ABMAC BULLETIN

American Bureau for

Medical Aid to China

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"HUMANITY

ABOVE ALL"

3rd Quarter 1949

REVISION OF PROGRAM FOR 1949-1950 CONCENTRATES AID IN MORE STABLE PARTS OF CHINA

Revision of the 1949-50 program to concentrate medical aid in more stable areas of China was the main business at the June meeting of the Executive Committee of the American Bureau for Medical Aid to China.

The revisions, passed unanimously by the Committee, cover all phases of the Bureau's program of medical aid.

(1) The list of institutions receiving aid from the Bureau was cut from 12 to the following eight and includes two medical colleges not helped formerly.

National Lanchow University Medical College (Lanchow)
National Defense Medical Center (Taiwan)
National University of Taiwan Medical College (Taiwan)
National Chungking University Medical College (Chungking)
Lingnan University Medical College (Canton)
National Sun Yat-Sen University Medical College (Canton)
National Hsiangya Medical College (Changsha)
Cheeloo University Medical College (Foochow)

- (2) The 1949 Fellowship Program, which provides one year or six month grants in the United States for advanced study and research to selected candidates, will be carried on. The only limitation on this phase of the program is the matter of arrangements for passports and visas. A total of 12 fellowships are provided as under the original program.
- (3) Fellows who have completed their work in the United States will return to China, going first to Hongkong. If they are unable to return to their sponsoring institutions to carry on their teaching, the Bureau's China Office will attempt to place them in other medical schools.
- (4) Since it is now virtually impossible to get in touch with some of the institutions formerly receiving aid from the American Bureau for Medical Aid to China, fellowships will be granted instead to medical college faculty members of National Chungking University and the University of Taiwan.
- (5) The 1948-49 Equipment Program was cancelled except for those institutions on the new list. It is planned that the China Office will obtain requisitions from the institutions on that list and, to save expense and time involved in land transportation,

all items of equipment will be limited to those suitable for forwarding by air-freight from Hongkong.

- (6) Aid to health demonstration centers in Canton and Lanchow will continue. In addition, aid will be granted to the centers in Chungking and Taiwan.
- (7) The Textbook Project involving the purchase, translation and publication of much-needed medical textbooks will be continued unchanged.
- (8) Since the importance of the work of nursing schools has become more and more apparent, Bureau assistance to them will be continued. The Provincial School of Nursing and Midwifery in Taiwan will receive a grant for improvement of its teaching facilities and the carrying on of its new maternity hospital. The Army Nursing School, affiliated with the National Defense Medical Center in Taiwan, and the Lanchow Nursing School receive aid through the Bureau from the National Federation of Business and Professional Women's Clubs and the American Federation of Sorootimist Clubs, respectively.
- (9) Teaching missions headed by American scientists, similar to those carried on in 1948, will be continued. The Bureau hopes to send at least two such missions during 1949-50.
- (10) A separate item on the program is the granting of fellowships at the Armed Forces Medical Maintenance School in St. Louis to five or six Chinese engineering graduates. These engineers will take the complete nine-month course at the St. Louis school where they will learn the maintenance and repair of all types of electrical medical equipment, ranging from refrigerators to the most complicated machines. On completion of the course, these fellows will return to China to teach and, it is hoped, to establish a similar school in that country. When established, this school will be the first of its kind in China.

Further recommendations passed at the Executive Committee meeting were of an administrative nature. Chief among them was reduction of the budgets of both the New York and China offices. Reductions of from 25 to 35 percent are planned. These changes will not cut down the effectiveness of the new program and strategic assistance to medical education in China will continue throughout the remainder of 1949-50.

會華助藥醫國美

American Bureau for Medical Aid to China Inc.

MME. CHIANG KAI-SHEK HONORARY CHAIRMAN HIS EXCELLENCY WEI TAO-MING

DR. HU SHIH

DR. P. Z. KING

NATIONAL HEADQUARTERS

1790 BROADWAY NEW YORK 19, N. Y., U. S. A. June 15, 1949

CHINA OFFICE

Tainch Taiman

Dear Bulletin Reader:

As Medical Director of the American Bureau for Medical Aid to China, stationed in China, I am making a short visit at New York headquarters to discuss program and policy with the Board of Directors. One project I have recommended strongly for Bureau support is assistance to medical facilities on Taiwan (Formosa), the island off the southern coast of China which has been in the news frequently of late.

The Medical College of the National University of Taiwan needs help from ABMAC and, therefore, from you. Its buildings are large but they need repair. There is quite a supply of equipment but most of it is obsolete or lacks parts. There is an excellent faculty but it must be brought up-to-date on recent developments in the medical field. Two one-year fellowships at \$4,000 each for faculty members should be granted as well as an allocation of \$5,000 for the purchase of new equipment.

Besides assistance to the Medical College, I have suggested a grant of \$3,000 to help put the Taipeh Provincial Health Center on its feet. This center conducts work among the city's population and plays an important role in the training of medical and nursing students in public health.

The Provincial School of Nursing and Midwifery in Taipeh deserves help too. Its job of training nurses and midwives is indispensable. A newly-opened maternity hospital must have outside support if it is to continue and expand its remarkable work among mothers and infants. I am asking for a grant of \$3,000 for this school--a small sum, but inconceivably useful.

The total needed is \$19,000. The Bureau itself does not have the funds since it cannot transfer money from other approved projects. Your generosity and your concern for the people of China must provide the funds to carry out the program I have outlined.

I want to be able to tell the Chinese people on Taiwan, when I return in two or three weeks, that you have not forgotten them, that you are still behind their fight for health and life.

> J. Heng Liu Medical Director

Mhcerely yours,

MEDICAL TEXTBOOKS FOR CHINA FINANCED BY REVOLVING BOOK FUND

The Revolving Book Fund, an important phase of the program of the American Bureau for Medical Aid to China, has made possible compilation, translation and publication of several medical textbooks in the last few months.

The February 1949 issue of the Chinese Medical Journal reports on activities of the publications department of the Chinese Medical Association. Heading the list of textbooks already published or in the process of translation are four financed by ABMAC.

One thousand additional copies of Dr. F. T. Chu's Practical Pediatrics were printed at the end of December after the second edition of 500 copies was exhausted. The first volume of the Chinese translation of Cecil's Textbook of Medicine is in the press; two more are to follow. This book is being edited by Dr. C. S. Yang. Also in the press is the tenth edition of Cousland's English-Chinese Medical Lexicon under the editorship of Dr. T. C. Leo. May's Manual of Eye Diseases is being translated into Chinese by Dr. Eugene Chan and will soon be ready for publication.

The importance of this kind of work cannot be over emphasized. One of the greatest needs in the medical field in China is books and journals. The Textbook Project of the Bureau is attempting to help rectify this lack by financing both translation and publication by the Chinese Medical Association.

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MISS CHEN STANDING BEFORE THE TAIPEH PROVINCIAL HEALTH CENTER

TAIWAN HEALTH CENTER REPORTS INADEQUATE FACILITIES

"In spite of all handicaps and hardships, our work is being carried on and even expanded, but if we had ever so little support and encouragement from outside, we would not feel so hopelessly alone and frustrated as we sometimes do."

This urgent plea for help is part of a vivid description of the work of the Taipeh Provincial Health Center, written by Miss Chen Tsui-yu, Director of Nursing at the Center.

The Taipeh Provincial Health Center was established in 1940 on the island province of Taiwan (Formosa). In the beginning, the Center had a staff of four physicians and ten public health

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nurses, all detailed for part-time duty by the University of Taiwan Hospital. Day clinics were maintained chiefly for health education and consultation including maternal and child health, tuberculosis and venereal disease.

With the current tremendous increase in the city's population caused by the continual influx of refugees from the mainland, the Center's staff has been doubled and the scope of its clinical work expanded to include dental treatment and the treatment of trachoma. The latter is a contagious disease of the eyes prevalent in many parts of China and leading to partial if not total blindness when left untreated.

Another essential function of the Center's work is the control of Children's diseases. Daily visits are paid to three primary schools by public health nurses, special attention being paid to the eradication of pediculosis (head lice), scabies and trachoma.

The Center, in addition to the health work it carries on, provides the opportunity for indispensable field training in public health to medical and nursing students. This year, 75 students from the National University of Taiwan Medical College have been assigned to the Center in Taipeh.

Unfortunately, the Center's resources are diminishing instead of increasing in proportion to the expansion of its work. According to latest figures, the monthly budget of the Center is now equivalent to only US\$179.50. This meager sum must cover not only salaries and wages of the entire staff but also general overhead and the cost of all medical services to the district population of 80,000.

As for facilities, Miss Chen writes: "The six clinics operate by

taking turns seeing patients in four tiny cubicles about 10 x 10 feet in area. They are housed in a building old and badly shaken by bombing. The equipment though still usable is obsolete, short in supply and dilapidated. There is only one Japanese microscope."

Miss Chen sums up the handicaps under which she and her colleagues are working: "The devotion of the staff and the pains taken in their continued training cannot entirely compensate for their excessively low pay, the lack of facilities, and the everlasting depressing shortage of consumable supplies such as drugs, dressings, needles and syringes, uniforms, and even stationery for record-keeping.

"Our greatest regret is that most of the babies we attend to are undernourished because of the inability of the parents to pay the high price of imported preserved milk, there being hardly any fresh milk produced on this island. The average income of a working man at present is equivalent to about US\$1.50 per month and a five pound tin of milk powder costs US\$2.50.

"Another serious deficiency is the lack of books and periodicals to stimulate interest of the staff in their profession and keep them abreast of progress abroad."

Supplies, equipment, reference books, etc. that are taken for granted in the United States are seemingly classed as "scarce and urgently needed items" in China. The American Bureau for Medical Aid to China has pledged aid for the Taipeh Provincial Health Center. The Bureau's Board of Directors considers the Center's work indispensable in these days of uncertainty. It intends to supply all the "support and encouragement from outside" that it possibly can.

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ABMAC BULLETIN

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ABMAC ADVISOR STRESSES CHINA'S NEED FOR U.S. UNDERSTANDING AND MORAL SUPPORT

"Mei kuo jen kan pu chi wo men." This phrase typifies the discouraged attitude of the Chinese people that "Americans no longer feel the Chinese are worth any consideration or concern," according to Dr. Robert K. S. Lim.

Speaking before the ABMAC Executive Committee in his capacity as official Advisor, the former Surgeon General of the Chinese Army reiterated that America struck a deep blow at

her old ally when the United States pursued a "wait till the dust settles" policy toward China. "I have never doubted that the United States is friendly to China, but if you take the press of this country for the last two years and the pronouncements of the State Department you would think that China is a greater enemy than even the Nazis."

"The (Sino-Japanese) war was a set-back," he said, "but events that occurred after V-J Day hampered China even more." He pulled no punches in stating that two of the main reasons for China's present state of chaos were the removal of Manchuria's industrial machinery by Soviet Russia and the sapping sabotage by the Chinese Communists,

"The Communists achieved their ends in China, first by sabotage; secondly by political infiltration; and thirdly by psychological attack using the fear of retaliation. Above all their policy is one of consistent attack. After the groundwork is laid by economic and political weapons, military attack is used to deliver the final blow," Dr. Lim said in explanation of Communist successes in China.

He reviewed the factors leading to the collapse of China's economic structure. "China has been and is a poor country. Even before the Sino-Japanese war, China only produced 95% of the rice needed. Since the end of the war there has been a big drop in both food production, about 70% of pre-war, and in the production of cotton, about 60% of pre-war, for the simplest type of clothing."

These facts, linked with the destructive sabotage of vital industries and transportation facilities by Chinese Communists,



Dr. Robert K. S. Lim

contributed in no small way to the failure of the government to stabilize the country's economy.

Dr. Lim told the Executive Committee that the Chinese people, without exploring the whys and wherefores, categorically blamed the government for the country's misfortunes, "It was no longer possible for the people to be altruistic. They no longer thought of loyalties. The fight to exist was uppermost in their minds."

"To make it even worse," he continued, "for the last two years America had been criticizing the government, had stated that it was corrupt and inept, The American press seemed to confirm the people's opinion that the government was to blame."

Burdened with doubts and despair the people began to take more notice of Communist promises of better pay and working conditions, more land and less taxes. Most of the people "tried to rationalize that there must be something in Communism; that the Communists will do some good for China. Whether that thought was there or not, whether from fear or a desire to explain away their difficulties, many people supported the Communist Party. Very few of these people are Communists by conviction. You will find a surprising number who are Communists by persuasion."

Dr. Lim touched briefly on the spread of Communism in Indo-China, Siam, Burma and Malaya. "The Communist Party in these neighboring countries is made up predominantly of Chinese. Anywhere from two-thirds to three-fourths of the membership are Chinese, all without a doubt related to some central body. There is no question but that the leaders are trained in Moscow. Thus, the whole area south of China should be looked upon as largely a Chinese area with similar Communist problems."

With this statement he echoed the warning of other farsighted men that if all of China goes Communist, all of Asia will go Communist.

The only obstacle to the Communist plan to engulf Asia is

(continued on page 4)

READERS RESPONSE HELPS SPARK PLANS FOR TAIWAN MEDICINE AND HEALTH PROJECT

The island province of Taiwan consistently occupies a place of prominence in both news headlines and ABMAC program plans. Much of the discussion at the October Executive Committee meeting was devoted to a project for the consolidation and improvement of Taiwan's health services. An added boost to the discussion came from the enthusiastic response to Dr. J. Heng Liu's letter in the last issue of the ABMAC Bulletin.

Memoranda from ABMAC Medical Director Dr. J. Heng Liu, in Taiwan, and other leading figures in public health in China described sanitary and health conditions on the island. All stressed the necessity for a concentrated effort to improve these conditions.



Student nurses practice operating room procedure under the watchful eyes of a graduate nurse

With a population of some six millions enjoying a sometimes tropical, sometimes sub-tropical climate, Taiwan has primitive sewage facilities. Open gutters carry all waste matter away through the streets of the towns and villages. In rural areas, fertilization of crops is done with human excrement. Sanitary neglect of this nature leads to contamination of locally grown fruits and vegetables and unprotected water sources. The island has become a breeding place for diseasecarrying vermin.

Malaria, typhoid and other enteric diseases, tuberculosis, dengue fever, venereal disease, typhus, tetanus, fungus skin diseases and infections from worms and flukes are considered most prevalent among Taiwan's population.

Existing facilities to combat these health problems are inadequate at the present time. Practically all medical care and health work are administered by the Provincial Health Department. Several hospitals, health centers in all counties, and small units for the treatment of TB, leprosy and mental disease operate on meager budgets. Lack of adequately trained public health personnel is a serious handicap to the efficient maintenance of these services.

Several institutions from the mainland have now joined the medical college and hospital of the National Taiwan University and the Provincial School of Nursing and Midwifery in their task of spreading medical knowledge and care. They are the National Institute of Health, the National Defence Medical Center including the Army Nursing School, and the Army General Hospitals.

ABMAC advocates consolidation of all these separate medical institutions into one smoothly-functioning, closely-cooperating unit. Together, yet without losing their individuality, these institutions can work toward a unified program to disseminate improved public health know-how to medical students while dispensing efficient medical treatment to the people. For example, if the facilities of all the hospitals were made available to all the medical and nursing schools, not only would patients receive better care but the students would be able to pursue studies in wider practical fields.

Specific plans are in the making. Appropriations totalling \$16,500 have already been approved for the purchase of equipment for the National Defence Medical Center, the improvement of teaching facilities at the Provincial School of Nursing and Midwifery, and for the furthering of the work at the Taiwan Provincial Health Center in Taipeh.



An Army Nursing School student assists in ward rounds at the Taipeh Provincial Hospital

This project is important both for the province of Taiwan and for the whole of China. If the results hoped for can be attained, Taiwan will serve as a model and example for the rest of China.

The thanks of the people of Taiwan is due to all who so generously responded to Dr. Liu's letter in the last issue of the ABMAC Bulletin. To readers contributing to ABMAC's general program, the Bureau expresses its heartfelt gratitude and the promise of continued effective aid to China's medical services.

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"THE BEST LAID PLANS OF MICE AND MEN..."

A comprehensive plan developed by ABMAC to control venereal disease in three northwest provinces of China was forced into the pending file when Chinghai, Ningsia and Kansu fell into Communist hands.

General Claire Lee Chennault, well-known wartime leader of the Flying Tigers and expert on military conditions in China, first brought the spreading problem of venereal disease in China's northwest to the attention of ABMAC's Board of Directors on July 8. Reports and surveys made in that part of the country revealed an unusually high rate of incidence of venereal disease among the semi-nomadic population.

The Bureau took immediate action, calling a conference to discuss all aspects of a campaign to wipe out venereal disease in China's northwest. Participants included the internationally-known VD expert, Dr. James H. Lade of the New York State Health Department, and his assistant, Dr. Lopo deMello.

The conference laid plans for a comprehensive Venereal Disease Project. A teaching mission, headed by Dr. Lade, was to train teams of technicians and nurses in the diagnosis and cure of syphilis and like diseases. It was estimated that in spite of language barriers, Dr. Lade's teaching mission could train twenty teams, each comprising from six to eight people, in less than two months.

A widespread control campaign following the training period was included in the plans. The teams, trained by Dr. Lade's teaching mission, were to form mobile units travelling among the people. Dr. Lade estimated that each team could test 200 people a day including curative injections for infected cases. With 20 teams in operation, a total of 20,000 people would be reached in each week.

Experts, experienced in venereal disease control programs in other countries, felt certain that a two year campaign would virtually wipe out syphilis in the three provinces selected.

The Economic Cooperation Administration both in Washington and in China evinced great interest and even enthusiasm

(continued from page 1)

the resistance centered in the south and southwest provinces of China still grimly held by the National Government. Dr. Lim compared the present situation in China with 1942 when the Japanese were in Burma, almost in southwest China, with very little to prevent them from linking up with Rommel in the Middle East.

"The only barrier between the Communists and the Middle East now is this small core of resistance in China itself. In India, Communism is a very real danger because of the low economic status of the people and also because of the great number of Communist cells scattered about the country."

Answering the question "What should be done?", Dr. Lim called upon the United States to clearly express its friendship and respect for China. He named this as the first step and said the people behind Communist lines "have given up hope of United States friendship, of any relief from the outside."

Reiterating, Dr. Lim said, "If there is to be a change in China, if the people's resolve is to be stiffened, if help for a future movement toward recovery is to be strengthened, there must first be an expression of friendship from the American government. No amount of money will do any good without that. If you could change the policy of the government and change the attitude of the press, then take concrete steps to assist China toward modern administration, I am sure that many people in Communist-held areas will respond and rallying centers will be established."

when told of these plans. Simultaneously, the governors of Chinghai, Ningsia and Kansu were acquainted with details of the campaign. All promised complete cooperation and financial participation.

Then came the news of the fall of Lanchow, the city expected to form the center of activities. Close on the heels of this news came the loss of Sining, the second choice for the hub of operations. ABMAC was forced to shelve all its comprehensive plans for the eradication of syphilis in China's northwest.

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