Preface

There have been many books written about the history of the individual medical or health institutions of Hong Kong, mostly to celebrate their anniversaries. One of the more comprehensive books on the medical history of Hong Kong, *Plague, SARS, and the Story of Medicine in Hong Kong*, published in 2006 by the Hong Kong Museum of Medical Sciences Society, marked the 10th anniversary of the Museum. Focusing on several topics, including infectious diseases, hospitals in Hong Kong, the Bacteriological Institute, health care issues, and medical education, it covered the period from 1842 to 2006. More recent books provide well-illustrated stages of development of different areas of medicine: orthopaedic surgery (*Repair, Reconstruct and Rehabilitate—Half a Century of Orthopaedics in Hong Kong*), emergency medicine (*From “Casualty” to Emergency Medicine—Half a Century of Transformation*), surgery (*Healing with the Scalpel: From the First Colonial Surgeon to the College of Surgeons of Hong Kong*), and medicine (*Sapientia Et Humanitas: A History of Medicine in Hong Kong*), published by the Hong Kong Academy of Medicine Press in 2004, 2006, 2010, and 2011 respectively. However, until now no study of the history has contextualized developments in medicine, health, and sanitation within the local and global political, social, and economic changes in Hong Kong. The development of medicine and sanitation in the Crown Colony of Hong Kong during the first half century of British rule is a fascinating history, providing a lens through which we might view important social, economic, and political changes in Hong Kong.

This book tells the story of how the medical and sanitation policies of the Hong Kong colonial government reflected changing political values and directions from the time Hong Kong became a British colony in 1842 up to the start of the Second World War. In the beginning of British rule, the hands-off policies of colonial administration were based on principles of segregation and non-interference in Chinese affairs. When it was jolted awake by the widespread horror of the bubonic plague, the government
reacted with draconian intervention measures that led to an emptying out of half the population. Finally, in consultation with the Chinese leadership, the government learned strategies of friendly persuasion, public education, and propaganda campaigns to promote Chinese acceptance of Western public health policies and practices.

This book also details how, during the first few decades of British rule, the administration’s laissez-faire policies, differing sanitary habits, and mutual mistrust of the Chinese people and the colonizing British led to a sorry state of public health in Hong Kong. In an unequal society, it was impossible to implement regulations that could be applied equally and impartially to members of two races. Not until the horror of bubonic plague, which struck Hong Kong in 1894 and continued to rock the colony at almost annual intervals over the following thirty years, did the government move to conduct sanitary reforms and develop public health measures to prevent the spread of infectious diseases.

Each chapter of this book examines different turning points in Hong Kong’s medical history, while also showing how much the mingling of cultural values with both politics and history bleeds into this story. The chapters are arranged by theme and sometimes go over the same chronological periods.

Chapter 1 narrates the story of how, shortly after the cession of Hong Kong to the British in 1841, severe epidemics of malaria partitioned the city of Victoria into east and west, separated by military barracks. This separation led to the aggregation of the Chinese in the Tai Ping Shan area, a breeding ground for the subsequent eruption of bubonic plague. It also describes the destructive effects of opium on physical, socio-political, and economic health of the population in China while the very same poisonous substance benefiting the financial health of the colony.

Chapter 2 recounts how, while completely ignoring the prevalence of venereal diseases among the indigenous Chinese population, the government used medical interventions in brothels to protect those who served in Her Majesty’s Army and Navy from venereal diseases.

Chapter 3 examines the establishment in 1872 of a Chinese hospital, Tung Wah Hospital, where impoverished Chinese were treated exclusively with traditional Chinese medicine. At a time when traditional Chinese medicine and Western medicine struggled for ascendance in Hong Kong, the Chinese elite, encouraged by the government, built this hospital with a grant and funds raised among the wealthy Chinese. After the
devastation of the bubonic plague, the introduction of Western medicine into Tung Wah Hospital helped foster its gradual acceptance in the Chinese community.

Chapter 4 tells how the members of the London Missionary Society founded Alice Memorial Hospital in 1887 and helped encourage acceptance of Western medicine through collaboration with local medical practitioners and westernized Chinese elite to provide free care to the poorer citizens. They also facilitated the establishment of Western medicine by founding the Hong Kong College of Physicians for the Chinese, the forerunner to the Faculty of Medicine, at the University of Hong Kong.

Chapter 5 analyses the reasons that led to the unsanitary conditions in the densely populated Tai Ping Shan district. It explains the dismal failure to carry out recommendations of Osbert Chadwick, a metropolitan expert in sanitary engineering and son of British reformer Edwin Chadwick. The squalor and overcrowding in Tai Ping Shan, the Chinatown of Hong Kong, became the epicenter of the 1894 bubonic plague epidemic.

Chapter 6 describes how the colonial administration used harsh, repressive measures in vain attempts to control plague, and the resulting Chinese exodus that left the colony’s economy in tatters. It took thousands of lives and millions of lost revenue before the government and the people would engage actively in sanitary reforms.

Chapter 7 explores the sequelae of the plague epidemics: sanitary reforms and development of public health, the appointment of the first medical officer of health, the reorganization of the Sanitary Board and the Medical Department, and the founding of the Bacteriological Institute. Another milestone was the founding of the Chinese Public Dispensaries which provided free Western medical care and carried out the government’s public health measures, including birth and death registrations, public health education, and dissemination of propaganda material for public health measures. Staffed by Chinese doctors with programs on antenatal and infant welfare clinics and the government midwives, these highly successful dispensaries increased the acceptance of Western medicine in the Chinese community.

Chapter 8 addresses the ways in which the missionaries and the Chinese elite together tackled the problem of high infant mortality in Hong Kong, by establishing the Alice Memorial Maternity Hospital,
a midwives’ training program, as well as antenatal and infant welfare centers in the Chinese Public Dispensaries. Aiming to avoid confrontation with the traditional midwives, the government created a parallel system of training in midwifery and the provision of popular free midwives’ services attached to the Chinese dispensaries.

Chapter 9 examines the colony’s three great killers apart from plague—malaria, small pox, and beriberi—and the extent to which advances in Western medical science benefitted the people of Hong Kong.

Finally, Chapter 10 assesses the status of medical and sanitary services, and the health of the population in Hong Kong after one century of British rule.

Despite the haphazard way medical and sanitary services in Hong Kong developed before the Second World War, many factors contributed to Hong Kong’s entry into the ranks of “developed” countries by 1970: the establishment of public health measures and their acceptance among the Chinese; a reasonable supply of Western-trained local doctors and nurses; legislation on sanitary and health matters; and the government’s provision of medical care to the poorer Chinese. Even though most of the physical structures of hospitals were destroyed during Japanese occupation between December 1941 and August 1945, Hong Kong was able to rebound. Today its health indices are among the best in the world.

This book draws on a wide array of archival material and scholarly literature, the details of which can be found in Bibliography.

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December 2015