

A Pacifist's Point: William Warder Cadbury, His Mission in Canton, and Public Health Initiatives 1909–1937

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William Warder Cadbury (sitting, right), his wife Catherine J. Cadbury (sitting, left), their three daughters Jane, Emma, and Kit (standing), and Lei 'Jimmy' Ip Nung in William's lap.¹

¹ 'Cadbury, William Warder' *The American Context of China's Christian Colleges and Schools* Created 2002 / Updated 2014, Middletown: Wesleyan University, available from: http://divinity-adhoc.library.yale.edu/ChinaCollegesProject/Haverford/bios/cadbury_william.html [accessed 4th October 2016].

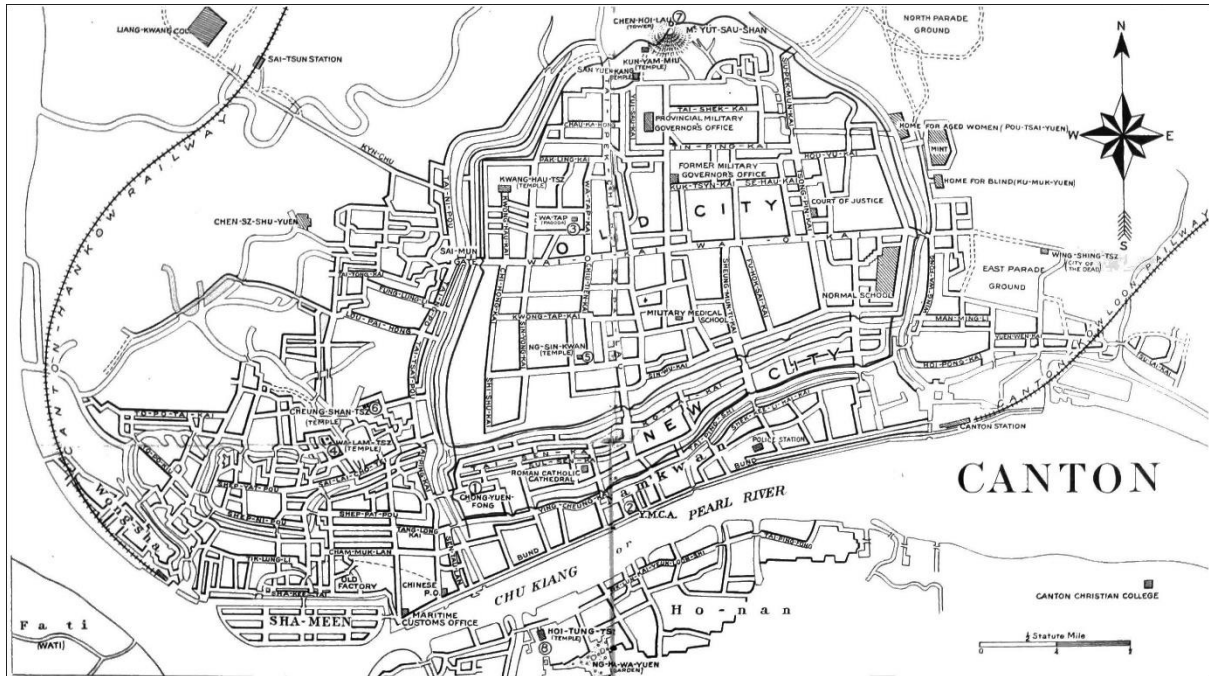


Fig 1. A 1920 US Navy Map of Canton. Note Canton Christian College (Lingnan University) in the South-East Corner.²

Introduction

William Warder Cadbury (1877–1959) was a Quaker Medical Missionary who preached and worked in Canton on and off from 1909 to 1949. Over the forty years which he spent in Southern China, Cadbury worked to help the Cantonese around him as he thought he best could. It was however, a ministry filled with apparent contradictions. A devout Quaker, he came from a movement that had for most of its existence eschewed all missionaries or anything that too closely resembled clergy. An avowed pacifist and healer, he nevertheless

² *Canton, China* (United States: Bureau of Navigation, 1920), n.p.

supported the militarist Guomindang for most of his time in Canton, and adopted the son of one of their generals. Cadbury enjoyed a great deal of independence to follow his own projects, but he also carried out a lot of his work through institutions such as the Canton Christian College (Lingnan University) and the Canton Hospital. The life and work of William Warder Cadbury makes for an interesting case study into the role of medical missionaries in Republican China. An analysis of his work has implications for the way we see medical missionaries as conduits for western science and as contributors to Chinese modernity.

Cadbury has received very little scholarly attention since his death in 1959. The most significant secondary source on Cadbury is Gary Restaino's biographical article in *Quaker History*. Restaino emphasises Cadbury's role not necessarily as a medical missionary as such, but as an independent physician. He repeats Cadbury's own quote that his purpose was to 'institute in Canton instruction in medical science according to the practice of modern civilization, and incidentally the promotion of Christianity, as way may open.'³ I would argue that this is very similar to how many medical missionaries proper saw their work in their mission fields, and it is still accurate to call him a medical missionary. However Cadbury wasn't as dogmatic or forceful about his evangelising as some medical missionaries have been accused of being. As the above quote shows, healing was very much the primary objective of Cadbury's mission. Restaino also argues that Cadbury's unaffiliated status allowed him to pursue independent projects whilst still using Canton Hospital and Lingnan University as bases of knowledge and support.⁴ For Cadbury, the mission was very much a

³ Gary M. Restaino, 'Quaker in Canton: Dr. William Warder Cadbury's Mission, *Quaker History* 83, no. 1 (Spring 1994), p. 1.

⁴ *Ibid.*, p. 15.

personal one as he tried to do what he could to alleviate suffering in what was a time of great upheaval for China and Canton.

Restaino also charts Cadbury's relationship with the Guomindang over time. Cadbury had always been close to the militaristic Guomindang, something strange for a pacifist such as himself. Part of this came from a hope that the Christian Chian Kai-Shek would allow Christianity to flourish within the Chinese Republic. However, by the time that the Japanese had invaded Canton in 1938 Cadbury went from this hopeful and tentative support to an even greater deal of commitment. Cadbury advocated for a full-scale defensive war against Japanese aggression, so long as it remained defensive.⁵ While it's not as though Cadbury himself joined in the fighting, his support for the Chungking government did not waver throughout the war. After the end of the war however, Cadbury would completely change his mind in response to what he saw as Guomindang aggression against the Communist Party and a frustrating inability to care for the people of Canton.⁶ Restaino's work is an important work in drawing attention to Cadbury and the many ways in which he was unique. His independence allowed him to do things other medical missionaries could not or would not, and the fact that he was one of the few Quaker medical missionaries, let alone missionaries to China, makes him an important part of Quaker history in general. However, Restaino doesn't go into great detail about Cadbury's work in public health or its implications for Republican China. This thesis will focus upon these aspects of Cadbury's work.

⁵ Ibid., p. 9.

⁶ Ibid., p. 13.

In the past twenty years much work has been done in the study of medical missionaries. Hardiman summarises what at the time was the current state of historiography in his 2006 compilation *Healing Bodies, Saving Souls*. He describes a spectrum of postcolonial positions on medical missionary work ranging from it being fully implicated in the colonial state in places such as the Congo, to a more idealistic view of missionaries subverting the state order in places such as South Africa.⁷ However he also notes that at the time very little work had been done on medical missionary efforts in Asia, particularly China and India. One example of a later work on Chinese medical missions is Zaccarini's presentation of how the Chinese received ideas of modern medicine. She presents medical missions as conduits of modern medicine that the Chinese interpreted through their own cultural lenses.⁸ Peter van der Veer argues that nineteenth-century missionaries literally converted the Indians and Chinese to modernity, if not Christianity.⁹ This paper will argue that in semi-colonial China Cadbury was not exactly an agent of cultural imperialism, but in the discussions around public health in early twentieth century China, we see Cadbury's participation in this argument as one supporter of a particular side. Cadbury was not a conduit of modernity when modernity had already come to China, but he did support a number of positions on what shape that modernity would take.

It was Cadbury's belief, along with many medical men at the time, that public health and hygiene were the best ways to prevent diseases from breaking out before curative medicine

⁷ David Hardiman, 'Introduction' in David Hardiman ed., *Healing Bodies, Saving Souls: Medical Missions in Asia and Africa*, (Amsterdam, New York: Rodopi, 2006), p. 8.

⁸ M. Christina Zaccarini, 'Modern Medicine in Twentieth-Century Jiangxi, Anhui, Fujian and Sichuan: Competition, Negotiation and Cooperation', *Social History of Medicine* 32, no. 2 (2009), p. 353.

⁹ Peter van der Veer, *The Spiritual and the Secular in China and India* (Princeton: Princeton University Press, 2014), p. 90.

would even be needed. Public health is characterised by Foucault as part of the ‘politics of health’, and something that requires the power of the state to implement and control.¹⁰ This made it difficult for an independent actor such as Cadbury to implement public health measures. He was forced to use more indirect means. This was further complicated by the fact that when Cadbury first arrived in Canton in 1909 many patients and practitioners were still using Chinese medicine. It was not taken for granted that public health based on scientific medicine was the best way to prevent diseases. Cadbury then, spent his time in Canton having to convince the Cantonese of the value of his particular kind of medicine and his particular kind of public health. While he was often successful in this regard, it meant that his attempts to implement public health were negotiated by the needs of the Chinese themselves.

In Ruth Rogaski’s work *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China*, Rogaski argues that imperialism brought the concept of weisheng – translated as hygienic modernity – to China. The fragmented nature of semi-colonial powers in China however, meant that it could never be completely implemented even in areas completely under their control.¹¹ After the boxer rebellion the Chinese began to adopt hygienic modernity as a public matter, and a number of moves that we associate with the modernising of China’s cities were undertaken as a result of efforts to make the cities more hygienic. The demolition of city walls, building of sewers, and introduction of running water

¹⁰ Michel Foucault, Richard A. Lynch trans., ‘The Politics of Health in the Eighteenth Century’ *Foucault Studies* no. 18 (October 2014), p. 115.

¹¹ Ruth Rogaski, *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China* (Berkeley: University of California Press, 2004), p. 223.

in Chinese cities were all justified through the principle of weisheng.¹² In his actions to support western medicine and public health in China Cadbury projected a particular kind of modernity that dovetailed with the hygienic modernity that he hoped all of China would adopt. As the debate around traditional Chinese medicine shows, this was by no means uncontested at the time. Sean Hsiang-Lin Lei argues that the role of public health and hygiene in the modern Chinese state, and what form this hygiene would take, was still a matter of debate in republican Canton. Practitioners of traditional Chinese medicine argued for an increasing role in the state medical system, whilst doctors committed to scientific medicine wanted to abandon it to focus on scientific medicine, which they saw as truly modern.¹³ In examining Cadbury's efforts to implement public health measures outside of Lingnan, we begin to map out his limitations as a non-state actor and foreign expert. We also see how he inserted himself into a debate about the future of a modern China.

In exploring Cadbury's attempts to implement his ideas on public health as they were negotiated by the needs of the Chinese we reveal two important things. The first is the level of power that Cadbury had within the institution of Lingnan, or as an academic, compared to within China at large. Cadbury was able to bring about the public health measures that he thought necessary much more easily and to a much greater extent than in Canton in general. At Lingnan University Cadbury could ensure a clean water supply, sewerage, malaria screens, and even conduct regular physicals for the staff of the College. He was also free to develop his research related to public health to any extent that he chose. Outside of

¹² Ibid. p. 193.

¹³ Sean Hsian-Lin Lei, *Neither Donkey Nor Horse: Medicine in the Struggle Over China's Modernity*, (Chicago, London: University of Chicago Press), p. 3.

this environment however, Cadbury had to persuade the Cantonese that his methods were going to be effective and work with those who already agreed with him. Mapping out the limitations of Cadbury during his mission to Canton then, will map out the limitations of an independent actor as he tries to implement methods usually left to the state. Cadbury, however was not alone in his opinions and was helped by the fact that Chinese intellectuals and reformists had been arguing the benefits of public health in greater and greater strength since at least the outbreak of the Manchurian plague. In examining the aspects of Cadbury's public health efforts that aligned with existing beliefs amongst some Chinese people at the time, we see the way in which, instead of simply transplanting an American medical system into the other side of the world, Cadbury placed himself with respect to a particular argument about the future of Chinese modernity.

Part of the limitations of this paper lie in the fact that I cannot read enough Chinese or Cantonese to use sources from early twentieth century Canton. As a result, the majority of my sources come from Cadbury's published works and correspondence. The scope of this paper also ends just before the outbreak of war between the Chinese Republic and Japanese Empire in 1937 for a number of reasons. Firstly, the war completely changed governance in Canton, especially after the Japanese occupation. Secondly, Cadbury's priorities completely changed after the Japanese invasion and he devoted himself to relief efforts for those affected by the war.¹⁴ To include the war and still focus on Cadbury's public health efforts then, would not particularly add much.

¹⁴ Restaino, 'Quaker in Canton', p. 10.

This paper will broadly be divided into two parts. The first part will be semi-biographical. The purpose of this is to outline Cadbury as a historical figure. Chapter 1 will briefly outline the life of Cadbury and his career through America and China. Studying the work of a specific person over almost thirty years in Canton will require us to get to grips with the chronology and major events of his life. The other important thing to establish is the traditions of Quakerism and medical missionaries in whose footsteps Cadbury followed. The synergy between these two traditions lent itself to Cadbury's independent practice as a doctor once in Canton. It also informed many of Cadbury's beliefs on other issues. The final thing that we will deal with in Chapter 1 is the history of Lingnan University, of which Cadbury was college physician. Cadbury's history interacts with the history of Lingnan in many ways, and for the forty years in which he worked in Canton he always remained with the college.

Chapter 2 will deal with the core beliefs that we can draw out of the writings of Cadbury. Firstly it will deal with Cadbury's medical beliefs, key to which are ambiguous roles in the discourses of scientific and colonial medicine, a belief in the superiority of western scientific medicine to traditional Chinese medicine, and a belief in the importance of public health. It was, of course, the latter which fuelled many of the efforts that I will examine afterwards, but the former two also played a significant role. I will also outline Cadbury's religious writings, in which we see concerns about the superstition of the Chinese giving way to concerns about the apathy and atheism of the Chinese. The varying degrees to which Cadbury's beliefs aligned with the beliefs of people in Canton shaped the course of his mission in Canton.

The second half of this paper will focus on Cadbury's actual attempts to implement public health. Chapter 3 will first concentrate on Cadbury's efforts within the academic world. In his position of College Physician of Lingnan University Cadbury was able to follow through on programs informed by the beliefs we outline in Chapter 2. He was able to set up the health infrastructure and the processes to ensure that Lingnan remained hygienic and free from disease as much as possible. Cadbury's power as college physician arose from the way that both Americans and Chinese viewed education and was by no means unlimited, but was sufficient to implement these measures. Chapter 3 also examines the contributions to public health that Cadbury made as a western academic in China. Cadbury formed a node in an intellectual network connected back to the mainland United States, as well as her colonies such as the Philippines. Free to pursue whatever research avenues he wished, Cadbury researched issues around public health to aid his programs in Canton.

Chapter 4 will examine the ways in which Cadbury tried to implement public health policy outside of the academy. With Lingnan located in Canton, the distinctions in Chapters 3 and 4 between an academic world and regular one are very much arbitrary. The reason I have made this division is the difference in Cadbury's authority, and thus his ability to implement his public health objectives. This forced Cadbury to work with those who did have authority, or establish it himself. The first way in which we will explore this is by analysing Cadbury's relationship with Lei Fuk Lam, a former bandit chief turned Guomindang General and governor Honam Island, where Lingnan University was based (see figure 1). Chapter 4 will outline Cadbury's relationship with the general and explain how through this relationship Cadbury was able to set up a hospital at Lingnan for the workers and local villagers. It was through this that Cadbury began to demonstrate the effectiveness of public health. It would

further develop during Cadbury's time as superintendent of Canton Hospital, which began in 1930. Cadbury would lead a number of public health measures as superintendent, such as using case workers, public health departments, and a model rural health service. It was Cadbury's hope that the latter would then be replicated throughout China, and eventually that Canton Hospital would be brought into the fold of the Nanking Government's expanding national health service.

Chapter 1: The Life and Times of Cadbury

To begin with in this paper I will outline a little about Cadbury's life and the philosophical bases that motivated him. A brief biography of Cadbury, particularly focusing on the time period which we are studying, will give all-important context to his actions. The same can be said for the religious traditions in which he followed. The two most important of these are that of the Society of Friends – more commonly known as Quakers – and the concepts behind medical missionary work in the nineteenth and twentieth centuries. As a Quaker medical missionary it is important to know not only what these ideas meant but how they interacted with each other. Finally, in this chapter we will also examine the history of Lingnan University and Cadbury's work with them.

Cadbury's Biography

Cadbury was born in Philadelphia on the 15th October 1877. He studied at a number of Quaker elementary and high schools until he graduated from William Penn Charter High School in 1894. From there, he went on to study at Haverford College.¹⁵ As the name of the former would suggest, both were schools steeped in Quaker traditions. Whilst studying at Haverford, Cadbury began to take courses in medicine, attend dissections at the University of Pennsylvania, and study under a doctor. Graduating from Haverford with an M.A., he proceeded to study medicine full-time at Penn State for another three years. After a brief

¹⁵ John F. Crosfield, *A History of the Cadbury Family* (Cambridge: Cambridge University Press, 1985), p. 245.

time as a postgraduate in the General Hospital in Vienna in 1906, Cadbury spent a few years working as a pathologist at St. Mary's Hospital, Philadelphia and then the Henry Phipps Institute in Philadelphia. In 1909 the University of Pennsylvania Y.M.C.A. sent a group of doctors and nurses to do medical missionary work in Canton, and Cadbury volunteered to join them. Cadbury's role was not strictly as a medical missionary, but as a physician and teacher. He would later reflect that his friends and relatives called him a fool when he first decided to go to China. At the time he had a perfectly good practice as a doctor and no particular reason to leave that behind. But he claims he 'felt a definite call to come to China for many reasons; one of these was to care for the sick.'¹⁶

Cadbury arrived in Canton in 1909 ready to do his medical work. He began to work as a teacher at the Hackett Medical School for Women and as a doctor independently. At the time the Hackett college was attached to Lingnan University as a medical college and associated with the Canton Hospital. In 1914 the staff of the college left for Shanghai after a dispute with the Lingnan leadership over attempts to unify them under a common creed. Despite this sectarian dispute within Lingnan, Cadbury decided that service was more important than any doctrine and elected to stay in Canton.¹⁷ In 1913 he also began to work as an Internist at the Canton Hospital. In 1923 he elected to leave them too, due to what he saw as the mismanagement of funds at the hospital. In that same year he also began to work with the Guomindang General Lei Fuk Lam to build his own hospital and dispensary at Lingnan. The hospital opened in 1924, and the year after Lei gave Cadbury one of his sons,

¹⁶ Ibid., p. 246.

¹⁷ Restaino, 'Quaker in Canton', p. 2.

Lei 'Jimmy' Ip Nung, for Cadbury to raise as his own. In 1926 Lingnan was forced to close after strikes and worker demonstrations all over Canton and in Lingnan in particular. The strikes in Lingnan were eventually put down by General Lei, but Cadbury left nevertheless as part of his missionary furlough. He spent 1927 and 1928 travelling throughout the United States and Europe, and in 1928 studied at the London Institute of Tropical Medicine. Many missionaries left China for good after this point, but Cadbury would return once the crisis was over. Over the next ten years he worked much as he did before, eventually becoming the superintendent of Canton Hospital in 1930. When the Japanese invaded China Cadbury coordinated red cross efforts in Canton and attempted to help the wounded as best he could. After the United States entered the war in 1942, Cadbury was interned by the Japanese. He returned back to the United States in 1943, briefly returning to Canton for the last time after the war's end. With the victory of the Chinese Communist Party after 1949, Cadbury was forced out of China once more. He died in the United States in 1959. Cadbury achieved many things throughout his life and, as we shall see, worked in line with his beliefs as a Quaker and Medical missionary.

Cadbury and Quakers and Medical Missionaries

First, we will take a look at Cadbury's Quaker identity. The Quakers are a religious movement founded after the English Civil War by George Fox. They developed a theology that stressed revelation from the Light of God rather than a focus on scripture.¹⁸ Quakers

¹⁸ John Punshon, *Portrait in Grey: A Short History of the Quakers*, (London: Quaker Home Service, 1984), p. 48.

also developed a number of stances that continue to this day, such as a refusal to have ministers, churches, or tithes to support them. They also took on a refusal to make oaths, which among other things precluded them from military service. A branch of the Quakers migrated over to what is today the United States when the Quaker William Penn was granted the territory that would become Pennsylvania. Pennsylvania, and Philadelphia in particular, thereafter became a centre for Quaker activity in the United States. It was into this centre that Cadbury was born.

The other important strand of Cadbury's identity is the role of the medical missionary. The goal of the medical missionary was to convert the local populace of their field to Christianity by first converting them to using western medicine. Particularly in Africa, it was thought that if the medical missionaries could demonstrate the superiority of their form of medicine, potential converts would abandon the traditional healing practices that also prevented them from converting to Christianity.¹⁹ The actual efficacy of such a theory is doubtful, but the important thing is that the missionaries believed it. The first medical missionary was Peter Parker, who inserted into Cadbury's mission field of Canton in 1834. His efforts to create the Canton hospital were in part influenced by Chinese hostility to Christian proselytising. Practicing Christian medicine however, was less frowned upon, and allowed Parker to spread his message without drawing the ire of the authorities.

Parker's legacy in particular is important for Cadbury because as superintendent of the Canton hospital himself, Cadbury would see himself following directly in these footsteps one hundred years later. Not only did Parker choose the medical aspect of his mission carefully

¹⁹ Hardiman, 'Introduction' in *Healing Bodies, Saving Souls*, p. 48.

to suit the Chinese context, but he also selected his medical methods as well. Parker had no doubt that Chinese medicine was capable of curing internal diseases. What it lacked however, was any understanding of surgery. Confucian mores prohibited dissection, and doctors saw little value in what dead bodies looked like regardless. As a result, traditional Chinese medicine had little understanding of human anatomy or any interest in surgery, and so Parker decided to focus his efforts on surgery.²⁰ Because his position in Canton was still quite precarious however, it was decided that he would particularly focus his efforts on eye surgery. Cataract surgery, whilst very different from the contemporary process, was simple, quick, beyond the skills of local doctors, and – perhaps most importantly – had a high survival rate compared to more invasive forms of surgery at the time. Parker’s survival rates were further helped along by a number of other factors. The Chinese prohibition of dissection actually made the first Canton hospital more hygienic than many European hospitals. Furthermore, as a result of his precarious position, Parker’s own approach to medicine amongst the Chinese stressed patient consent and only performing surgery when the chance of success was at its greatest.²¹ The result was a successful medical mission, especially in terms of actual healing. It provided the model for other medical missionaries to do the same all over the world, and led to the foundation of the Medical Missionary Society in 1838, with Parker as one of the vice-presidents.²² There would be controversies around the medical missionary work, as initially it was felt that a medical missionary ought to be a

²⁰ Michael C. Lazich, ‘Seeking Souls Through the Eyes of the Blind’ in David Hardiman ed., *Healing Bodies, Saving Souls: Medical Missions in Asia and Africa* (Amsterdam, New York: Rodopi, 2006), p. 69.

²¹ Michelle Renshaw, ‘Saving Missionary Skins Saves Patients’ Lives: The Role of the Political and Legal Environment on Medical Outcomes’, *Social Sciences and Missions* 27 (2014), p. 54.

²² Lazich, ‘Seeking Souls Through the Eyes of the Blind’, p. 79.

cleric first and a doctor second. However, by the time Cadbury travelled to Canton it was considered normal to focus largely on medical work. By 1910, there were approximately 450 medical missionaries operating in China.²³

What is interesting about the religious and philosophical traditions upon which Cadbury drew in his work is the synergy between them. Quakerism had always had an uneasy relationship with evangelising their religion. For a long time, they preferred to spread their message through example instead of preaching. The simple reason for this was that evangelism implies missionaries, which implies clergy, which – as mentioned – is something that the Quakers wanted to avoid as a matter of principle. However, by the time Cadbury set off to Canton, the role of the medical missionary had shifted definitively to that of one that practiced medicine first and preached the gospel second. This would have left Cadbury in a much more comfortable position, as he went primarily as a doctor to heal the sick. A modern perspective may wonder how Cadbury fit his religious faith with his belief in medical science. However, in the beginning of the twentieth century when some sects turned to fundamentalism in the face of apparent attacks by science, the Quakers mostly turned to liberal protestant approaches that were more open to secular influences.²⁴

Pamela Klassen describes liberal protestants as ‘agents of medicalisation’ in modern societies.²⁵ It would seem that Cadbury fits perfectly into this model. There’s no evidence that Cadbury followed some of the more liberal trends of liberal Protestantism. He never countenanced incorporating Chinese medicine into his thought as some did, but he certainly

²³ Zaccarini, ‘Modern Medicine in Twentieth-Century Jiangxi, Anhui, Fujian and Sichuan’, p. 338.

²⁴ Punshon, *Portrait in Grey*, p. 208.

²⁵ Pamela E. Klassen, *Spirits of Protestantism: Medicine, Healing, and Liberal Christianity*, (Berkeley: University of California Press, 2011), p. xi.

embraced its medicalisation. From the middle of the nineteenth century the Quakers had also begun to relax their position somewhat on missionaries, particularly in Philadelphia. Cadbury's income largely came from an independent fund set up in his name that consisted of many members from his monthly meeting in Philadelphia. This indicates a degree of both moral and material support for Cadbury's mission from a movement that had previously rejected formal missionary work.

The dual influences of Cadbury's mission to Canton created a unique status for him. As Restaino has argued, Cadbury's position as an independently funded Quaker doctor gave him the freedom to act with more independence than a missionary as part of a larger denomination might have done. Cadbury's decision to stay in Canton rather than move to Shanghai in 1914 is a good example of this. He also established an independent practice outside of Lingnan or Canton hospital, and in general moved freely between a number of different philanthropic ventures in Canton. Other missionaries as part of more tightly controlled institutions, such as the Catholic Church or the China Inland Mission, may not have been able to make these decisions as he did. Unaffiliated missionaries were not unknown in China before Cadbury arrived, but they were usually from Pentecostal sects. Without the financial and logistical support that larger missionary institutions could provide, many such missions failed.²⁶ Cadbury's success as an independent missionary from a relatively small protestant sect stems from his involvement with the institutions of Lingnan University and Canton Hospital. Both would have provided salaries to supplement Cadbury's

²⁶ R. G. Tiedemann, 'Protestant Missionaries' in R. G. Tiedemann ed., *Handbook of Christianity in China* (Leiden, Boston: Brill, 2010), p. 541.

support fund, and in the case of Lingnan also provided him with accommodation in the form of William Penn Lodge. Cadbury's position in Canton involved a balance between his personal beliefs and the institutions which gave him further resources to achieve his goals, but the result seems to have been a far greater freedom than many missionaries in China would have enjoyed. It is this freedom that enabled him to undertake a number of public health projects during his time in Canton, with varying methods and degrees of success that this paper will investigate.

Cadbury and Lingnan University

Lingnan University was founded in 1888 by Reverend Dr. A. P. Happer on the model of the American College in Beirut.²⁷ The stated goal of the College was to 'raise up educated men to be Christian ministers, teachers and physicians, as well as for every other calling in life, by teaching western science, medicine and religion.'²⁸ In order to do so they replicated the structure of an American Liberal Arts College in China, with a board of Trustees in New York to manage funds and personnel, whilst a Board of Directors remained in China to handle the day-to-day affairs of the college. The site was chosen to be on Honam Island, Canton, partly as a result of a petition from a number of Cantonese officials. Classes began in Canton in 1894 and a name of Canton Christian College decided in 1903. The name was changed in 1926 to Lingnan University. 'Lingnan' refers broadly to the region of Guangdong and

²⁷ Charles Hodge Corbett, *Lingnan University: A Short History Based Primarily on the Records of the University's American Trustees* (New York, Trustees of Lingnan University, 1963), p. 15.

²⁸ A. P. Happer, *Prospectus of a Christian College in China* (New York: Board of Trustees and the Board of Foreign Missions, 1886), p. 5.

Guangxi, and had been the Chinese name of the College for some time. It was formally adopted by the college in order to sound more Chinese and to better fit in with the government registration and control of private colleges such as Lingnan.²⁹ In 1927 a combination of strikes by the workers at the university and the Nanking incident – in which several foreigners were killed – led staff members to leave and the college to briefly close. However, the lead strikers were arrested as part of Chaing Kai-Shek's 1927 coup d'état and the trustees were determined to not remain closed for long, leading to classes resuming later in the year.³⁰ There was very little disturbance to the college in the Nanking Decade of 1927–1937.

In her book *Managing God's Higher Learning: U.S.-China Cultural Encounter and Canton Christian College (Lingnan University), 1888–1952*, Dong Wang characterises Lingnan as an inherently cross-cultural space. Happer and the later directors of the College did not simply transplant an American Liberal college into Canton and have it remain in a bubble. Both the Chinese and Americans influenced each other in the creation of the college. Furthermore, rather than confrontation and clashes, Wang focuses upon accommodation and integration as the key features of Lingnan.³¹ It is into this history of accommodation and cross-cultural encounters that we can place Cadbury. Cadbury worked for the college as a teacher since he arrived in Canton from 1909 onwards and after 1914 onwards held the position of College physician. As we will see later, the college gave Cadbury many opportunities in his public

²⁹ Corbett, *Lingnan University*, pp. 106, 107. For the sake of consistency and simplicity I will refer to Lingnan University as 'Lingnan' or 'the College' throughout this paper, even though before 1926 Cadbury and everybody else around him would have only known it as Canton Christian College.

³⁰ *Ibid.*, pp. 109–112.

³¹ Dong Wang, *Managing God's Higher Learning: U.S.-China Cultural Encounter and Canton Christian College (Lingnan University), 1888–1952*, (London: Lexington Books, 2007), p. 5.

health work. We can thus place his public health work in the same tradition of cooperation, accommodation, and cross-cultural encounter.

Conclusion

The traditions of the Quaker movement and Medical missionary efforts intersected in the ideological base of Cadbury's beliefs to result in a great degree of freedom for Cadbury's mission in Canton. Combined with the support from Lingnan University Cadbury experienced as its college Physician, this gave Cadbury the ability to support a wide range of projects. Cadbury's more specific beliefs however, drove him to concentrate specifically on public health, and it is these beliefs that we will examine in the next chapter.

Chapter 2: Cadbury's beliefs

In this chapter we will outline which of Cadbury's beliefs that we can surmise from his writings. It is these that motivated the efforts we see in the following chapters, but it was also the intersections between his beliefs and the beliefs of various groups in Canton that made his efforts possible. If Cadbury had encountered more resistance in his mission, it would have taken a very different shape. This chapter addresses Cadbury's beliefs on medicine and his beliefs on religion. It will deal with each in turn. As a medical missionary, this is an arbitrary distinction for Cadbury, but each involves different ways of writing and thinking that are useful for us to analyse separately. Within medical writing, we will first examine the imperialist aspects of his medical and scientific work, and the degree to which we see Chinese agency within them. Following this we will examine his optimism about the ability of scientific medicine in general and public health in particular to keep people healthy. Finally, we will deal with Cadbury's arguments against traditional Chinese medicine. For his missionary work, we will deal with how Cadbury transitioned from condemning idolatrous superstition to indifferent atheism, and the degree to which this aligned with Guomindang beliefs.

Cadbury the Scientific Doctor

Much ink has been spilled criticising western missionary projects as acts of medical and cultural imperialism. However, in recent years scholars such as Ryan Dunch have turned to a more nuanced approach that emphasises agency and encounter rather than a

straightforward power structure imposing its whole self on a helpless Other.³² It is tempting to see Cadbury's work in Canton in only the former light. For one thing, Cadbury fully participated in discourses that dehumanised his patients. For another, his research interests were keenly relevant to the interests of empire. There's no evidence to suggest that Cadbury wanted to infringe upon China's sovereignty in any way, but the way he thought fit into the viewpoint of those who might have. However, if we want to emphasise indigenous agency in this situation we need to consider the role and opinions of the Chinese themselves.

Foucauldian criticism of western medicine often centres on the nature of the medical discourse. Western medical discourse often objectifies the patient, reducing them to a set of organs and body parts. It has a tendency to focus on a specific pathology within the patient, compared to more traditional forms of medicine which consider the patient as a whole.³³ It also expresses power over the patient and opens them to surveillance as the patient is prodded, examined, and closely questioned in processes that they don't necessarily understand.³⁴ In colonial contexts this could intersect with other dehumanising discourses about indigenous people. Medical missionaries did not always adopt these discourses uncritically. Some missionaries have also been critical of colonial positions, often standing for humanitarian interests within empire.³⁵ For Cadbury, this is further complicated by the

³² Ryan Dunch, 'Beyond Cultural Imperialism: Cultural Theory, Christian Missions, and Global Modernity,' *History and Theory* 41, no. 3 (October 2002), p. 325.

³³ Ruiping Fan, 'Modern Western Science as a Standard for Traditional Chinese Medicine: A Critical Appraisal,' *The Journal of Law, Medicine & Ethics* 31, no. 2 (Summer 2003), p. 213.

³⁴ Deborah Lupton, *Medicine as Culture: Illness, Disease and the Body* (London: Thousand Oaks, 2012), p. 24

³⁵ Andrew Porter, 'An Overview, 1700–1914', Norman Etherington ed., *Missions and Empire*, (Oxford: Oxford University Press, 2005), p. 61.

fact that China is only thought to be a 'semi-colony', and the work he did was predicated on Chinese acceptance.

Cadbury's medical writings show a wholehearted adoption of medical discourses. Case studies that he submitted to the *Journal of the American Medical Association* for example, bear all the hallmarks of this discourse. One case history reads: 'CASE 2. (Hospital No. 17-440). -History.-T.C., a Chinaman, aged 30 years, was admitted to the Canton Hospital, May 14, 1917, complaining of edema [sic] of the lower limbs and abdomen. Previous history is not relevant.'³⁶ Thus is the life of 'T.C.' summed up for the readers of the journal. This is quite common of all medical writing at the time. Lacking any secondary writings about T.C. – Cadbury rarely discussed his patients in his correspondence, for example – it is difficult to approach him from a different angle that might allow us to re-humanise him. We must remember, however, that the fact that he presented himself for treatment demonstrates far more agency that we might glean from any of his writings. Patients are always active subjects in their own treatments. 'Healer-hopping' – the movement of patients from one doctor to another, often wildly different, in the hopes of a cure – is a common example of how they express this.³⁷ In 1918 there would have been no shortage of traditional Chinese doctors with their own treatments for T.C.'s condition, although Cadbury may have been much cheaper. At the time when it was rumoured that medical missionaries took the organs

³⁶William W. Cadbury, M.D., 'Death Following the Administration of Theocin', *Journal of the American Medical Association* 70, no. 1, (January 1918), p. 19.

³⁷Waltraud Ernst, 'Beyond East and West. From the History of Colonial Medicine to a Social History of Medicine(s) in South Asia' *Social History of Medicine* 20, no. 3 (November 2007), p. 518.

of their patients.³⁸ T.C.'s agency lies in the fact that he chose to present himself for treatment, even when it was generally a move made by the desperate.

Another way by which Cadbury contributed to medical knowledge was through his research. Unlike his case studies, which were direct reports of a particular patient, Cadbury's research dealt with a specific question. Colonial medical research before and during Cadbury's time in Canton often centred around questions of race, tropical medicine, and hygiene. A lot of Cadbury's research addressed these issues. 'The Blood Pressure of Normal Cantonese Students' for example, is an investigation by Cadbury into one of the ways in which the Cantonese supposedly differed from the European. The concept of 'blood' has been symbolically tied to racial identity for hundreds of years, even before the discovery of genetic inheritance and DNA, and particularly in the United States where the meanings of blood have been used to regulate racial relations.³⁹ On a more particular level, the supposed cardiovascular features of a particular race have also been used to justify racial hierarchies in the United States. Arguments were made, for example, that Africans had a reduced lung capacity, and therefore less vigour, and therefore ought to be commanded by white men with more vitality.⁴⁰ In trying to establish a blood pressure benchmark for the Cantonese then, what looks to be a simple act of statistical information-gathering becomes something saturated with meaning. Cadbury's study is predicated on racist concepts that in most cases lead to racist conclusions.

³⁸ Zaccarini, 'Modern Medicine in Twentieth-Century Jiangxi, Anhui, Fujian and Sichuan', p. 340.

³⁹ Kim Tallbear, *Native American DNA*, (Minneapolis: University of Minnesota Press, 2013), p. 48

⁴⁰ Lundy Braun, *Breathing Race Into the Machine: the Surprising Career of the Spirometer from Plantation to Genetics* (Minneapolis: University of Minnesota Press, 2014), p. 41.

Cadbury's study concludes that on average the Cantonese has a lower systolic and diastolic blood pressure than the European by about twenty to thirty millimetres of mercury.⁴¹ Given the previous ways that blood was used to carry racial meaning in the United States, Cadbury could have easily argued that this lowered blood pressure is an inherent feature of the Cantonese that leads to a reduced vigour. Cadbury however, discounts such a theory on the grounds that he observed no 'lack of vigor [sic] or dynamic force' amongst his students.⁴² He concludes instead that the difference in blood pressure is instead largely due to the climate of Canton. In order to support his theory that the climate of Canton leads to a reduced blood pressure, Cadbury cited a study of the blood pressure of American men in the Philippines, who on average experienced lower blood pressure the longer they stayed.⁴³ Anderson argues that colonial hygiene projects in the American Philippines led to a much more fluid view of racial categories and differences than in earlier examples of western empire. Natives were classed racially, but these distinctions intersected with the distinction between hygienic and unhygienic.⁴⁴ They were also given a status of conditional citizenship provided they became suitably hygienic. It could be that Cadbury was affected by such a view in his study. As students at the college, Cadbury's sample for his study met a number of standards of hygienic modernity and education, which may have helped his conclusion that their race had nothing to do with it. Regardless of his reasons, Cadbury's blood pressure

⁴¹Wm W. Cadbury, M. D., 'The Blood Pressure of Normal Cantonese Students', *Archives of Internal Medicine* 30, no. 3 (September 1922), pp. 375, 376.

⁴²*Ibid.*, p. 376.

⁴³*Ibid.*, pp. 370, 371.

⁴⁴Warwick Anderson, *Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Phillipines* (Quezon City: Ateneo de Manila University Press, 2007), p. 6.

study perfectly highlights an example of racialism without racism, and where Cadbury used the mechanisms of colonial science to subvert some of its conclusions.

Cadbury's scientific and medical studies contain discourses that have been criticised by scholars for their involvement in imperial systems of domination. However, a study of Cadbury's writings shows that in the case of his medical work he couldn't deploy these discourses to their fullest extent, while in the case of his racial scientific studies, he instead chose not to.

Cadbury on Medicine

Cadbury's writings *on* medicine, rather than a specific medical issue in of itself, are characterised by an optimism in the power of scientific medicine to cure ills compared with a belief that traditional Chinese medicine was largely useless. Another research article that Cadbury produced was his 'Analysis of the Health of a Missionary Community in South China During a Period of Thirteen Years', published in the *China Medical Journal*. In it, Cadbury uses data collected from his time as College Physician of Lingnan to assert the ability of scientific medicine to keep westerners healthy in the colonies. This was a key concern of colonial science in general and tropical medicine in particular ever since the first stages of European empire. Western doctors and medical men gradually went from optimism over the ability of the white man to acclimatise to the tropics, to pessimistic views of the tropics as a death sentence, to renewed confidence in the ability of hygiene to make the tropics

safe by the twentieth century.⁴⁵ Tropical diseases, it was thought, could be controlled if the vectors of microbial disease could only be suppressed. Cadbury's 'Analysis' fits perfectly into this final stage. In a number of tables Cadbury compares the death and disease rates of staff at the college with other communities in China and the United States. In this, the college compares quite favourably, with low rates of both compared to others. Cadbury cites the use of screens in college buildings, a good water supply and sewerage system in the college, and regular physicals before and during a staff member's time at the college as to why their health was better.⁴⁶ Cadbury concludes that: 'with the application of the principles of sanitation, European and American men and women, either single or married may live in excellent health in the tropics. They may bear healthy children, whose health with compare very favourably [sic] with that of children living in the temperate zone.'⁴⁷ As for the purpose of such a study, Cadbury makes the benefits clear when he writes that 'health in the tropics is a question that is continually demanding more attention because of the steadily increasing tide of invasion of the white man into the torrid zone.'⁴⁸ It's understandable that Cadbury's chief concern would be other missionaries, but what is interesting is the way he speaks of it as an 'invasion'. He seems to be using it in a positive sense. This is somewhat strange for a pacifist Quaker, his other writings indicate that Cadbury's idea of invasion was something peaceful and medical.

⁴⁵Laurence Monnais and Hans Pols, 'Health and Diseases in the Colonies: Medicine in the Age of Empire' in Robert Aldrich and Kirsten McKenzie eds., *The Routledge History of Western Empires* (London, New York: Routledge, 2016). p. 646.

⁴⁶Wm W. Cadbury, M. D., 'An Analysis of the Health of a Missionary Community in South China During a Period of Thirteen Years', *The China Medical Journal* 39, no. 8., (August 1925), p. 725.

⁴⁷Ibid., p. 743.

⁴⁸Ibid., p. 723.

Cadbury repeats his invasion narrative in one of his more significant works: *At the Point of a Lancet: One Hundred Years of the Canton Hospital 1835–1935* (1935). The work is a history of the Canton Hospital that he co-authored with his niece, Mary Hoxie Jones, whilst he was its superintendent. The book is largely based on quotes and statistics from the hospital records. This is understandable, given that as superintendent of the hospital Cadbury would have had easy access to these sorts of sources. Where Cadbury and Jones quote no source, it often seems to come from Cadbury's personal experience. In each of these forms of evidence however, there is a large degree of selection taking place. For example, Cadbury and Jones write that 'the years from 1922 to 1926 were perhaps the most active in the entire history of Pok Tsai [Canton Hospital].' They describe the staff as 'men well qualified in their profession and of deep Christian character.'⁴⁹ What they neglect to mention is how Cadbury had left the hospital for most of this time under somewhat acrimonious circumstances. In a letter to W. H. Grant, a trustee of the College, Cadbury wrote of the hospital that 'the Business administration there is such, now, that I should feel it necessary to withdraw for that reason alone, as a protest against such mismanagement of public funds.'⁵⁰ He goes on to urge Grant that Lingnan ought to create its own hospital now that cooperation with the Canton Hospital had failed. Nowhere do he or Jones mention this mismanagement in *Point of a Lancet*. In this self-editing we see Cadbury and Jones' desire to paint the Canton hospital in as positive a light as possible in their work.

⁴⁹William Warder Cadbury and Mary Hoxie Jones, *At the Point of a Lancet: One Hundred Years of the Canton Hospital 1835–1935* (Shanghai: Kelly and Walsh Limited, 1935), p. 231.

⁵⁰William Warder Cadbury, 'Mr. W. H. Grant.', *William Warder Cadbury and Catherine J. Cadbury Collection* 1192, box 6 (Haverford Library: January 10th 1923).

At the beginning of the book Cadbury and Jones say of Peter Parker – founder of the Canton Hospital – that he 'opened the gates of China at the point of a lancet when European cannon could not heave a single bar.'⁵¹ Cadbury and Jones repeat the quote on the final page, suggesting that doctors will always be willing to follow in the footsteps of Parker and 'open the gates of progress'.⁵² The quote on the 'point of a lancet' is originally from the American scholar and pastor E. R. Beadle, but the fact that Cadbury and Jones bookended their work with this particular quote highlights the way that Cadbury thought about his own work in Canton. The phrasing of the point of a lancet corresponds nicely with the militarist cliché of being at the 'tip of the spear', suggesting that Parker, and now Cadbury, were at the front lines of compassionate medical work instead of hostile military invasion. For a Quaker trying to bring Christianity and western medicine into China, a note of pride in the fact that the gates were opened through healing rather than at the barrel of a gun is unsurprising. The result however, is that it fits just as neatly into his invasion narrative on missionary work as his earlier 'Analysis'. The fact that Cadbury saw what he was doing as an invasion could suggest that he was here to take over the Chinese in an insidious medical imperialism. However, his metaphor of the 'gates of China' would demonstrate an awareness of the strength of Chinese culture compared to his personal efforts. His pride at the fact that these gates were opened by peaceful means also shows an approach that sees the Chinese as a people to be convinced and won over rather than an enemy to be defeated. This is not the perspective of a man in whose hands lie a great deal of power.

⁵¹Cadbury and Jones, *The Point of a Lancet*, p. 7.

⁵²*Ibid.*, p. 271.

We can see further evidence of Cadbury's optimism about scientific medicine in a paper in the *Lingnan Science Journal* titled 'Some Recent Advances in Medicine'. The *Lingnan Science Journal* was, as the title may suggest, a journal published by Lingnan University for the research efforts of its staff. It was published in English and often focused on the new species of plants and animals discovered in the course of its research. An entire section of each edition would be dedicated to newly-classified species mentioned in the journal. This, and the fact that I found most of the issues in storage at the University of Sydney library, would suggest that it was written for a western scientific audience as a way of bringing in scientific knowledge about China back into western intellectual networks. It could be argued that this then makes Cadbury reporting on developments in western medicine a kind of feedback loop. A number of the advances he cites are in areas of tropical medicine: sleeping sickness, malaria, and leprosy – which wasn't necessarily only confined to the tropics but had since been relegated to tropical medicine thanks to advances in the hygiene of European cities. Cadbury begins the article with a comment that 'a few months ago one of the men who taught me in medical school made the remark that during the last twenty-five years in practically every branch of the medical sciences there had come about a revolutionary change.'⁵³ The sense of optimism continues when he says, for example, of a new treatment for 'Pernicious Anemia' that 'the red blood cells rapidly increase in number and frequently complete recovery takes place in this one time fatal disease.'⁵⁴ While each section on these recent developments has its own message in the details about the developments themselves, the overall message of the article is clear: recent advances in western medicine

⁵³ Wm W. Cadbury, 'Some Recent Advances in Medicine' *Lingnan Science Journal* 8 (1929), p. 443.

⁵⁴ *Ibid.*

(because that is after all what Cadbury means by 'medicine') leave it even better predisposed to heal the sick.

A point that Cadbury repeated throughout most of his career was the superiority of western scientific medicine to Chinese medicine. He continually expressed his optimism in the ability of scientific medicine to heal the sick in greater and greater numbers whilst also dismissing Chinese medicine as largely superstitious nonsense. One area where we see such an attack on Chinese medicine is in *The Far Eastern Review*. Cadbury states that this article was written in response to 'speculation as to what is the status of Chinese medicine as it has existed and still exists' in the United States.⁵⁵ In it, he distinguishes between two kinds of Chinese medicine. The first is the 'purely superstitious form' practiced largely by Taoist priests and patronised by 'ignorant people, especially women'.⁵⁶ The second is medicine as Chinese doctors practise it. Cadbury notes that the two can often be so closely interwoven that it is difficult to draw a line between them. In regards to the superstitious form of Chinese medicine Cadbury explains the Chinese belief in duality and the human as a microcosm of the universe. He writes that:

'the priests explain these forces of the universe by personifications in the form of evil spirits or devils, and the people are kept in constant fear of these demons of the air which they believe are constantly bent on bringing disease or death. Hence the many superstitious practices resorted to for deceiving or warding off the evil spirits.'⁵⁷

⁵⁵William W. Cadbury, 'Medicine as Practised by the Chinese' *The Far-Eastern Review* 14 (July 1917), p. 352.

⁵⁶Ibid.

⁵⁷Ibid.

While Cadbury condemns this as superstition, 'proper' Chinese medicine isn't much better. Cadbury notes the Chinese aversion to dissection and autopsies and argues that, as a result, their ideas of anatomy and physiology are 'fanciful to the extreme.'⁵⁸ Chinese doctors use diagnostic methods – such as the elaborate process of measuring the pulse – that make no sense from a western medical perspective. Some of the remedies of Chinese medicine – largely based on drugs due to their lack of knowledge of anatomy – are made to sound ridiculous or downright dangerous. Some of the ones that Cadbury notes are the pouring of quicksilver into gunshot wounds, a laxative including ingredients such as sodium sulphate, and the application of a bisected rooster onto the patient's abdomen for liver problems.⁵⁹ Cadbury concludes by saying that:

'one is reminded of the old humoural theory of Europe in the Middle Ages. But modern education in China has brought a new light to the people and in all the large cities and many of the small ones, Western medicine is slowly but surely winning its way.'⁶⁰

In this article then, Cadbury challenges Chinese medicine on its ability to cure diseases, and portrays western medicine as inherently superior and inevitably winning the hearts and minds of the Chinese. This is a marked difference from Peter Parker's approach outlined in Chapter 1, who acknowledged the ability of Chinese medicine to cure diseases through drugs, but believed that western surgeons were far more advanced.

Further arguments against Chinese medicine appear in *At the Point of a Lancet*. Cadbury and Jones write that in the hospital's treatment of highly contagious diseases such as smallpox,

⁵⁸Ibid., p. 353

⁵⁹Ibid., p. 354.

⁶⁰Ibid.

typhoid, or meningitis 'the superiority of Western Medicine over the old Chinese practice was amply demonstrated. Most of the hospitals in Canton refuse to admit these cases.'⁶¹ Not only do Cadbury and Jones assert the ability of western medicine to deal with these highly contagious diseases, but they assume a moral high ground from the fact that Canton hospital will take these patients in when local practitioners would not. It also makes a statement on the ability of scientific medicine to deal with public health issues in a way that Chinese medicine was unable to.

This section has covered Cadbury speaking in numerous contexts of an 'invasion' into China and of opening up the gates of China at the point of a lancet. These are signs of, first, the degree to which Cadbury valued scientific medicine and thought the Chinese would benefit from it. Second, it is a sign of his commitment to peaceful persuasion of the Chinese rather than literal violent invasion. A subset of this was Cadbury's denunciation of traditional Chinese medicine. Cadbury also believed in the ability of public health based on scientific medicine to make the tropics healthy both for indigenous peoples and Europeans staying there.

It interesting that Cadbury's insistence of the superiority of western medicine came at a time when other missionaries were becoming more liberal in their approaches to Chinese 'superstitions' and Chinese medicine. Western doctors in general were also coming to view Chinese medicine in a more sympathetic light.⁶² More and more papers stressing the value of Chinese medicine were being written whilst Cadbury was still denouncing it. Part of this

⁶¹Cadbury and Jones, *At the Point of a Lancet*, p. 258.

⁶²Tao Feiya, 'The Medical Missionary's Changing Conceptions of Traditional Chinese Medicine' *Social Sciences and Missions* 25, (2012), p. 91.

could stem from Cadbury's position in Canton, a well-connected city that left him still very much attached to western intellectual networks. Whatever the case, this belief in the superiority of western medicine and the importance of public health defined Cadbury's work in Canton.

Cadbury on Religion

Religious writing was a key part of missionary output. Missionaries regularly sent reports back to their home countries on progress in their field, in part to ensure that support for their missions would remain forthcoming. Their tone can best be described as optimistic urgency: things were going well, but there was so much more to be done. As an interdenominational effort backed by no church in particular, Lingnan was heavily reliant on these sorts of writings to secure donations for its funding. As a Quaker backed by a fund in his name back in the United States, Cadbury was similarly reliant. In writing these texts Cadbury wrote about the Chinese he encountered in a way that was often dehumanising and dismissive of their superstitions. In many ways however, this writing was similar to the position of native Chinese groups such as the Guomindang. Where Cadbury and the Guomindang differ highlights the different motivations that they had in such dismissals and begins to map out the extent to which and areas where Cadbury's ideas aligned with the Guomindang.

A published letter from the Canton Christian College dated November 15th 1923 describes some of the 'interesting incidents' in Cadbury's life as a medical missionary.⁶³ He tells, for example, of a woman who came into the college dispensary with two children. He mentions that 'her husband, a soldier, was killed in a battle a year ago. His death was inevitable, she told us, because the older child, whom I attended at birth, came into the world feet first, and this is a sure indication of misfortune to follow.'⁶⁴ In another case he notes that a blind woman tells Cadbury that the spirit of her dead father was disturbed by her

'at eight years of age, she replied, her father died and as usual his tablet was placed in the ancestral hall. But for some reason the spirit of the deceased was constantly disturbed by that of this daughter and so in revenge it caused her eyes to become sore and on the day the tablet was set up in the temple she became blind.'⁶⁵

In none of these examples does Cadbury inform the reader of the course of treatment and how it went. Nor does he provide more details about the patient's identity than he would to a medical journal. The emphasis is instead on the superstition and idolatry of the Chinese populace to which he administered. Cadbury concludes this letter by saying that 'one thing that makes hard things seem easy is the loyal support of so many friends at home' and that 'I thank God that he has allowed me to do my bit here. Whether we give money or ourselves, it is all for the Master's Kingdom.'⁶⁶ This letter then, fits the typical message that we mentioned earlier: things are going well, I'm administering to the heathen, please give me money so I can keep doing this. The examples and aspects of Cadbury's patients that he

⁶³'Letter From Dr. W. W. Cadbury' *William Warder Cadbury and Catherine J. Cadbury Collection* 1192, box 6 (Haverford Library: XI 15th 1923).

⁶⁴*Ibid.*

⁶⁵*Ibid.*

⁶⁶*Ibid.*

then focuses on are all geared towards this message. What becomes excluded and dismissed as a result are the people to which Cadbury ministered.

A simple examination of Cadbury's attitude to Chinese belief then, reveals a somewhat contemptuous dismissal of it. This is accurate, but it is important to remember that the Chinese produced equally contemptuous dismissals in the same period. Compare, for example, what Cadbury wrote to a letter written for the *One Day in China* project. It describes incense burning day in Jiangsu and writes of those praying for healing that 'when they came to burn incense and beg forgiveness from the bodhisattva, they acted as though they themselves were the guilty parties.'⁶⁷ In this we see an equal dismissal of Chinese religions from a Chinese writer. Eliminating superstition was a large part of the Guomindang's modernising project. Most modernisers from the late Qing onwards had agreed that it was important to eliminate superstition, and view religion as merely one amongst a set of options for understanding the world. The vagueness around how to actually define superstition however, meant it was often a means rather than an end.⁶⁸ For Cadbury, anti-superstition rhetoric allowed him to gather support from his donation base back in the United States. For Chinese modernisers however, it came from a number of complex motivations, that included an attempt to replace religion with civic participation and create modern active citizens.⁶⁹ These two differing goals lead to a divergence in how Cadbury represented religion.

⁶⁷ Cheng Ji, 'The Temple Today', in Sherman Cochran, Andrew C. K. Hsieh, Janis Cochran eds., *One Day in China: May 21, 1936*, (New Haven: Yale University Press, 1983), p. 149.

⁶⁸ Rebecca Nedostup, *Superstitious Regimes: Religion and the Politics of Chinese Modernity* (Cambridge, MA: Harvard University Press, 2009), p. 18.

⁶⁹ *Ibid.*, p. 20.

In a later letter Cadbury marks a shift in the attitudes in the Chinese when he remarks

'no longer does the missionary fear so much the effects of idol worship and the opposition of the leaders of so-called heathen religions. Rather now he must strive to stem the tide of rationalism and indifference to all religion now sweeping over this land and in some cases carrying away the last vestiges of faith in God.'⁷⁰

Clearly the Chinese anti-superstition campaigns had worked too well in Cadbury's opinion.

The shift over the 1920s towards modernism in Canton and Guangdong province brought about numerous changes, some of them more under government control than others.⁷¹ Part of this was a growing anti-Christian movement. Lutz describes the anti-Christian movement as an evolution of earlier 19th century movements based on nationalist and anti-imperialist ideals rather than Confucian ones.⁷² The movement led to calls for missionary schools in China to secularise, and Lingnan largely complied with this whilst still retaining what Dong Wang calls a 'layer' of Christian presence.⁷³ Cadbury dismissed the Chinese for their secularism in this later account just as much as when he dismissed their attachment to superstition and idolatry. The circumstances have changed, but Cadbury's way of writing and thinking about the Chinese has not. What this shows is that Cadbury's opinions aligned with the Chinese to only a certain extent. This placed limits on Cadbury's power as a foreign medical missionary. The presence of Chinese mass movements against Christianity also helps explain why Cadbury pursued secular public health efforts, and also why they were

⁷⁰To Paul D. I. Maier', *William Warder Cadbury and Catherine J. Cadbury Collection* 1192, box 7 (Haverford Library: II 19th 1927).

⁷¹Michael Tsin, *Nation, Governance, and Modernity in China: Canton 1900–1927* (Stanford: Stanford University Press, 1999), p. 15.

⁷²Jessie G. Lutz, 'Chinese Nationalism and the Anti-Christian Campaigns of the 1920s' *Modern Asian Studies* 10, no. 3 (1976), p. 399

⁷³Wang, *Managing God's Higher Education*, p. 160.

supported in Canton. Divergence between Cadbury's position on religion and wider Chinese beliefs then, led to Cadbury's work being shaped by the particular needs of Canton.

Conclusion

Cadbury's positions were somewhat typical of a medical missionary at this point in time. His very mission was predicated on the idea that western scientific medicine was superior to the traditional medicine of China and that the Chinese must be converted to Christianity in order to save their souls. It was these beliefs that informed the public health efforts that we will examine in the rest of the paper. However it is also important to note that his beliefs were shared by Chinese modernisers, but only to an extent. It would have been a very unsuccessful mission indeed if nobody believed what Cadbury said, but as Cadbury's stance on Chinese religions show, his point of view was not always entirely accepted. This resulted in aid from Canton elites such as General Lei Fuk Lam, but aid that was negotiated based on their needs.

Chapter 3: Public Health Through Academia

In the previous chapter we established Cadbury's key beliefs. Of particular importance for Cadbury was a need for modern medicine, Christianity, and public health in China. In the next two chapters I will outline how he put this belief into practice both inside and outside of Lingnan. Within the confines of Lingnan University and the networked world of Western Academia, Cadbury was able to implement and support his public health goals to a much greater extent than outside. This chapter will first examine Cadbury's efforts for public health within the environment of Lingnan. Following this, it will examine his involvement with the Rockefeller foundation and how this affected both his research and public health work. Finally, we will examine the intellectual networks that he formed and how he used those towards his public health ends.

Dr Cadbury at Lingnan

In a later recollection republished in Crosfield's history of the Cadbury Family, Cadbury wrote of his first professional call in Canton in 1909 that: 'It was a typical case of bubonic plague – a rich lady – she lay unconscious and her fever was very high. Fortunately she recovered and my reputation was established! Thereupon I imposed a strict quarantine on all the Lingnan Students.'⁷⁴ The story of curing a wealthy patient to establish the reputation

⁷⁴ Cadbury, in John F. Crosfield, *A History of the Cadbury Family*, p. 246.

of the mission doctor is not a particularly new one. It reflects the anxieties of a missionary in an alien and sometimes dangerous field. More interesting than this single case of curative health however, is what Cadbury did to follow it up. Cadbury's first case meant that one of the first things he did upon taking up his role as college physician for Lingnan was quarantine the students. It's not clear to what degree the quarantine was successful. Access from Canton proper to Lingnan was largely by boat over the Pearl River (see figure 1), which would have been easy enough to control. However, a determined student could probably have walked elsewhere on Honam island and travelled to Canton that way. Cadbury's move to impose this quarantine however, indicates the power that he possessed, something very much dependent upon the unique nature of Lingnan and Cadbury's place within it.

As established in Chapter 1, Lingnan in its inception was modelled on the example of the American Liberal Arts college. In attempting to replicate this, it aimed to transform the students that passed through its doors in a similar fashion. This required a level of control over the students as they attempt to reform their minds and bodies. This transformative aspect of Lingnan dovetailed with already existing Chinese ideas about education transforming the individual's morality. By this point, Republican governments were emphasising a new civic morality in education rather than Confucian personal morality, which stressed the creation of citizens and allegiance to the state rather than the Emperor.⁷⁵ This push towards creating modern students also including efforts at creating hygienic students, sometimes led by student groups themselves.⁷⁶ Wang argues that

⁷⁵ Robert Culp, *Articulating Citizenship: Civic Education and Student Politics in Southeastern China, 1912–1940*, (Cambridge, MA: Harvard University Press, 2007), pp. 3, 4.

⁷⁶ *Ibid.*, p. 111.

Lingnan represents a cross-cultural space in Chinese-American history. Rather than an American University transplanted onto Chinese soil, the Lingnan administration made efforts to adapt themselves to the needs of their students and the Chinese population.⁷⁷ In this adaption we see the intersection of two ideas about the transformative nature of education that allowed Cadbury to impose the measures that he did. The College already imposed rules such as forbidding foul language, only speaking in English during the day, or exercising for at least one hour daily.⁷⁸ Cadbury's quarantine – as well as other public health measures such as malaria screens and modern sewage for the college – would have functioned as additional measures to this already existing system.

Through the power afforded to him as college physician of Lingnan then, Cadbury was able to arrive at something resembling the power of the state to impose public health. His focus lay largely on preventative medicine to ensure that the small, private community under his care remained healthy. The unique position of Lingnan as a cross-cultural space between America and China meant that there were multiple strands contributing to his ability to put these measures into practice.

Cadbury and the Rockefeller foundation

One major factor affecting Cadbury's work within Lingnan was his involvement in the Rockefeller foundation. The Rockefeller foundation was established from the wealth of John D. Rockefeller's Standard Oil Corporation. Its medical efforts were focused on bringing the

⁷⁷ Wang, *Managing God's Higher Learning*, pp. 6, 7.

⁷⁸ Corbett, *Lingnan University*, pp. 35, 55.

benefits of western medicine to the rest of the world. Within China specifically the Rockefeller foundation established the China Medical Board (CMB) to coordinate these efforts. The Peking Union Medical College (PUMC) was the flagship project of the CMB, and like the Jesuit missionaries before them the foundation aimed to use it to convert the elite so that they may then convert the lower classes. The difference was that it aimed at a conversion to scientific medicine and ignored any particular religious belief.⁷⁹ The other board that contributed to medical philanthropy in China was the International Health Board. The International Health Board spread its focus throughout the world and concentrated on the mass elimination of disease. This contrasted with the CMB's approach to public health, which focused on spreading curative efforts further through the population.⁸⁰ Under PUMC Professor of Health John Grant, for example, the Rockefeller Foundation set up a Health Demonstration Station in Peking to act as a model for rural clinics to be set up throughout China as part of a public health program.⁸¹ Cadbury would respond to both of these models of vertical disease elimination versus horizontal curative public health through his involvement with the Rockefeller foundation.

One of the key focuses of Rockefeller activity in China through the CMB and PUMC was in the secularisation of missionary medicine. The key criticism that Frederick T. Gates, founder of the China Medical Board, laid at the feet of medical missionaries was that they used their medical work as a means to an end, where it ought to be an end unto itself.⁸² This opinion

⁷⁹ Mary Brown Bullock, *The Oil Prince's Legacy: Rockefeller Philanthropy in China* (Washington D.C.: Woodrow Wilson Center, 2011), pp. 51, 52.

⁸⁰ *Ibid.*, p. 59.

⁸¹ *Ibid.*, p. 60.

⁸² John S. Black, 'Cracks in the Foundations: Frederick T. Gates, the Rockefeller Foundation, and the China Medical Board' *The Journal of the Gilded Age and the Progressive Era* 3, no. 1 (January 2004), p. 80.

was quickly suppressed so that the CMB did not appear to be a secular alternative to missionary medicine, but they still retained the goal of converting the Chinese to western science and the missionaries to a more secular approach rather than their focus on evangelisation. It might seem as though this goal of the scientific conversion of missionaries was met through Cadbury, with his belief in medical help first and foremost and conversion 'as way may open.' However, plenty of the evidence that has been previously covered about Cadbury's belief in scientific medicine and medical help as a priority came before his involvement with the foundation. It's far more likely that Cadbury's existing views on missionary medicine and science led to his work with the Rockefeller foundation, rather than the other way around.

For Cadbury, his involvement with the Rockefellers began with the International Health Board's China Hookworm Commission. The International Health Board's flagship project was the eradication of Hookworm disease (Uncinariasis) in order to demonstrate the value of scientific medicine.⁸³ Stuart argues that Hookworm prevention was first implemented in Australia and then Fiji because of the threat it was thought to pose to the economic prosperity and racial order of these colonies. Obviously a debilitating disease was a threat to plantation economies, but a parasite associated with dirt and faeces posed an ideological threat to white settler colonists in Queensland.⁸⁴ The natives of Fiji however, saw hookworm treatment through their own understandings of medicine and healing, leading to a hybridised approach by the Rockefeller commissioners.⁸⁵ The treatment of Hookworm,

⁸³ Annie Stuart, 'We are All Hybrid Here: The Rockefeller Foundation, Sylvester Lambert, and Health Work in the Colonial Pacific' *Health and History* 8, no. 1 (2006), p. 64.

⁸⁴ *Ibid.*, p. 63.

⁸⁵ *Ibid.*, p. 75.

supposedly a solely biological process, was filtered through the cultural needs of whatever society the Rockefeller foundation found itself in. The experiences that we can track through Cadbury are no different.

The Hookworm Commission in Canton set themselves up in a Lingnan building that Cadbury would later use for Lingnan Hospital.⁸⁶ They set about investigating hookworm incidences in various kinds of workers throughout Canton. Cadbury hints at cooperation between Lingnan and the Hookworm Commission in other works, noting that a Dr. Jeu 'gave much of his time to assisting in these studies', but doesn't mention any of his own involvement.⁸⁷ In 1924 Cadbury published his own study on the treatment of Hookworm with Carbon Tetrachloride in cooperation with other departments in the college and the Canton Hospital but makes no mention of the Hookworm commission.⁸⁸ However, there must have been some later interaction between Cadbury and the commission, since they prompted a revised paper on hookworm treatment. In it, Cadbury notes that it was 'suggested to the writer by Drs. W. W. Cort and N. R. Stoll [of the China Hookworm Commission] that a study be made of the effect of treatment in reducing the egg count in the stool of persons harboring [sic] hookworms.'⁸⁹ Whilst his previous paper was on the effectiveness and the issues behind a particular treatment for uncinariasis, Cadbury's later paper tests his earlier conclusions against a method of counting eggs in the stools of the patient in precise numbers, rather than the

⁸⁶ Wm W. Cadbury, *Ling Naam Hospital For the Care of College Workmen and Neighbouring Villagers*, (Canton: Knipp Memorial Press, 1925), p. 5.

⁸⁷ Ibid.

⁸⁸ Wm W. Cadbury, 'Carbon Tetrachloride in the Treatment of Uncinariasis' *American Journal of Tropical Medicine and Hygiene* s1-4 no. 1 (January 1924), p. 16

⁸⁹ Wm. W. Cadbury, 'The Effect of Treatment of Persons Infected With Hookworm As Checked by Egg Counts' *Lingnaam Agricultural Review* 3, no. 2 (1926), p. 84.

more general test he used in 1924.⁹⁰ The presence of the Rockefeller Foundation in Canton then, had an impact on the way in which Cadbury went about his investigations, and allowed him to get more precise data from them. Western scientific men influencing each others' ideas through various networks is not particularly surprising in of itself. What is interesting however, is the separate purposes that they eventually developed. As we mentioned, the goal of the International Health Board was the eradication of diseases, and the information that the China Hookworm Commission gathered would have been used to this end. The purpose of Cadbury's papers however, was to track the effectiveness of a particular treatment method, which would have been more useful in his work as a medical missionary than in eliminating Uncinariasis altogether. Cadbury and the Hookworm commission then, used the same methods for different ends. This demonstrates one way in which he mediated the help which was offered to him to suit his own needs.

It is telling that Cadbury would later turn the headquarters of the China Hookworm commission in Canton – focused on the International Health Board's model of disease eradication – into a rural health clinic. This, and the fact that he used International Health Board methods to inform his approaches to curative health would shows Cadbury's preference for the CMB model of public health. The two positions were not necessarily mutually exclusive, but Cadbury showed far more interest in initiatives that allowed him to bring health to people en masse. It helps that small scale public health was close to what he was already doing as a medical missionary. Cadbury's interactions with the Rockefeller foundation clearly affected his own research, but it also led to the establishment of a

⁹⁰ Ibid, p. 64.

particular position within a particular debate about the role of public health within a western scientific and charitable context.

Sources and intellectual reference points

Another way in which Cadbury supported his public health efforts was through his work in western academia. With his medical training and position in Canton, Cadbury was well placed both physically and ideologically to contribute to wide-spanning academic network. As a large port city near the treaty ports of Hong Kong and Macao, Canton was connected to the western empires whilst still remaining a part of China. The sheer volume of correspondence from Lingnan back to her trustees in New York, or from Cadbury to friends back in the United States testifies to the connections between Hong Kong and Cadbury's home front. Through this regular contact and participation in intellectual networks, Cadbury was able to retain his membership in the American intellectual community whilst still working as a doctor in Canton.

In her work *Empire of Scholars* Pietsch mapped out the intellectual networks of the British empire as it expanded through the nineteenth and twentieth centuries. These networks were maintained through a combination of networks of communication and of physical movement that extended throughout empire. Universities throughout the colonies and British metropole exchanged journals, books and correspondence, but they also exchanged people. Hiring boards within Britain selected men (and it was usually men) to staff colonial universities whilst conferences, leaves-of-absence, and staff exchanges circulated academics

throughout the empire.⁹¹ The limits of these networks were often marked by the privileges of the colonial world, and only white men – mostly in settler colonies – were included in this.⁹² Native scholars from Africa and Asia were excluded. As an American scholar working in China, Cadbury was not included in the British academic networks that Pietsch describes. However, he stands as a node in an American intellectual network that spread throughout her own colonies at the time. Pietsch’s work is a useful model for understanding Cadbury’s own intellectual networks. Mapping out the entirety of the American academic networks at this time would be an interesting project in of itself (and way beyond the scope of this paper), but it would be useful to map out Cadbury’s personal networks when he used these to advance his public health and hygiene goals.

The first aspect of the sources that Cadbury read and wrote was their American focus. Many of the journals that Cadbury submitted to were American, be they the Quaker-specific *Friend* or medical journals such as the *Journal of the American Medical Association* and the *Archives of Internal Medicine*. On the other hand, we can see the American focus in what Cadbury read through, for example, a 1919 bulletin he wrote on the effects of Spanish Influenza in Canton. Primarily it deals with public health issues as it compares the spread of the disease in Canton to other places in the United States and China. In this paper, only two of the 26 academic sources that Cadbury references are not from the Journal of the American Medical Association.⁹³ Cadbury’s account of the spread of the disease largely

⁹¹ Tamson Pietsch, *Empire of Scholars: Universities, Networks, and the British Academic World 1850–1939* (Manchester, New York: Manchester University Press, 2013), p. 10.

⁹² Pietsch, *Empire of Scholars*, p. 6.

⁹³ William Warder Cadbury, *The 1918 Pandemic of Influenza in Canton, China* (Canton: Canton Christian College, 1919), p. 20.

deals with its European origins and spread to the United States. In an article about the spread of disease in Canton, Cadbury provides more detailed information in greater quantities on the spread of the Spanish Flu through America than he does in China.⁹⁴ He manages to provide a table of the progress in Hong Kong, but apart from that his information comes from the quotes of others and newspaper reports.⁹⁵ The fact that Cadbury had better information on what was happening on the other side of the world than in Hong Kong clearly shows the quality of information he had access to from the west compared to his local area. Within a year of the disease's passing through the United States Cadbury had detailed information about it from Canton. In 1919 this would have taken little more than a mailed subscription to the Journal of the American Medical Association, but the fact that he could receive this subscription places him within the same intellectual network as a subscriber in Boston, Portland, or overseas colonies such as Manila.

More significant than the fact that Cadbury could maintain his links to this intellectual network from Canton however, is the fact that he chose to. The detailed reference point for Cadbury's study of the Spanish flu is the United States and not Spain or England or anywhere else the pandemic might have spread to. His sources within China also mainly come from other westerners. The same academic networks that informed him of the progress of the disease in the United States could have just as easily have informed him of its progress in other countries with medical journals or a public health bureau. Instead he chose America, which isn't particularly surprising seeing as it's his homeland, but what this

⁹⁴ Ibid., pp. 3, 4.

⁹⁵ Ibid., pp. 6, 7.

and the sources he uses indicate is that Cadbury's intellectual centre of gravity whilst researching public health remained very much in the United States. The American public health tradition at places such as John Hopkins University was largely a laboratory-based model, as opposed to for example the community-based PUMC model.⁹⁶ However, as has already been demonstrated, Cadbury approached public health more through the PUMC model. Whilst Cadbury's intellectual centre of gravity remained with the United States then, he mediated the aid from it into something more useful to him as a medical missionary, just as he did with aid from the Rockefeller IHB.

Another text in which Cadbury dealt with public health through western academia is his 'Seasonal Incidence of Malaria on Honam Island, Canton', published in the *Lingnan Science Journal*. In his introduction to the paper Cadbury writes that 'it seemed desirable, therefore, after my return from London in the fall of 1928, and with the experience gained at the London School of Tropical Medicine and Hygiene, that I study the blood of all cases showing symptoms of malaria.'⁹⁷ We've already seen from his work with the Rockefeller foundation how Cadbury's work was affected by his implication with western networks. Cadbury spent six months of 1928 studying at the London School of Tropical Medicine and Hygiene while on furlough. It's not a particular surprise that he would have returned to Canton with new ideas. In his research Cadbury compared the incidences of malaria in Canton as determined by blood samples – so that it can't be confused with diseases resembling malaria – with the mean temperature and rainfall. Cadbury notes that other studies have been done in this

⁹⁶ Liping Bu, 'John B. Grant: Public Health and State Medicine' in Bridie Andrews, Mary Brown Bullock eds., *Medical Transitions in Twentieth-Century China* (Indiana: Indiana University Press), p. 215.

⁹⁷ Wm. W. Cadbury, 'Seasonal Incidence of Malaria on Honam Island, Canton', *Lingnan Science Journal* 14, no. 2 (April 1935), p. 241.

way in similar climates, but none on Canton or Southern China.⁹⁸ Just as in other tropical climates, Cadbury notes a correlation between the hottest months of the year and increases in malaria. Rainfall, on the other hand, doesn't seem to matter. He concludes that, like in these other places the low temperatures inhibit mosquitos, leading to an inhibition of the malaria.⁹⁹ On the face of it nothing particularly significant is happening here. Cadbury is doing Kuhnian 'normal science' within the previously existing paradigm of tropical medicine imbibed in London. His focus on climate, disease vectors, and the effects of hygiene all march in lock step with the ideas of tropical medicine and public health at the time. It also matches with the colonial concerns of Cadbury's writing that we explored in the previous chapter.

Typical views of colonial science then, would present Cadbury's paper on malaria as a feedback of new information from a semi-colonial site into the imperial metropole. However, Cadbury is not learning anything conceptually new in this study. He provides exact data to support the identification of mosquitos as disease vectors and the usefulness of anti-mosquito tactics to prevent it, but these were both things well accepted at the time by both the scientific community and Cadbury himself. In 1922, over ten years before his paper on malaria, Cadbury submitted an article to the *Chinese Recorder* on malaria, identifying the mosquito species anopheles as the disease vector and reporting that 'the successful prevention of malaria by directing the attack against the mosquito was fully demonstrated in the Panama Canal Zone, during the construction.'¹⁰⁰ By the time Cadbury wrote this

⁹⁸ Ibid., p. 243.

⁹⁹ Ibid., p. 248.

¹⁰⁰ Wm. W. Cadbury, M. D., 'Health Education. The Menace of Malaria' *Chinese Recorder* (January 1, 1922), p. 35.

paper, he already knew that mosquitos were a disease vector for malaria, and that malaria would therefore be more prevalent when the mosquitos were. While the idea of colonial laboratories reporting back to the metropole can certainly be a useful model, it's worth pointing out that if we're using Pietsch's model of academic networks that Pietsch herself – along with many other scholars – sees strict models of metropole centre and colonial periphery as too simplistic.¹⁰¹ Such an explanation then, fits neither the evidence, nor our model, nor recent scholarship. Perhaps a more convincing explanation comes from Peter Dear's argument that the purpose of such scientific networks was not to discover the novel but to establish 'uncontested normativity' within the scientific community.¹⁰² It may seem like a pointless exercise for Cadbury to confirm what by and large he already knew, but the data he acquired would not only have aided his public health efforts against malaria, but also his justifications in putting them into place.

Cadbury had a lot of freedom within an academic setting to research whatever he felt like researching. In both his reading and his original research however, he focused largely on public health issues and mediated the knowledge in those networks into a form that was useful to him as a medical missionary. Not only does this highlight his belief in the importance of public health, something that this paper has previously established, but it shows the way in which he used the academic networks which he was part of to support his actions in Canton.

¹⁰¹ Pietsch, *Empire of Scholars*, p. 8.

¹⁰² Peter Dear, 'Science is Dead; Long Live Science', *Osiris* 27, no. 1 (2012), p. 50.

Conclusion

As this chapter has demonstrated, Cadbury had a great degree of freedom and power within the academic world. Within the walls of Lingnan University he was able to institute the sort of control that public health requires on a state level. Cadbury utilised public health for private purposes within the context of an institution and ideas of education that allowed him to do so. Cadbury also advanced the cause of public health through his involvement with the intellectual networks that he maintained from Canton. His academic life and work with the Rockefeller foundation affected the way in which he went about his medical and research efforts, but he adapted the help they offered for his own ends. It was Cadbury's authority as College Physician that allowed him to institute public health measures in Lingnan. On the other hand, it was his independence as a physician and scientist that allowed him to pursue public health academically to whatever degree that he wished. Outside of the academy however, Cadbury would find himself much more limited, and it was here that he had to use other means to achieve his aims.

Chapter 4: Public Health Measures through the Lingnan and Canton Hospitals

In this chapter we will examine the ways in which Cadbury attempted to implement his public health goals through efforts outside the academy. It is here that we begin to map out the greater limitations of Cadbury's power within China. Public health typically requires a control over the public. It implies some form of state power in order to properly control the populace in the particular ways that its theories dictate. This usually implies a modern nation-state with the necessary control and state apparatus. From 1909 to 1937 Cadbury held no state position within the Qing Empire or, later, the Republic of China. Despite this, Cadbury still managed to implement some public health efforts. His efforts to do so were two-pronged. On the one hand, there were Cadbury's efforts to set up the apparatus of public health through the support of Canton elites. In particular, Cadbury relied on the friendship of General Lei Fuk Lam. This matches the way that Lingnan itself relied on the support of the Canton elites. On the other hand, there is also Cadbury's efforts within the institution of Canton Hospital. As Superintendent of the hospital from 1930 onwards, Cadbury was able to support its public health department and implement programs through the hospital. However, as a non-government charitable institution its power still had limits. The Qing Empire had been attempting to implement public health measures since at least the Manchurian Plague of 1902.¹⁰³ From that point on successive governments had

¹⁰³ Lei, *Neither Donkey Nor Horse*, p. 22.

attempted to implement public health measures, but a question remained as to the role that traditional Chinese medicine would play in modern China.

This chapter will first deal with Cadbury's efforts to create the Lingnan hospital with the help of the Guomindang General Lei Fuk Lam, and the relationship between the two. Following this I will examine the ways in which Cadbury achieved his public health goals as superintendent of the Canton Hospital, the debate around traditional Chinese medicine in early twentieth century China, and the ways in which Cadbury's efforts as superintendent interacted with this.

Cadbury and the Lingnan Hospital

The most important relationship amongst the Canton elite in the early twentieth century that Cadbury formed was with the General Lei Fuk Lam. Lei was a former bandit turned militarist who sided with the Guomindang after the 1911 revolution. He gained recognition as Governor of Honam Island and was the Mayor of Canton for a brief period in 1925. His troops helped put down a number of labor uprisings in 1926, particularly – for our purposes – the strike at Lingnan University that briefly shut it down.¹⁰⁴ Cadbury and Lei first met in 1919 when Cadbury treated one of Lei's sons and from then on treated a number of his family members and staff.¹⁰⁵ We have little more evidence of their interaction until the

¹⁰⁴ Corbett, *Lingnan University*, p. 112.

¹⁰⁵ Cadbury, *Ling Naam Hospital*, p. 5.

sequence of events that would see them open a hospital together, and Cadbury's eventual adoption of one of Lei's sons.

In 1923 Cadbury began to plan a hospital at Lingnan University for the local villagers and college workers. After speaking with the General about it, Cadbury received a sizable donation and a suggestion that Lei use his connections to secure more funds. The largest donor out of these was Dr. Sun Yat-sen himself. This proved to be a mutually beneficial arrangement for both the pacifist Doctor and the bandit turned general. For Cadbury it was, of course, a chance to expand his medical work. Cadbury noted the 'many cases of those about us relieved of suffering,' as well as 'whose suspicion of the College has been changed to friendship and goodwill.'¹⁰⁶ This also makes clear Cadbury's belief that the best way to convince the locals of Honam that the College and Cadbury had good intentions was to prove it through their actions. Cadbury also links this to the medical missionary's ultimate goal when he claims 'the gospel of the Good News is preached by deeds of service as well as by word, and thus evidence is given of its genuine value.'¹⁰⁷ Cadbury's emphasis on 'deeds of service' highlights the fact that the Lingnan Hospital served a similar purpose to the PUMC health demonstration station. Building the hospital however, also came at a time when Lingnan was buying up large tracts of land on Honam island in order to establish the Agricultural College. This generated a deal of distrust in the locals of Honam, the college leadership thought that by establishing a hospital they could prove their usefulness to the villagers in a tangible way. Cadbury himself would later write that the dispensary was first

¹⁰⁶Ibid., pp. 4, 5.

¹⁰⁷Ibid., p. 7.

set up to counteract 'suspicion and fear' in the local villagers over the College buying up farmland for the Lingnan Agricultural College.¹⁰⁸ The hospital also tied into the more general goals of Cadbury's mission: healing and conversion to Christianity.



Fig 2. Lingnan Hospital after its completion and opening.¹⁰⁹

The Lingnan Hospital would have served as a point of curative medicine for many of the local villagers and workmen, which fits the CMB model of spreading low-level care throughout the community discussed in the previous chapter.¹¹⁰ Lingnan was still a small hospital when it was completed, one that Cadbury planned to only be a dispensary before Lei became involved.¹¹¹ Figure 2 gives an idea of both its physical size and the number of patients that Cadbury and the staff of the hospital would have been able to admit into the wards. In this it fits in with the established medical missionary model. Dispensaries were often easy ways to demonstrate the power of the medical missionary to the locals at a cost

¹⁰⁸Ibid., p. 3.

¹⁰⁹ 'Village Hospital', *Yale University Library Digital Collections*, Yale University Library, available from: <<http://findit.library.yale.edu/catalog/digcoll:1461474>> [accessed 29th September 2016].

¹¹⁰ Bullock, *The Oil Prince's Legacy*, p. 59.

¹¹¹ Cadbury, *Ling Naam Hospital*, p. 4.

that they could actually afford. It fits then, into this Rockefeller model of demonstration health stations. With the help of Lei as a result of their close friendship, Cadbury was able to expand this station for demonstrating the value of Christian medicine and public health. As we will see in the next section, he would also further expand the Lingnan Hospital to further draw it into a public health network. For Cadbury then, the Lingnan hospital came out of the intersection of his personal goals as a medical missionary, the goals of Lingnan University to be of use to the local Chinese people, and eventually Cadbury's broader goals in public health.

For Lei, philanthropy was a significant way in which Chinese warlords maintained their legitimacy during the warlord period.¹¹² Just as the college was proving the benefits that it could bring to the local villagers, so too was Lei proving the benefits that came from his rule of Honam. The co-operation between both Lingnan University and Lei was emphasised in the opening ceremony of the hospital in 1924. As figure 3 shows, both the American Flag and the 'five race flag' of the Republic of China hung over the doors as Cadbury and Lei opened them together.

¹¹² Alfred H. Y. Lin, 'Warlord, Social Welfare and Philanthropy: The Case of Guangzhou Under Chen Jitang, 1929–1936', *Modern China* 30, no. 2, (April 2004), p. 156.



Fig 3. Lei (second left) and Cadbury (second right) opening the Lingnan Hospital.¹¹³

This joint opening emphasised the cooperation inherent in the project and the contribution that both parties had made. Lei's support for the Lingnan Hospital also came at a time when the government of Canton was rationalising and modernising the space and administration of the city. City walls were demolished, department stores built, and measures for the hygiene of the city implemented by a government bureau instead of the local police.¹¹⁴

These were all typical measures in many cities in republican China at the time. By supporting

¹¹³ 'General Lei Fuk Lam, Military Governor of Kwangtung Province, Opens the Door of the Lingnan Hospital' (1925), *China Christian Colleges and Universities Image Database* Created 2002, New Haven: Yale Divinity Library, available from: <<http://divdl.library.yale.edu/ydlchina/viewdetail.aspx?id=8223>> [accessed 14th August 2016].

¹¹⁴ Tsin, *Nation, Government, and Modernity*, pp. 57–64.

the Lingnan hospital, Lei was able to demonstrate his support for this program within the area that he had responsibility for.

The final reason contributing to Lei's support for the Lingnan hospital was the close relationship he had with, and the respect he held for, Doctor Cadbury. We can see the culmination of this a year after the hospital was opened when Lei gave Cadbury his third son, Lei Ip Nung, to raise as his own. At the time the boy was fourteen months old. Cadbury refers to the precedent of Kai T'sai in the adoption, a term he translates as 'godson', but he also notes that usually a Kai T'sai relationship has very little involvement from the 'godfather'.¹¹⁵ Normally it is used as a way to honour a close friend, but to intend Cadbury to actually raise Ip Nung was far more intense, and Cadbury notes that 'the whole occurrence was so new both to the Chinese as well as us.'¹¹⁶ A whole new ceremony was drawn up for the exchange, and as seen in figure 3, gifts exchanged between the two families.

¹¹⁵ William W. Cadbury, 'Dear Home Ones' Cadbury' *William Warder Cadbury and Catherine J. Cadbury Collection* 1192, box 7, folder 2 (Haverford Library: XI 4th 1925).

¹¹⁶ Ibid.

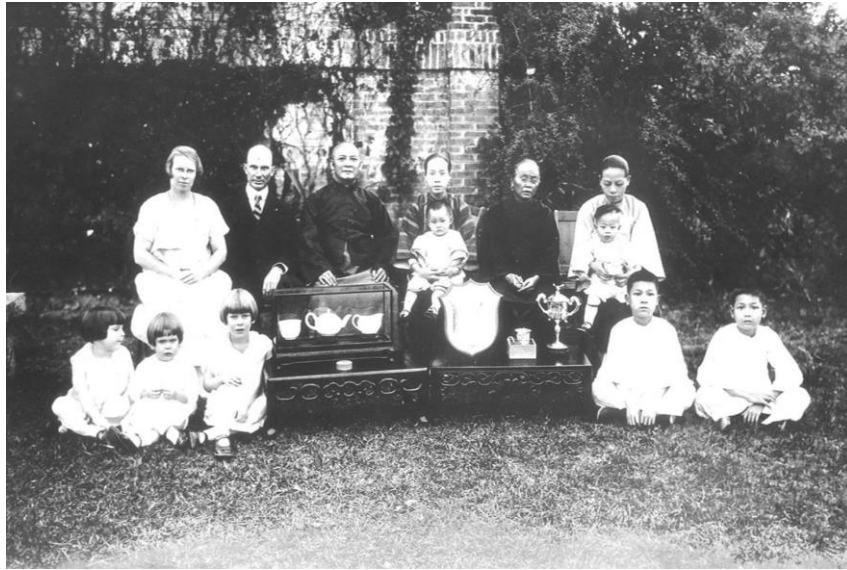


Fig 4. The Cadbury and Lei families at the ceremony for Lei 'Jimmy' Ip Nung. Top row: Catherine J. Cadbury (William's wife), William Warder Cadbury, Lei Fuk Lam and, sitting in a woman's lap: Lei Ip Nung. In front of them lie the gifts that the two families exchanged to mark the occasion: a fine china tea set and engraved shield for the Cadbury's, a silver cup from Cadbury to Ip Nung, and an engraved silver shield for the General.¹¹⁷

It could be argued that Lei might have had political motivations for this wholly new act.

Perhaps he gave his son to Cadbury to protect him from an increasingly volatile Canton. Lei was mayor of Canton at the time, and the Guomindang was attempting to both create a modern civic life and seize control of it. The process was unpredictable and not entirely under their control, and the years after the adoption were violent and volatile.¹¹⁸ Giving Ip Nung – named James or Jimmy by Cadbury – to the American doctor may have been a way to safeguard at least one of his sons at William Penn Lodge where he might be safe. If this were truly the plan, then it was at least partially successful. Cadbury did take Ip Nung with

¹¹⁷ 'Families of Dr. Cadbury and Lei Fuk Lam' (1926), *Yale University Library Digital Collections*, Yale University Library, available from: <<http://findit.library.yale.edu/catalog/digcoll:1606048>> [accessed 29th September 2016].

¹¹⁸ Tsin, *Nation, Government, and Modernity* p. 15.

him to the United States and England on his furlough in 1927.¹¹⁹ However there's little evidence beyond this that this was the real intention of giving the boy to Cadbury. On the other hand, Cadbury noted that General Lei wanted Ip Nung to be a physician like his adoptive father. He was however, in Cadbury's words, 'not an intellectual',¹²⁰ and eventually became an aeroplane mechanic. Not only did Lei want his son to follow in the professional footsteps of Cadbury, but also to an extent his moral example too.

According to Cadbury, in the speech Lei gave at the ceremony for Ip Nung's adoption he said: 'My Country China's ancient sage Confucius said: the friendship of true gentlemen depends on truth and righteousness, he also said that if you follow a man who has the truth then you will be able to correct your faults. These two sayings exactly express my feelings towards Dr. Cadbury.'¹²¹ Lei also said that he 'handed over my third son Ip Nung in order that he may become instructed in the principles of benevolence, mercy, truth, and righteousness from his elder friend and also I give him to honour his foster father'.¹²² The clear reason that Lei is giving the assembled guests then, is to honour Cadbury and ensure that the younger Lei grew up with similar values to him. He doesn't explain his respect for Cadbury on the basis of his Christianity, but rather in terms of Confucian values. It's not a particular surprise that Lei interpreted the morality of Cadbury's actions through his own cultural lens, but it does indicate that he saw value in them, if not necessarily Cadbury's religion. It is the respect for Cadbury that we see in both his words and the fact that Lei gave

¹¹⁹ Crosfield, *A History of the Cadbury Family*, p.263.

¹²⁰ Cadbury 'My Dear Emma', *William Warder Cadbury and Catherine J. Cadbury Collection* 1192, Box 9, Folder 1 (VI 7th 1935).

¹²¹ Cadbury, 'Dear Home Ones' (1925).

¹²² Ibid.

his son to him that also led him to support Cadbury's endeavours such as the Lingnan Hospital.

What the Lingnan Hospital shows is that, where Cadbury lacked the power to implement public health measures, he worked with a powerful friend to bring about the sort of low-level health care that formed part of a clinic public health care network. This was largely made possible by the intersection of Cadbury and General Lei Fuk Lam's ideals of the future of modernity in Canton, as well as their close relationship.

Cadbury in the Canton Hospital

The second area in which Cadbury put forth public health initiatives was in his roles in the Canton Hospital. Cadbury was first an internist and eventually the superintendent of the hospital and, as we have mentioned, it was in this role that he co-wrote *At the Point of a Lancet*. Some of Cadbury's efforts towards public health include education on the issue, the employment of a caseworker for patients at the hospital, and an attempt to establish model rural health systems. As this follows a more or less chronological pattern, we will deal with them in that order.

Lectures in Public Health had been given by the Canton Hospital from 1902 as part of its false start in medical education. Cadbury and Jones write that Dr. Oldt gave these lectures, but by 1911 the college closed due to a 'lack of staff'.¹²³ Just as how they didn't mention

¹²³ Cadbury and Jones, *Point of a Lancet*, p. 183.

Cadbury's leaving the hospital, Cadbury and Jones neglect to mention the staff's eventual move to Shanghai in 1914.¹²⁴ This is another sign of Cadbury editing out the unsavoury side of the Canton Hospital's history in his work, but it means that public health education was halted until the hospital's reopening in 1929. In 1933, while Cadbury was superintendent, the Kwangtung Health Centre Association was founded, with Canton and the Hackett Medical College hospitals both cooperating.¹²⁵ Health Care Associations were used by the Chinese to push for the acceptance of western medicine and public health in the lead-up to the Nanking government's proposal to abolish traditional Chinese medicine in 1929.¹²⁶ That Cadbury supported the founding of such an association in 1933 suggests that public health was not universally accepted or implemented in Guangdong at the time, but Cadbury attempted to change this however he could, including using the same methods as other Chinese groups.

Another area in which Cadbury provided public health services through Canton Hospital was through the provision of a hospital case worker. Cadbury describes the role of Miss Liu Fung Kit as case worker as an 'essential feature of a modern hospital' that was nevertheless implemented in 1933.¹²⁷ Cadbury and Jones describe a woman admitted in the outpatient department of Canton Hospital with an ovarian tumour. After the tumour was successfully removed, the case worker 'took over the family,' described as an opium-smoking husband and malnourished child.¹²⁸ First the patient herself was put to work, then the baby was fed.

¹²⁴ Restaino, 'Quaker in Canton', p. 2.

¹²⁵ Cadbury and Jones, *At the Point of A Lancet*, p. 260.

¹²⁶ Sean Hsiang-Lin Lei, *Neither Donkey Nor Horse*, p. 52.

¹²⁷ Cadbury and Jones, *At the Point of a Lancet*, p. 262.

¹²⁸ *Ibid.*

The only remaining problem for this family to be cured of is, naturally, the husband's opium addiction.¹²⁹ Cadbury and Jones conclude triumphantly of the case worker program at Canton that 'home life has been adjusted, work has been secured, and the fallen have been restored to a place in society.'¹³⁰ Nowhere do they mention on what authority the caseworker 'took over' the family, aside from the moral authority of the medical worker. Cadbury's attitude is quite paternalistic here, but we should remember that – just as in the case of T.C. – there was very little to stop the patients from abandoning the case working in favour of more traditional solutions. Cadbury's use of a case worker at Canton Hospital is another way that he achieved his public health goals as its superintendent. Like with his curative health, when nothing was to stop patients going somewhere else, this public health program could not have succeeded without their consent.

The final way in which Cadbury approached public health as superintendent of Canton Hospital was through his attempts to integrate with the government's public health system. Cadbury and Jones maintain a hope throughout *At the Point of a Lancet* that the Canton Hospital will soon become part of the Nanking Government's national health system. They mention very hopefully the 'interesting experiment' taking place in Hunan 'where mission hospitals are cooperating with the provincial Health Department on a very satisfactory basis.'¹³¹ This would seem to be a recognition that there was only so much that the Canton Hospital could do on its own. This fits with the rest of Cadbury's indications that treatment

¹²⁹ Ibid., p. 263.

¹³⁰ Ibid.

¹³¹ Ibid., p. 270.

can only do so much, and that preventative health care is the only way to make the biggest difference in China.

In an attempt to prove the virtues of public health networks Cadbury also resurrected the Lingnan Hospital which he had built with Lei Fuk Lam. In 1929 it was confiscated by the Nationalist government as a military hospital, but by 1933 Cadbury had regained it and turned it into the centre of a 'model rural health service'.¹³² Cadbury describes a tiered health system consisting of rural dispensaries, branch hospitals for serious cases, and the Canton Hospital itself for the most serious cases that require major operations, x-rays, or other more intensive care.¹³³ This perfectly matches the model set up by the PUMC in 1927.¹³⁴ Once again, the fact that Cadbury had to set this rural health service up as a model suggests either resistance to public health efforts in Guangdong or a sluggish response from the local government. In this we see Cadbury attempting to do what he can in his position as the superintendent of a privately run and funded hospital.

All of Cadbury's positions within China itself on public health placed him within a debate at the time on the proper nature of medicine. Sean Hsiang-Lin Lei describes a struggle taking place after Dr. Sun Yatsen, figurehead of the Chinese Revolution and father of Chinese Modernity, pursued treatment through Chinese medicine whilst suffering from the cancer that would eventually kill him. Reformers and modernisers were horrified by what they saw as a step backwards away from modernity as symbolised through the adoption of Western

¹³² Cadbury and Jones, *The Point of a Lancet*, p. 260.

¹³³ Ibid.

¹³⁴ Bullock, *The Oil Prince's Legacy*, p. 60.

medicine.¹³⁵ Chinese reformists who believed in the power of western medicine spent the next few years taking steps to attempt to eradicate traditional Chinese Medicine. As a result of these attacks, extreme positions were adopted by both sides and traditional Chinese medicine became more clearly defined. On the other hand, this was no dichotomy between the traditional and the modern, rather, it was a debate about the shape that this modern China should take. Both sides wanted to stake a claim as the medical system of a modern China. Traditional Chinese doctors took steps to define their form of medicine as the 'national' medicine (*guoyi*), and 'scientize' it, or hold it up to western scientific standards.¹³⁶ Supporters of scientific medicine on the other hand, pointed to the effectiveness of chemistry and biology to identify disease vectors and preventing the outbreak of plagues, and thus its use as a model for public health.¹³⁷ At a time when the state was becoming increasingly responsible for the health of the public as a whole, they argued, only scientific medicine provided an appropriate model.

Cadbury approached public health issues as superintendent of Canton Hospital from the perspectives established in Chapter 2. He would have largely have taken it for granted that his public health measures were a good idea. He cannot however, have been completely oblivious to the debate around traditional Chinese medicine that Lei describes. Cadbury also believed in arguing his point through example. In creating his model rural health service Cadbury inevitably supported a particular perspective about the future of Chinese medical modernity. Just as the Lingnan Hospital was the best demonstration of the benevolence of

¹³⁵ Lei, *Neither Donkey Nor Horse*, p. 1.

¹³⁶ *Ibid.*, p. 17.

¹³⁷ *Ibid.*, p. 52.

Lingnan, so too was it now a demonstration of the effectiveness of public health. For someone who throughout his entire career maintained that Chinese medicine was mostly nonsense, this is a powerful statement in such a situation. Whilst his ability to implement reform was limited by his position as an independent actor at a non-governmental institution, Cadbury did what he could in order to argue in favour for western medicine and the implementation of public health at a time when traditional Chinese medicine was trying to stake a claim in modern Chinese society. It would only be with the Communist victory in 1949 and the eventual implementation of the barefoot doctor program that traditional Chinese medicine would be seen to be compatible with public health, but at this point Cadbury argued definitively in favour of only using scientific medicine in a context where that was a position shared by others.

Conclusion

In his position outside of Lingnan Cadbury was more restricted in his ability to bring about his public health goals as compared to outside of it. Furthermore, his beliefs on public health and western medicine were not universally accepted. When he was able to bring about public health measures it came either through collaboration with a like-minded elite or wielding what power he could through the independent missionary enterprise that was Canton Hospital. Cadbury was further aided in his efforts by making the most of Chinese individuals and groups whose ideas dovetailed with his own. In this, he was able to indirectly bring about public health measures, but it also inevitably drew him into a debate about the

future of modern China and the kind of medicine that would be a part of its state and society.

Conclusion

William Warder Cadbury is a figure whose obscurity is understandable, if undeserved. His ministry was to a large extent personal and small-scale. His work rarely brought him into contact with the great leaders of the Chinese Republic. This limited his attempts to bring about his public health goals. In bringing public health efforts to Canton Cadbury was to public health as his predecessor Peter Parker was to eye surgery. Both saw them as the perfect ways to demonstrate the effectiveness of western scientific medicine and, hopefully, thus convert the Chinese to Christianity. The difference is that Cadbury's attempts to argue for western medicine in this way brought him into a burgeoning debate about the direction in which China would go in a way that Parker did not. His various efforts show the clear limits of someone working through private institutions to bring about public health goals, but they also show the way in which Cadbury attempted to win the argument through demonstrating the value of public health. These demonstrations constituted either direct effort where he had the ability, or indirect and small-scale efforts where he could not. These small-scale demonstrations were the practical arguments that Cadbury put forth for a particular vision of China's modernity.

When we look at Cadbury's mission and work, we see that he was no anti-intellectual dogmatist, as some medical missionaries were accused of being in his time. Nor, on the other hand, was he an agent of cultural imperialism as later writers might cast him. Nothing that Cadbury did in Canton was possible without the support of some sections of the local people, be it the wealthy elites supporting his work or the patients who made use of his

services. Nor again was Cadbury a conduit for modernity from the west into China, as a simplistic view of more recent sources on medical missionaries might indicate. By the time that Cadbury was established in Canton, the debate had shifted not from whether or not China ought to be modern but to what shape that modernity ought to take. As a medical missionary aiming bring about western public health to whatever extent he could, Cadbury contributed to a particular side in an already existing debate rather than starting it singlehandedly.

When Cadbury was forced out of China in 1949, he was left quite disillusioned. He had turned away from the Guomindang after supporting them through the upheavals of the 1920s, the Nanjing decade, and the Second World War. The Communist Party victory ensured that an atheist ideology that Cadbury had always been suspicious of would now be controlling the country. By 1955 however, Cadbury had changed his stance on the CCP victory. In a time of MacCarthyism and suspicion of anyone with apparent Communist allegiance, Cadbury advocated for the United States to recognise the Chinese Communist Party as the government of mainland China. Cadbury reflected that while they might not embrace Christianity themselves, Communist control of all mainland China gave the best chance for 'Christian-like' behaviour to take place across the nation.¹³⁸ Throughout his career in China Cadbury worked practically to implement both local curative and public health measures, working with the Guomindang even when their ideology never completely matched his own. If there is a lesson from Cadbury's work for missionaries and NGOs

¹³⁸ Restaino, 'Quaker in Canton', p. 15.

following in the footsteps of Cadbury, it is the impossibility of Cadbury's mission without local help, and his example of a pragmatic approach to achieving his goals.

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