WESTERN MEDICINE IN A CHINESE CULTURAL SETTING

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SUMMARY

Hong Kong’s unique medical heritage stems from its development as a city with a predominantly Chinese population and a long history of exposure to the influence of Western cultural and scientific ideas and practices. This heritage is preserved and displayed in the Hong Kong Museum of Medical Sciences, where exhibits of both Traditional Chinese Medicine and Western medicine, particularly those aspects with special relevance to Hong Kong, are featured. This paper also describes the significance of the plague outbreak of 1894 in shaping Hong Kong’s medical history, and in bringing about the existence of the building which houses the museum, a 100 year-old protected monument originally named the Bacteriological Institute. The museum’s role in society, by providing programmes on health and heritage for the public’s education and enjoyment, and the need to preserve and identify both tangible and intangible aspects of our cultural heritage is also briefly explored.

Introduction: Hong Kong’s unique Medical Heritage

When British troops, with British merchants close on their heels, first landed in Hong Kong in 1841 to claim the island as their own, few would have anticipated the development of ‘this barren rock’ into its present-day position as “Asia’s World City”. The coexistence, and especially, intermingling of two peoples with radically different cultures on the same piece of Chinese soil had been strenuously resisted by the imperial rulers of the Ching Dynasty.
right up to that moment. Even after the ratification of the Treaty of Nanking in 1843, making Hong Kong an official British colony, there was little effort made by the colonial government to interfere in the life and affairs of the Chinese inhabitants. Such meagre effort as existed included provision of a highly restricted health care service, limited to those employed by the Government, the destitute and prison inmates. There was no attempt at decent standards of sanitation for the great majority of the population. It was of course a well-known fact that the Chinese preferred to seek the services of Traditional Chinese Medicine (TCM) practitioners for their ailments. Nevertheless, interaction between the populations representing the two cultures was inevitable in the course of the city’s development as a trading centre, which required a truly collaborative and symbiotic approach involving the two peoples in the conduct of its affairs. This progressed only on a moderate scale until a crisis of epidemic proportions provided a catalyst for the rapid acceleration of this process; the event was the outbreak of bubonic plague in 1894.

The plague first broke out in the densely populated Chinese residential district of Taipingshan where rows and rows of tenement buildings built back to back had been partitioned and repartitioned, let and sub-let to an ever increasing population of Chinese labourers who had come to find work in the thriving port. In these dwellings, there was no provision of running water, drains or latrines. Windows were few, but there were large numbers of domestic animals, including pigs kept under the beds, and rats galore! It was a situation waiting for something like the plague to descend upon it.

The colony’s first Medical Officer of Health, in his maiden report for 1895, had this to say:

*The population of the city, both European and Asiatic, may be estimated at 176,000 consisting of Chinese 167,000 and non-Chinese 8,500.....which gives an average density of population of 300 persons per acre, which is*
six times the average density of population of London, and is another evidence of that terrible overcrowding, which is largely responsible for the high death-rate and for such uncontrollable outbreaks of disease, as that which swept over the Colony during 1894.

This outbreak was a turning point in the history of medicine in Hong Kong. The Government was forced to re-examine the need to provide basic items of sanitation, isolation facilities for patients with infectious disease and access to proper diagnosis and treatment along the lines of Western medicine for the Chinese population. It also led to the appointment of a medical officer of health, a full-time Government Bacteriologist, and to the existence of a purpose-built public health and medical laboratory named the Bacteriological Institute. This was located within the rebuilt Taipingshan district, and is the same building which now houses the Hong Kong Museum of Medical Sciences (HKMMS).

In time, Hong Kong was to develop a sophisticated, publicly funded and highly accessible health care service along Western scientific lines, as well as a well-organized public health system for disease control and prevention. This system has stood the territory in good stead in facing threats such as that from cholera in the 1960’s, avian flu in the 1990’s and SARS in 2003. Nevertheless, even though the Chinese population today has full trust in, and depends heavily on the availability of a government-funded medical service along “Western” lines, the TCM practitioners have never completely lost their patronage. They have continued to provide their services alongside the “Western” practitioner. In 1999, the passing of a Chinese Medicine Ordinance meant that TCM practitioners received official recognition, and formal programmes for their education and training are now provided by several local universities.

One of the important objectives of the Museum is to bring to life the unique medical heritage of Hong Kong through its interpretive
displays, its thematic exhibitions, its research and publications, and the continued exploration of the interface between traditional Chinese medicine and Western scientific medicine.

The Museum however, also has a broader educational mandate, as an institution that provides opportunity for the public to learn about health and medicine in the current context, and indeed to look also to the future with excitement and hope.

Special programmes for school groups have been planned with the collaboration of teachers from Hong Kong’s primary and secondary schools, and the Museum’s herbal garden is a practicum site for the students from the School of Chinese Medicine of the University of Hong Kong. The Museum’s educational role, amongst others, will be further explored below.
A Private Museum with a Public Role

Unlike the majority of Hong Kong’s museums which are run by the Government Leisure and Cultural Services Department and supported almost entirely from the public purse, or museums which are associated with major institutions like the universities and other large organizations, the HKMMS is a private museum managed by a non-government and non-profit organization, the Hong Kong Museum of Medical Sciences Society.

This private status must also be an exception among medical museums worldwide, and unfortunately, Hong Kong has yet to develop a policy for providing government grants to privately managed museums to benefit the wider public.

Needless to say this status brings with it both advantages and disadvantages. One advantage is the freedom from bureaucratic constraints and the ability to promote participation from the community in determining the policy and the operation of the museum.

Its obvious disadvantage is that the Museum relies almost entirely on donations for its survival, with no government assistance other than the provision of the building, a 100 year-old public monument, at a nominal rent, the landlord assuming responsibility only for the maintenance of the structure and external fabric of the monument.

Despite these limitations, the HKMMS Society has adhered to its mission to operate a museum for the public, and over the past 12 years of operation since its official opening in 1996, has received more than 1500 donated artefacts, organized 20 thematic exhibitions, and welcomed over a quarter of a million visitors, the majority of whom are school children.

Major Themes Displayed in The Museum

The Museum displays a mixture of artefacts and exhibits relating to both Traditional Chinese Medicine (TCM) and Western medicine.
Foremost amongst the former is a recreation of a Chinese herb-
alist shop, with its cabinets divided into many drawers for the large
variety of Chinese herbal medicines. Related equipment on display includes a large chopper for slicing the stems and roots of herbal plants, a foot-operated grinder, a tradi-
tional mortar and pestle, as well as the small hand-held balance (steelyard) for weighing herbs according to the prescription of the TCM practitioner.
Another room is devoted to the comparison between TCM and Western medicine both in theory and practice; instruments for acupuncture and moxibustion and for bone setting are also on display. This room also presents the history of the Tung Wah Hospital, which
was the first Chinese hospital opened in Hong Kong in 1872, originally offering only TCM treatment. Display panels tell the story of how it changed after the 1894 plague outbreak to providing both TCM and Western Medicine according to the patient’s choice, and later in the 1930’s to providing only Western medicine for in-patients, whilst retaining both for its outpatients. Properly interpreted, this room can stimulate reflection on how the two approaches to medicine can be complementary rather than antagonistic, and how this process is reflected in Hong Kong’s history. The most important displays for Western medicine revolve around the work which was carried out in the Bacteriological Institute to safeguard the health of the population, in disease surveillance, diagnosis and prevention through the production of vaccines. Life-size models of a buffalo calf tied to an original calf-table and of laboratory workers inoculating it with cowpox for vaccine production against smallpox is a popular attraction for visitors of all ages. To visiting groups, we tell the story of the conquest of smallpox worldwide through use of vaccination, a story that can fire the imagination of young visitors to the possibilities offered by scientific medicine. A second model shows another very important activity carried out at the beginning of the 20th century for disease surveillance, the dissection of rats collected from various localities in the city to diagnose the occurrence of rat plague, with a view to taking preventive measures to curb its spread to humans in those places where the incidence of rat plague (or the related flea count) is shown to rise. Equipment for the examination of water from the reservoirs for potability is also displayed, as are other laboratory equipment used for diagnosis. Visitors learn that protecting the health of a community requires vigilance, and cannot be taken for granted. Another category of displays include those that show items of special relevance to Hong Kong, such as equipment developed locally for
Fig. 3 - Life-sized models of a buffalo calf and laboratory workers preparing Cowpox vaccine, an example of the work done in the Bacteriological Institute

Fig. 4 - A group of school children listening to the explanation of using rat dissection (in this model, performed by students of the Hong Kong College of Medicine for Chinese) for the purpose of plague surveillance
straightening of the spine by Halo-pelvic traction (most commonly applied to sufferers of tuberculosis of the spine causing kyphosis), and X-rays and plaster models of bound feet, a crippling social custom applied to young girls in China and Hong Kong up till the early 20th century.
Fortunately, both conditions are no longer seen in Hong Kong. Photographs with narratives show the discovery of the cause of plague in Hong Kong by Yersin and Kitasato during the 1894 outbreak. One of the galleries, an open verandah, looks out onto the historic Taipingshan area which had to be demolished, re-designed and rebuilt after the plague outbreak. Together with the photographs and illustrations of the original crowded living conditions before the outbreak of plague on display, the message of how far we have progressed since those days is brought vividly into perspective. Also on display are photographs and medical equipment showing the development of pioneering local institutions that provided health care in the 19th century for the Chinese population, and the early training of nurses and midwives (the Alice Memorial and affiliated Hospitals), as well as the first medical school providing Western medical education to Chinese using the English language, and employing a systematic five-year curriculum, (the Hong Kong College of Medicine for Chinese). Other exhibits introduce prominent local personalities who played a key role in the development of medicine and medical education.

In addition to these permanent displays there are also thematic exhibitions. For example, in 2008, the year of the Beijing Olympics, a special exhibition on ‘Sports and Health’ was prepared to bring this important topic to the attention of the public. This exhibition was one of the few to receive government sponsorship for its setting up and for visits from school children, although a huge amount of work was also provided by specialist volunteers. The exhibition was planned to move to different venues over the course of the year.

Finally, the museum building itself, as Hong Kong’s first purpose-built public health and medical laboratory, and one of its rare well-preserved one-hundred year old monuments, is of great historical, architectural and cultural interest. Built in 1905 in the Edwardian style, using both local as well as imported materials, it has two
stories and a basement which now houses 12 galleries, a library and a lecture theatre. The museum grounds have also been developed to show a large collection of local plants which have medicinal uses in TCM, arranged in nine different themed areas, which are both visually appealing as well as instructive to look at. The whole museum complex allows visitors to enjoy the attractive surroundings as well as the comprehensive displays.

Assessing the Role of the Medical Museum in Society

This question is not only of academic interest to the HKMMS Society, but is also an intensely relevant topic because of our reliance on grants and donor support for the very survival of the Museum. In the
early years, our exhibits tended to present what the medical profession found interesting, or where the organizers were able to show significant achievements in (since the organizers of the exhibitions were often volunteers associated with one of the medical specialty societies or colleges). Our displayed objects were of necessity those that had been donated to us, or could be lent to us, since our financial situation did not allow us to purchase items from collectors. More recently, the HKMMS Society has had to do some earnest soul-searching to be able to articulate its raison d'être, to map its directions, and to demonstrate how it can contribute to the society of which it is part. Donors and sponsors have become increasingly discerning, and need to be convinced as to why we are worthy of their support amongst many competing claims on their philanthropy. Hence, to be more focused, to plan our research and initiate projects which are consistent with and contribute to our stated mission has become urgent tasks.

As appropriately described by the founding President of the Medical Museums Association in the United States, the mission and purpose of medical museums traditionally have been as ‘resources for teaching the history of medicine; as a resource for historical research; and as interpreters of the medical past for the general public’. However, if taken too narrowly, this purpose for a medical museum may limit its usefulness to a selected group, mainly within the academic institutions, and unless it is funded and supported by an academic institution, it may be difficult to sustain. How do we convince the general public that any city or any society needs a medical museum, or at the very least, some public facility that performs the role of a medical museum? Even more traditional museums, for example, those showing artistic collections and cultural objects, are also feeling the pressure, if they have to rely mainly on public funding. Cultural enrichment is a desirable object as an ideal, and should be made available to all members of society, but institutions such as
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museums and art galleries can be seen to cater mainly for the privileged, in a world increasingly troubled by the problems arising from the widening gap between the haves and the have-nots. Museums everywhere have to work hard at demonstrating their relevance to the needs of society across a wide spectrum. Science museums may have the advantage of being practical and down-to-earth, but they also need to demonstrate their ‘value for money’ to obtain public or private support. Conversely, it may be even more difficult for them to find major sponsors as they may not have the advantage of showing ancient, rare, creative, impelling or highly valuable items that fire the imagination and attracts the visitors. So what about a museum of medical science, what can it offer? The International Council of Museums (ICOM) defines a museum as follows:

A museum is a non-profit, permanent institution in the service of society and its development, open to the public, which acquires, conserves, researches, communicates and exhibits the tangible and intangible heritage of humanity and its environment for the purposes of education, study and enjoyment.

Using this definition, a museum of medical sciences such as ours certainly meets the criteria, and therefore fully justifies its existence alongside any other type of museum. The two key roles of providing education and enjoyment for the public describe clearly how we serve our society. Considering its educational role, what more useful education can a museum provide than showing others how to stay healthy? And health can be presented both as a personal quest as well as a societal issue, together with its historical background. Museums can bring this message across in a dynamic way because they can use so many different formats for their exhibits, including using their collections of artefacts (tangible heritage) to arouse interest and promote interaction with the public. In consid-
erding the intangible heritage of our community, the HKMMS can also make a special contribution.

A UNESCO position paper provides an overview on the role of museums in safeguarding intangible cultural heritage, defined as ‘the practices, representations, expressions, as well as the knowledge and skills, that communities, groups and, in some cases, individuals recognise as part of their cultural heritage’. This is something that Hong Kong, in common with many other places, is finally beginning to acknowledge as worthy of preserving. A museum is not only a place for preserving tangible objects, but can also safeguard and interpret to the public those intangible items that help to define a community; it may even be something that the community itself needs help in identifying. Consequently, intangible cultural heritage covers much more than just a list of common items such as folk festivals, rituals or languages.

As the HKMMS is a relatively young museum, its work in this area of research and preserving our intangible heritage is only just beginning. A start has been made in research into those unique aspects of medical history in Hong Kong that can reveal more of the character of the place and its people (see for example the items listed in the General Bibliography). There is no doubt that Hong Kong has always been a Chinese city, albeit a Chinese city with a unique history where for more than 150 years it was under British rule. To identify the unique cultural heritage of Hong Kong, we need to see how its historical role as a meeting point of East and West has shaped its culture, its development, its people, its systems and its institutions. Learning how ‘Western’ medicine came to earn the confidence of and be fully accepted by the Chinese population, and conversely how Chinese culture, including traditional Chinese medical approaches to health and disease, came to influence and is still influencing the practice of ‘Western’ medicine, is a vast area of study. Besides, in studying the history of medicine of any locality, one is inevitably confronted by
the social factors that shaped that history, and in many instances, the characteristics of that society can be more fully understood through the study of its medical history. Hence medical history becomes not just a purely academic subject; it is also a springboard to assist the public in understanding the defining features of a complex society such as Hong Kong. The challenge for us now is how to present this story in a way that is both enlightening and interesting, integrating the two dominant themes of health and heritage.

Conclusions
In Summary, the unique role of the Hong Kong Museum of Medical Sciences lies not only in it being a place where people of all ages and from all corners of the globe can learn from its displays, exhibits and publications about health and how to stay healthy; it is also a place where they can enjoy walking through a rare and well-preserved historical monument that has played an important role in Hong Kong’s fight against disease, reminding them that health cannot be taken for granted. Perhaps more importantly, it should be a place which preserves, and helps visitors to appreciate, both the tangible and intangible aspects of the unique cultural heritage that identifies Hong Kong as a meeting place for East and West.

BIBLIOGRAPHY AND NOTES

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