

## Compte rendu

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hospital. And, she blends a regard for grand design with an admiration for ordinary spaces, especially in her compelling discussion of children's indoor and outdoor spaces (p.53-69).

Adams book builds upon a generation of hospital histories while extending those authors' arguments by elucidating the intricate dance between material culture, institutional structures, and medical practice. Practitioners and scholars alike will find the book an enjoyable and enlightening read.

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***Healing Henan: Canadian Nurses at the North China Mission, 1888-1947.*** By Sonya Grypma. (Vancouver: University of British Columbia Press, 2008. xx + 292 p., ill., notes, bibl., index. ISBN 978-0-7748-13990-3 hc. 85 \$ 978-7748-1400-3 pb. 32.95 \$)

*Healing Henan* began as a research project for Sonya Grypma's doctoral degree from the Faculty of Nursing at the University of Alberta, but it clearly developed into a labour of love that eventually took Grypma on two journeys to Henan. There she visited the site of the former Presbyterian/United Church of Canada mission and, with local guidance, managed to locate the original mission hospital and school of nursing at Weihui. The small building, boarded up and initially inaccessible to Grypma, has since been turned into a museum of the First Affiliated Hospital of Xinxiang Medical University and features some of the photographs and documents that she brought with her from Canada. In their own ways, it would seem, both Grypma and local officials were anxious to re-establish and celebrate an international relationship ruptured more than half a century ago. The anecdotes about these contacts make an effective beginning and ending to this book. But what was the reality of Canadian missionary nurses' involvement and accomplishment at Henan in the years between 1888, when the mission officially began, and 1947, when the triumph of Communist Chinese forces over their Nationalist rivals resulted in the mission's closure? Unfortunately, Grypma's title vastly overstates what resulted from the nurses' engagement with China and may well lead readers to expect more in the way of medical and "healing" content than her book provides. Grypma is on safer ground in claiming that *Healing Honan* adds to our understanding of Canadians' role in the missionary era and contributes to the new historiography of nursing by exploring "the culture of missionary nursing, and the globalization of modern nursing" (p.21).

Many missionaries and home-base administrators in nineteenth-century Britain and North America were confident that the opening of Christian medical work in Asia would facilitate the spread of the gospel by demonstrating the humanitarianism and the efficacy of their faith. With that expectation they established a network of dispensaries, hospitals and even full-fledged medical schools (the latter often “union” or ecumenical initiatives because of the costs involved) in numerous mission fields. There was, however, a counter tendency, a concern that professional medical work would divert missionary energies from the “real” work of evangelism. That outlook seems to have prevailed for decades in the Presbyterian Church in Canada’s mission in North Henan. For a quarter century after the mission was founded the only missionary nurse on site was a woman whose primary interest was evangelism. To the extent that additional nurses and even the first female missionary doctor were brought on staff, their main function was to care for ailing missionaries. This was still the case when another nurse recruit arrived in 1914. To be sure, the mission did open hospitals of a sort in the province of Henan. But when in 1920 the China Medical Missionary Association conducted a survey of mission hospital facilities, those in Henan were found to be “sorely lacking in most areas,” including arrangements for nursing care (p.76). In the case of the Canadian Presbyterian Henan mission (later known as the North China Mission [NCM]), the situation improved two years later when a school of nursing, the first in the province, was begun in the mission’s newly built hospital at Weihui, offering diploma-level training to male and female students.

Political instability as well as mission policies and problems would continue to delay the consolidation of modern nursing in the mission. A particularly turbulent period of civil strife in 1927 resulted in a mass missionary exodus from China. In the NCM, as Grypma notes, the exodus took place while its nursing services “were still in their infancy” (p.104). A brief “golden age,” 1928-37, (ch. 4) followed the missionaries’ return. It featured a number of advances, including improved physical facilities at all three mission hospitals, greater involvement in public health work and the development of valuable links with the Nationalist government and the Nurses Association of China. Unfortunately, the Sino-Japanese War brought this golden age to an end, and by 1940 all of the Canadian nurses had left the mission. An effort to resume mission medical work in Henan after the end of the Second World War proved to be short-lived, and indeed only one NCM nurse returned. Though a few missionaries lingered on in China for several years, the missionary era in China was effectively over in 1947.

For the nurses in the NCM's golden age, the goal had been to establish the values and practices of professional Western nursing. Veteran missionary Margaret Gay symbolized the commitment. She had begun as an evangelistic worker in Henan in 1910. But following nurses' training at Vancouver General Hospital in the 1920s she returned to China in 1931 and sought "[t]o plant a bit of VGH in the Orient" (p.114). Yet as Grypma's own data make clear, Gay and her colleagues were never in a position to make the kind of professional impact that they envisioned – and that Grypma's title implies. Only twenty-one nurses, in total, served in the NCM in the years 1888-1947, and, of these, twelve resigned to marry, sometimes within a year or two or their appointment. While the majority remained in China as missionary wives, any nursing they did thereafter was occasional and voluntary. This was also true of the eight nurses who came into the NCM already missionary wives. In view of their small numbers and the adverse circumstances facing them, it is surely unwarranted to maintain, as Grypma does in her "Last Days" chapter, that the nurses collectively succeeded in establishing "a system of modern nursing service and education comparable to that found in hospital programs in Canada" (p.216). Earlier, discussing the fund-raising efforts of the home-base Woman's Missionary Society, she writes, "The road to nursing in Henan was paved by Canadian tea socials, bake sales, and Sunday-school collections" (p.74). This may be a nice turn of phrase, but it, too, is hyperbole, and it illustrates a tendency in *Healing Henan* to celebrate rather than analyze what these Canadian women accomplished. More rigorous editing might have checked this tendency and also caught repetitions in phrasing and information (p.122-24, e.g.), contradictory data (p.12, 98) and occasional lapses in grammar and clarity (p.158, 230). On a more positive note, what this book does offer is a good sense of the close-knit nature and ongoing attraction of missionary communities, especially among and for single women. It also shows the drawing power of China for generations of missionaries and their adult children, many of whom chose missionary careers for themselves despite the fact that they had grown up knowing political turbulence in that country as almost the normal state of affairs. While Grypma, then, overstates her subjects' role in establishing professional nursing and the Christian faith in Henan, she does, nonetheless, contribute to historians' understanding of missionary communities and to the social history of Canadian nurses.

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