


The Initiation and Development of Public Health Nursing in China: Transnational Flow of Nurses, Knowledge, and Culture

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Abstract

The initiation of public health nursing in China in 1920s was a result of the transnational flow of people, knowledge and culture. Transnational educational institutions and non-governmental organizations, represented by Peking Union Medical College (PUMC) and the Rockefeller Foundation, as well as by individuals, played a dominant role in shaping the initiation and development of public health in China in the 1920s to 1930s. PUMC was the hub to disseminate its founder's vision and model in public health in China through integration of education with empirical initiatives in public health. Nursing education programs of the School of Nursing at PUMC provided expertise, human resources, and leadership in public health in China from the 1920s until the beginning of the 1950s. Throughout this time, as a profession predominated by women, public health nursing served as a good example to demonstrate women's role in the transnational flow of people, knowledge, and culture.

The Cradle for Public Health Nursing in China – the School of Nursing, PUMC

In 1915, the Rockefeller Foundation (RF) purchased one of the best medical schools in China at that time - the Union Medical College (UMC), Peking, owned by the London Missionary Society, and run by six missionary societies from the UK and the US. Meanwhile, the foundation purchased the dilapidated residence next to UMC which belonged to Prince Yu of the Qing Dynasty. In 1917, a solemn cornerstone laying ceremony was held for the Peking Union Medical College (PUMC) in the front of the main hall of the deserted residency compound. The then Vice Minister of Ministry of Education of the Republic of China and dignitaries from US legations in Peking witnessed the historic moment – the advent of Rockefeller’s philanthropic ambition in China. The effort had started almost a decade earlier, in this disease- and poverty-ridden country with the largest population in the world, a land with a culture that was so different from Western civilization on the other side of the world. The Rockefeller vision for PUMC was to build it into the best medical school in the world, together with a teaching hospital and a nursing school for educated Chinese women.

As with the medical school - “a Johns Hopkins implanted in China,”¹ the RF aimed at making the nursing school of PUMC a replica of the Johns Hopkins model, too. By August 1919, the RF had appointed Anna D. Wolf, a graduate from Johns Hopkins Hospital Training School for Nurses in 1915, with a master’s degree from Teachers College of Columbia University in 1916, as the superintendent for nurses to establish a nursing school at PUMC.

Nursing was a very new profession for China at the beginning of the college. Wolf was, “entrusted [with] the task of securing the nucleus of the nursing staff of the PUMC...and also entrusted the organization and development of the nursing school... the maintenance of its character and the quality of the work... Before 1921, she went back to the US to secure more members of the nursing staff...”² “In a little over five years, Anna D. Wolf organized and established a graduate nursing service (at PUMC) free of dependence on students for service, and employed a variety of nurses... But more significantly, she established the first collegiate

education for nurses in China, an affiliate program with the local university”³ with a diploma program and degree program in nursing.

“Establishment of this PUMC nursing program was an innovative step in China, particularly when viewed from the perspective that only in 1916 had such a program been established at the University of Cincinnati and a similar arrangement made in 1917 between Teachers College, Columbia University and Presbyterian Hospital in New York...some of which had not been or was only beginning to be done in the United States” (Allison, 130).

At PUMC, Wolf realized her vision of upgrading nursing education at the university level. She worked very hard to make this happen in the US and it was a long and painstaking effort in China. She was offered reappointment as dean at PUMC for a period of six years with a doubled salary⁴; Wolf decided to resign from PUMC in 1924 and never came back to China. In the same year, the school graduated its sole student, the granddaughter of the well-known governor.

The Initiation of Public Health in the US and China

When PUMC was at its establishment stage from 1910 to 1919, public health nursing was flourishing in the US. Lillian Wald coined the term, “public health nurses,” in 1893 that “place[d] emphasis on the community value of the nurse” and founded the influential Henry Street Nurse’s Settlement in New York City for practicing public health nursing. “Wald’s paradigm for nursing practice was based on knowledge gained during two decades of experience in visiting nursing (started in the UK) and owed much to the Progressive reform and public health movement of the turn of the century.”⁵ The new role attached to nurses was welcomed by American nurses, for “American nurses saw health visiting as opportunity for professional independence, status, and economic security... enabling the health visitor to provide ‘care with autonomy’” (Buhler-Wilkerson, 1781). The nurses engaged “in preventive programs for schoolchildren, infants, mothers, and

patients with tuberculosis... went into the homes of the poor to teach healthful living and disease prevention” (Buhler-Wilkerson, 1780).

“By the late 1920s, public health nurses had indeed demonstrated their ability to provide comprehensive health care to the American public... Growth had been tremendous during the previous decade” (Buhler-Wilkerson, 1782). While in China, the 1920s were the golden years for PUMC, according to John Z. Bowers, author of *Western Medicine in a Chinese Palace, Peking Union Medical College, 1917-1950*. During this decade, PUMC developed very quickly and made noteworthy achievements in medical sciences, becoming the medical center for the Far East. Important for the population’s health of China was the establishment of the department of hygiene and public health at PUMC, and the initiation of public health practice in 1920s, the first of its kind in China.

A number of individuals were involved with the initiation of public health nursing: Gertrude Hosmer was said to be the first to “organize a public health nursing program in China”⁶ and “Wolf had incorporated some public health content in an earlier course on hygiene and sanitation” (Allison, 130). However, it is generally agreed that public health nursing – its education and practice in China - began at PUMC during the deanship of Ruth Ingram from 1925 to 1930 (the second dean) and Gertrude E. Hodgman from 1930 to 1940 (the third dean). Another component was the opening of the First Health Demonstration Station near PUMC campus in Peking in 1925 - a pioneer and innovative urban community public health program initiated by John B. Grant.

Grant was born in China to a Canadian missionary family. In the 1910s, he studied medical education at the University of Michigan and public health education at Johns Hopkins University. Between 1921 and 1935, he worked in China with dual responsibilities - the dean and founder of the Department of Hygiene and Public Health at PUMC, and as the representative of the International Health Board (later, Division) of the Rockefeller Foundation in China. Grant was a very influential figure in both urban and rural public health in China. He collaborated with the police department of the Peking municipal government, established the urban public health demonstration program – the First Health Station - and served as the co-director of the RF’s rural China program from 1935 to 1938. “A

leading Chinese economist years later attributed any accomplishment in social medicine during the Republican period to the leadership of this same John Grant, concluding that he was the ‘spirit of public health’ for modern China” (Bullock, 134).

Grant “had the unusual intellectual flexibility necessary for adapting medical practice and pedagogy to the overwhelming needs of China” (Bullock, 134). Even though there were some public health efforts during the plague in Manchuria 1908-1911, public health was rather foreign to Chinese society, more so than biomedicine and modern nursing. As a result, Grant had to start everything from scratch. But he knew China and the strategies of doing business in China. He made PUMC his base for his ambitions in public health initiatives in China.

The Development of Public Health Nursing

Public health nursing in China was based on the American model. However, its programs were different from its US counterpart in that ever since its beginning, public health nursing combined education and practice together. The integration was epitomized and demonstrated by the close ties between the School of Nursing PUMC and the First Health Station, so much so that the initial public health programs had professional, academic, financial, and personnel support from the college. Wald’s programs were bottom up, rooted in communities and sponsored by the MetLife Insurance (then called Metropolitan Life Insurance), whereas Grant made the programs were closely linked to educational institutions, and with China’s Mass Education Movement in 1930s, and later with the Nationalist government.

Working closely with the college, Grant designed and made the fullest use of the capacities of the School of Nursing (SON) in his public health initiatives. Grant and Hodgman shared commonalities. Hodgman was brought from Hopkins to PUMC by Wolf and had a sound public health background. Hodgman was “fluent in Chinese and familiar with the Chinese people... having grown up in China, and was viewed as more amenable by the PUMC administration“ (Allison, 131). She

was very different from Wolf, who “had difficulty with the language and adjustment to the culture... her (Wolf) lack of adjustment to the culture was considered “insurmountable,” and she was considered “inflexible” in some ways.⁷ Hodgman had her own view of nursing in China. She carried on Wolf’s work and pushed forward the work at the school to its peak. More importantly, she worked closely with John Grant and expanded the nursing program by introducing and developing public health nursing. Hodgman shared with Grant the belief that: “From the beginning (of the PUMC) it was recognized that the nurse and doctor in China must be prepared to enter the field of preventive as well as of curative practice.”⁸

Grant “emphasized that the training of public health professionals should be deeply rooted in a community where both preventive and curative medicine were integrated in practice... Grant therefore had to experiment with his own vision of a combined practice of curative and preventive medicine at the health station.”⁹ In addition, “(he) pointed out the importance of public health visiting to the station: The immediate objective of the Health Station is to introduce as efficient a system of public health nursing as possible, adapted to Chinese conditions. The success or failure of this, we believe, would be reflected in the success or failure of the Health Center as a whole...” (Bu, 122).

Grant “recommended that public health nursing be located in the Hygiene Department and then transfer to the School of Nursing after its fieldwork passed the experimental stage at the health station...” (Bu, 122). Administratively, public health nursing was one of the departments under the Division of Medical Services of the Health Station. Other departments included school health, industrial health, maternity health, infant health and medical clinic services. The Division of Public Health Visiting was a separate division at the Station. “The health station of the First Health Area, Municipality of Greater Peiping, where students receive their experience in home and community visiting work, has a well-organized and modern public health service. It covers an area with a population of approximately 93,877 people” (Hodgman).

The health station was as equally important as the hospital in nursing practice, education, and career development. The students were taught school health

service, industrial health service, home visiting, and the general principles of public health. In addition, public health nursing had always been the compulsory course for nursing students of the school. The fifth (degree program) and final year (diploma program) of the nursing program was divided between clinical practice, public health nursing, and electives. At the health station, the students engaged in health education and health promotion for communities, schools, and nearby factories. The students participated in a number of tasks; this included providing preventive inoculation: educating pregnant women in knowledge about prenatal care, delivery, and child rearing; and teaching children about hygiene. The students went household by household advocating hygiene and public health knowledge, gave lectures, and so forth, the same as the tasks expected by public health nurses in America.

Started from the 1930s, PUMC offered post-graduate training in nursing, in which public health nursing was a very important component. From 1943 to 1948, the school admitted 55 postgraduate students to study at SON PUMC under the obligation that they must return to home institutions for service after they completed the 2 to 3 years courses at PUMC. 46 of the 55 trainees admitted to PUMC graduate training were in the graduate public health nursing program. Additionally, from 1925 until 1951, the school enrolled over 1,000 trainees of different levels from different parts of the country and offered them training courses ranging from hospital nursing, nursing education, public health nursing, and hospital dietary nursing to advanced courses for hospital nursing and public health specialized nursing.¹⁰

The Profession and Leadership for Women in a Transnational Setting

Public health nursing opened up new professional opportunities for American nurses and Chinese women. In the US, American nurses were actively involved in the practice. “By 1915, nurses entering this new field of public health began to specialize... Specialization, these nurses argued, allowed them to become experts, to lead others...” (Buhler-Wilkerson, 1781). Their involvement in public health

was valued in their transnational service. For American nurses who wanted to work and teach at PUMC between 1920s and 1940, public health service became one of the prospective offerings for consideration. In the standard printed job application form of the Rockefeller Foundation, there was a separate blank designated for public health work experience in the US. The American nurses who had education and experiences in public health were favored. Mary K. Eggleston, the secretary of the CMB (China Medical Board of New York, Inc.) based at the organization's office in New York City, was the key contact person to communicate with the American nurses about their inquiries to work in China and with leadership of SON PUMC, of PUMC, and the RF. In many cases, she influenced or made the decisions for hiring.

In order to meet the RF's goal of building the best nursing program in the East, the selection of the American nurses for the PUMC was strict. The candidates had to be in good health, with college education, trained in a nursing school, and have relevant working experience, better with overseas experiences which many of the applicants had; foreign languages were preferred, though not required. They were asked about their expectations for positions and salary in China. The policy stipulated that the nurses remain single during their service in China. A couple of American nurses eventually got married while working at PUMC, and were asked to resign.

As the American institution in the Far East with a good reputation and superb facilities for living and working, PUMC attracted those American nurses who were seeking career promotion, changing their nursing specialty, or just looking for offers with decent pay, comparable to that in the US, an opportunity that was hard to find in their home country. A number of them had public health service experiences, too. In 1932, there were 41 foreign nursing staffs working at the College, the majority came from the US, with a few from Canada.¹¹

Similarly, for Chinese women seeking to work or study in PUMC's nursing programs, the entrance requirements were very high, or too high, given the social and economic conditions in China from the 1920s to the 1940s. In the 1930s, the requirement was "one prenursing year of required subjects in an approved college or university...very high that relatively small number of girls who enter college in

China” (Hodgman). Besides, the Chinese applicants had to be in good health, the same strict requirements as to American nurse coming to PUMC. The strict enrollment requirements and demanding training that the Chinese nurses had at PUMC guaranteed the best quality for the School and its graduates. According to Wang Xiuying, “They (who went for fellowships in the US) thought that quality of nursing of PUMC Hospital and public health of the First Health Station were better than the average institutions in the US.”¹²

Nursing opened up a new profession for educated women in China. Hodgman commented, “Except for teaching, medicine, and nursing, there are not very many satisfactory positions actually open to the college women of China” (Hodgman). In the dean’s letter drafted by Ingram to potential SON PUMC applicants in the 1930s, the following words were used to attract educated and talented Chinese women to become nurses “a profession as old as Time and yet as new as modern science”, “a composite of many vocations – home economics, teaching, social work, medicine and science”, and “educates women to be a more intelligent wife and mother...” The letter particularly mentioned that public health nursing was one of the attractions of the nursing profession. Working in public health and in hospitals was mentioned as the two graduate opportunities. Up to July 1931, the school graduated “thirty-nine women in eight classes. Eight graduates were engaged in public health work, five of them with the Division of Public Health Nursing in Peking, while eleven worked at PUMC” (Hodgman, 3).

One thing that other educational institutions and professions in China could not compare with PUMC was that PUMC gave opportunities for the graduates working at the PUMC Hospital and the school to go to abroad to study. CMB had sufficient funding for fellowships for nurses training in the US. Almost all of the fellow applicants were granted. The Chinese nurses showed great enthusiasm for obtaining the fellowships and to continue studying for a higher degree in the US. Many of them wanted to extend their fellowship in the US, putting leaders of CMB and PUMC in a dilemma whether or not to grant the extension. In 1932, nineteen of the graduates (out of the 39) had been, or were then, abroad for a minimum of one year of postgraduate study in nursing (Hodgman, 3).¹³

The fact that Chinese nurses were keen on the opportunities to further their education for a higher degree was partly a reflection of China's long history of appreciating scholarship, though usually for men; now it was opened to women, partly because Chinese nurses realized that nursing needed to upgrade itself to a higher level to make it a respectable profession in society. "As in other countries efforts are made at times to lower entrance requirements for nursing education; however, our Chinese nurses believe in high standards and will work together for this end. The need for Chinese nursing leaders is great and can be met only through upholding high standards in nursing education" (Lin, 8).

As to the US host institutions for PUMC nurses, Teachers College of Columbia University was at the top of the list. The college offered a pioneering nursing program of a master's degree. Wolf talked about the influence of the Teachers College in her interview by John Bowers.¹⁴ Almost all of the PUMC nurses who went to the US for their fellowship were recommended to go there. This preference continued after Vera (Yuchan) Nie, who had studied at Teachers College and the University of Michigan herself, succeeded Hodgman and became the first Chinese dean of the school in 1940. Nie made arrangements for the PUMC nursing fellows to go to Teachers College after the school resumed in 1948. Some of them obtained masters degrees from the Teachers College, including Wang Xiuying (Hsiu-ying, Class of 1931, the first Chinese awarded the Florence Nightingale Medal for her public health nursing efforts).

Because of the Rockefeller Foundation's financial backing, which was even envied by most American institutions, PUMC had very good living and working facilities for both foreign nurses and Chinese nurses. However, for the majority of American nurses working at PUMC, language was a big challenge. Starting with Wolf, the foreign nurses were required to learn Chinese in the first year upon their arrival, even though English was used as the working language at PUMC. In addition, they had to adapt to the local culture in their four-year contract at PUMC, and learn how to work with Chinese nurses and patients.

Similarly, for the Chinese nurses and students, English was also a great challenge. The founder of the College made English the official language for the college. "The reason for this is not only that it is easier for the foreign instructors to teach in

English, but chiefly the richness of literature available in English and the opportunities for further study which are open only to those who have mastered the language” (Hodgman). Many SON alumni talked about how hard they struggled with English in order to comprehend what they learned. However, their English proficiency acquired at the school gave them an advantage to engage in activities in international society, for example, studying abroad, attending International conferences, academic exchanges, publication, transnational networking, and so forth.

The three American nursing leaders showed their individualism, charisma and distinct style of handling issues in the Chinese culture. They led in a transnational institution in which they learned, grew, and prospered. Wang Yafang (王雅芳, Class of 1925, SON PUMC) told a story in her memoir that in one class she thought her American teacher did not treat her equally as she did to her classmate from Sweden. Out of national pride, she complained of “discrimination” to Wolf. Wolf did not defend the teacher. Instead she asked for an apology from the American teacher to Wang. Wang wrote: “The Dean’s nice attitude, democratic style, and her patient approach moved me and after 60 years, the memory is still fresh.”¹⁵

Working overseas and enjoying much autonomy in administration and finance from the medical school, the three American deans developed their leadership in the transnational organization. They had an American style of the leadership and management inside the college, constantly communicating with the headquarters in New York, dealing with Chinese and foreign women staffs, and relating to the local people and foreigners, and with local government. Wolf demonstrated her extraordinary leadership in China by her success in establishing the school of nursing. Ingram was born in China and could speak fluent Chinese. Every year that she was the dean, she would go to high schools to promote in Mandarin the enrollment of applicants to SON. She eventually went back to work in America in 1929.

Hodgman showed her leadership in her running the SON at its peak time, and successfully developing public health nursing education and practice in China. She “was uncompromising in her conviction that the education of nurses at PUMC

must always stick to the highest standards.” She energetically continued the campaign initiated by Anna Wolf and Ruth Ingram to alter the Chinese concept of nursing as an impossible profession for women; she recalls it as her “greatest challenge”¹⁶ After they left China, Wolf and Hodgman continued to demonstrate their leadership in both US and international organizations.

The Chinese nurses grew out of a culture where women were considered inferior to men for a history of thousands of years. The development of the nursing profession in China, particularly working in public health, opened up the possibilities for them to grow and to lead. It is an undeniable fact that PUMC created the first cohort of Chinese leaders in nursing in China in the 1920s through the 1940s. Some of them took over the leadership from the missionary nurses who started the modern nursing in China. The leadership expectations upon the Chinese nurse had always been emphasized at PUMC. “In addition to a good education, the student must have good health, high ideals, and enthusiasm and a capacity for leadership. Upon the Chinese nurse of the future rests the task of conserving the health of the nation.”¹⁷

Chinese nursing leaders began to replace the foreigners in China in the 1920s. After the breakout of the Sino-Japanese War and then later during WWII, nurses from the West went back to serve in the US and Europe. Many others worked for the American Red Cross, which diminished the supply of foreign nurses even further. Another strong driving force for the leadership transition came in 1935, when the government of the Republic of China ordered that Chinese nurses be the principals of the nursing schools, which was one of the requirements for school registration by the government. Lin (Class of 1926, SON PUMC) who led the Nurses’ Association of China from 1936 to 1942 wrote, “They (government) feel that Chinese nurses should begin to stand on their own feet and not be ‘babied’ any longer” (Lin, 8).

“Before modern nursing practice was introduced, the care of the sick in China was the responsibilities of family members or servants. Traditionally, it was not acceptable for females to take care of the male patients, because of the convention of no physical contact between men and women; women were not supposed to touch a man's body other than their husbands. This is one of the reasons why few

nursing training schools of the first period recruited female nurses. In the fourth meeting of the Nurses Association of China held in Foochow in 1918, the issue that women could not care for male patients was specifically discussed, and it was resolved that a foreign female nurse accompanied a Chinese women nurse to practice nursing in the male wards. This was a revolutionary historical breakthrough for the modern nursing profession in China.”¹⁸

The first generation of Chinese nursing leaders was prepared for this transition; they were pushed to leadership, as in the case with Nie and Zhou Meiyu. They were the best representatives of nursing leaders, engaged in public health. They were more interested in people and China’s national needs, and they already showed their leadership during their study at school. Zhou Meiyu who was the “mother of military nursing in China”; Vera Nie Yuchan (Class of 1927), Lin Sixin (Evelyn), Xu Ai-chu and many others were active members in student organizations. Some of the graduates of PUMC served as heads at the health departments of the National Government in the 1920s and the 1930s.

Living through the leadership transition from foreign missionary nurses to American nurses to Chinese women, Chinese nursing leaders became more confident in their positions. They became more ambitious to lead China’s nursing. As Lin wrote, “We are glad that our government is now taking an interest in its development and has begun to realize that nursing is a real profession. I hope that in the years to come nursing in our country will advance more and more and stand high in the professional world” (Lin, 8).

Conclusion

Nursing is a very demanding profession for women, for its practice requires them to be strong physically, intellectually, and emotionally. In the past century, modern nursing has been shaped by the dramatic changes of the Chinese society. At the same time, nursing has been shaping and influencing the Chinese perception on women's role in the society, and contributed to uplifting the social status of women in China. In its over 100 years of history in China, the passion,

dedication, leadership, endurance and hard work of the foreign and the Chinese nurses made history (Jiang, 22).

The public health nursing program in China coincided with the contemporary development of public health nursing in the US. Shaped by the American model from its beginning, but it was revised and strongly influenced by the founder's own vision, the individual's ambition and conceptualization of public health. Grant's public health ambition would have been never possible without the support from public health nursing.

Language is very important in the transnational flow of knowledge. The first generation of Chinese nursing leaders was very proficient in English. This bilingual advantage made new knowledge accessible to them and made them open to new ideas, and to becoming involved in international academic and professional societies.

While missionary medicine was characterized by the one-way flow of medical professionals - from the West to China - under the auspice of medical philanthropy of the Rockefeller Foundation, the flow of medical professionals and professionalism was both ways. The foundation selected and sent American nurses coming and working in their institution in China, and Chinese nurses were sponsored to go to the US and Europe for fellowship training.

The transnational education program, such as the one at PUMC, allowed American nurses to experiment and develop their leadership; it also cultivated and prepared Chinese nursing leaders through education and serving in the urban and rural public health programs. These nurses combined preventive with curative medicine and made a difference in the emergence of an innovative public health model in the world. They led in the crisis of wartime, started military nursing, led on the Japanese-occupied campus independently and courageously, and resumed the school in "free China". They realized and exercised their potential as women leaders.

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 - ⁷ Greene, Houghton, 1924-25, China Medical Board, Inc. Records, Box 66, Folder 465, Rockefeller Archive Center, Sleepy Hollow, NY
 - ⁸ Gertrude E. Hodgman, “School of Nursing Peiping Union Medical College”, *Methods and Problems of Medical Education*, The Rockefeller Foundation, New York, 1932, File no. 616, PUMC Archive, Peking Union Medical College, Beijing, China.
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 - ¹⁰ *The History of Peking Union Medical College (1917-1987)*. Beijing Science and Technology Press; 1987. p.133.
 - ¹¹ File no. 618, PUMC archive, Peking Union Medical College, Beijing, China
 - ¹² *PUMC’s Talent Cultivating Road*, PUMC Press, 2001, p. 439.
 - ¹³ China Medical Board, Inc. Records, Box 99, Folder 711, Rockefeller Archive Center, Sleepy Hollow, NY
 - ¹⁴ Mary E. Ferguson Papers, Series 4, Box 3, Folder 32, Rockefeller Archive Center, Sleepy Hollow, NY.
 - ¹⁵ *PUMC’s Talent Cultivating Road*, PUMC Press, 2001, p. 419.
 - ¹⁶ John Z. Bowers, *Western Medicine in a Chinese Palace: Peking Union Medical College, 1917-1951*. The Josiah Macy Jr. Foundation, 1972, p.208.
 - ¹⁷ China Medical Board, Inc. Records, Box 99, Folder 711, Rockefeller Archive Center, Sleepy Hollow, NY
 - ¹⁸ Jiang Yuhong, “Shaping Modern Nursing Development in China before 1949”, *International Journal of Nursing Sciences*, 4 (2017), p. 20.