often minimal in nature so as to not be an economic burden for the crown. The government recognized that health policies and disease control were required in order for the colony to sustain its trading practices in the increasingly populated city. Actions such as the segregation of residential areas as a form of disease control furthered racial assumptions that the Chinese population was unhygienic. Similarly as Yip notes, as a way to introduce and validate the benefits of Western medical science, the colonial government actively tried to undermine the local Tung Wah Hospital and its practice of Chinese medicine, albeit unsuccessfully. The colonial government's reluctance to engage in a comprehensive approach to introducing public health in Hong Kong is not an outlying case. In the second chapter, Law Yuen Han also notes that public health was not initially a major concern of the colonial government in Singapore – primarily because of Singapore's changing status from Straits Settlements to a subdivision of the Bengal government in India, and later to a Crown Colony. In Law's historical overview of the health system in Singapore, one sees how such limited concern for the development of public health might have failed to meet the demands of a growing immigrant population that served as the main labor force in the colony's plantations and ports. The colonial government's myopic understanding of healthcare left the colony with insufficiently trained local healthcare personnel and a weak infrastructure. This was soon eased by locally born elites who cooperated with the government and the Rockefeller Foundation to promote the development of Western medicine and the establishment of medical schools.

In the above examples, industries and trade crucial to the colonies' profit making were threatened by outbreaks and epidemics; as such, maintaining profitability was the ultimate impetus behind the implementation of disease control efforts and public health campaigns and the introduction of Western medical health practices. A similar instance occurred in Sri Lanka as a hookworm epidemic spread through the island colony's tea plantations. As Soma Hewa's chapter illustrates, the Rockefeller Foundation arrived in Sri Lanka to first assist in hookworm treatment programs and later stayed to assist in the creation of a successful primary healthcare system. The successes of the Sri Lankan's primary healthcare system required both the colonial governments and post-Independence government to navigate the system through its development and maintenance.

Eric Andrew Stein's chapter is another engaging study of how the Rockefeller Foundation not only played an important role in anti-colonial nationalist movements but also assisted in the post-colonial development and nation-building project of Indonesia. Most significantly, the foundation also proved crucial in setting aside former colonial misconceptions of health and bodily practices as culturally or racially determined and instead framed such practices in terms of social and economic disparities. The collaborative and close relationships established between foreign institutions or governments and local governments is further highlighted in Darwin H. Stapleton and Michael Shiyung Liu's chapters examining the institutionalization and growth of public health in China, Taiwan, and Japan. Through these chapters, one sees how the role of transnational organizations must be a part of any discussion of public healthcare development in East Asia. Rather than simply presenting a critical view of intervention and Western philanthropic missions, these chapters present a constructive interpretation of the nuanced relationships between the Rockefeller Foundation, Asian states, and the local populations.

The last set of chapters is concerned with state-building and nation-building projects in East Asia. Especially at the turn of the century, nationalists often analogized the modernity and health (and strength) of a nation with the health of its people. Li Ping Bu traces the historical development of the Beijing First Health Station and the incorporation of public health into the Chinese medical school curriculum. The station's development, as Li Ping Bu shows, played out the debates that were common among public health schools in the West and their approaches to healthcare at that time. More significantly, with regard to state-building, the station's approach to the training of health professionals created a new generation of medical professionals and leaders whose approaches to public healthcare were motivated by their aspirations for maintaining the new republic's sovereignty and power. The last chapter, by Birdie Andrews, also analyzes the motivations behind the development of public health and the relationship between public health and nation-building projects in Republican China. Quarantine measures conducted in the name of public health can be seen as examples of tools and means of exerting sovereign power.

This volume successfully introduces some key critical observations to understanding the development of public health in East Asia. In addition to understanding the global linkages between state actors, non-state actors, and healthcare professionals, this volume understands the effects of public health development in East Asia as going beyond the realm of disease control and disease prevention. Indeed, it sees public health as having played an important role in anti-colonial movements, decolonization, nation-building efforts, and state-building efforts. The chapters can also be seen as historical lessons regarding the often unwavering and uncritical support of the medical sciences and the possible pernicious social effects of such projects. For example, a less rosy depiction of the Rockefeller Foundation is illustrated in Aiko Takeuchi-

Demirci's chapter. Takeuchi-Demirci's study on the foundation's "race biology" and population control efforts in Japan highlights American imperialist fears of the growing powers of Japan at that time. As Takeuchi-Demirci argues, under the guise of "objective" scientific research, population control efforts fell under the scope of global and national public health discourses, and in the name of scientific research, medical research, and public health, infringements of basic human rights often took place – many of which targeted women. Lastly, as suggested by Darwin H. Stapleton in the conclusion, the examples in this volume describing efforts to promote public healthcare for all at the turn of the twentieth-century seem an age away as the current public healthcare and medical services succumb to the pressures of privatization, neoliberalism, and capitalism. The chapter written by Xi Gao about state funded healthcare systems and their downfall is an important case to consider and is a cautionary tale in understanding healthcare debates in the twenty-first century.

Sarah Mak University of California, Santa Cruz smak@ucsc.edu