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MEDICAL MISSIONS IN CHINA

*IN CONNEXION WITH THE WESLEYAN
METHODIST CHURCH*

BY

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M.R.C.S. (LONDON), L.R.C.P. (ENGLAND), ETC.; WESLEYAN MISSION
HOSPITAL, HANKOW, CENTRAL CHINA

WITH

AN APPRECIATION

By THE HON. E. H. FRASER

C.M.B., H.B.M. CONSUL-GENERAL, HANKOW, CENTRAL CHINA

WITH FORTY-SIX ILLUSTRATIONS

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TO
PAST, PRESENT, AND FUTURE
MEDICAL MISSIONARIES OF CHINA
IN CONNEXION WITH THE
WESLEYAN MISSIONARY SOCIETY

THIS BOOK IS

DEDICATED

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INTRODUCTION

THIS is a Story, and not a medical treatise. Neither does it profess to be a literary production. Those gifts and graces which make for such are obviously absent. Medical men are not generally guilty of increasing the yearly output of books on subjects outside of their own conservative sphere. Their work is usually confined to 'things earthy,' and their thoughts revolve around hard facts. Such are not always adorned with literary charms.

The various parts of this skeleton have been collected from numerous sources, and, as far as is here seen, we have tried to add flesh and life. Whether we have succeeded or not remains to be proved.

The writing of this Story has not only been a joy, but also a labour of love. It has been

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performed during the multitudinous duties and cares connected with large hospital practices. Never have we been able to devote two consecutive hours to the writing of the Story. Of the blemishes and omissions we are only too painfully conscious. Hence, no literary critics need intensify our sufferings.

We very much regret that through feebleness of age and the recent sickness of the veteran Rev. Griffith John, D.D., he has been unable to contribute his promised appreciation of medical missions. But we are very fortunate to receive from the pen of the Hon. E. H. Fraser, C.M.G., H.B.M. Consul-General, Hankow, such an able, timely, and independent criticism of the subject. It forms a veritable classic. Probably no more weighty testimony has of recent years been contributed. Consul-General Fraser is perhaps the most widely known, certainly the most highly respected member of the British Consular Service in China. His thirty years of residence, with such an intimate knowledge of the life and

Introduction

thought of the Chinese, demands our thoughtful perusal of his appreciation of medical mission work in China.

The three interesting chapters on South China are from the pen of the Rev. Philip Rees, B.A., M.B., B.Sc., Wuchow, to whom we are greatly indebted.

Besides herein recording the 'Things Medical' which we ourselves have both 'seen and heard,' we are indebted to the following books and periodicals, which at some time during our life in the Celestial Empire we have perused with profit: *Central China Prayer Union Letters*; *Social Life in China*; *Hospital Reports*; *Things Chinese*; *China Medical Missionary Journals*; *Chinese Recorder*; *Giles's Dictionary*; *Medical Missions*; *Methodism in Central China*, and many others.

We believe that the present time is opportune for the publication of a book of this description. So we send it forth, with the earnest prayer that some who read this Story

Introduction

may have their interest aroused in the glorious work of medical missions, while others, whose interest has already been quickened, may have it widened, deepened, and intensified.

W. A. T.

HANKOW, CENTRAL CHINA,
1909.

AN APPRECIATION

H.B.M. CONSULATE-GENERAL,
HANKOW, *August 18, 1908.*

MY DEAR DR. TATCHELL,

Although you know that I have practically no actual experience of medical mission work, you ask me to write an appreciation, to be included in your record of that branch of your Society's labours in China. Your reason for thus honouring me must be, that for nearly thirty years I have served in various parts of the empire, and watched, with the onlooker's detachment, the development of our relations with its inhabitants; for these are indeed my only qualifications for presuming to accept your invitation.

Their obvious peculiarities of dress and custom, joined with the difficulty of their language and their backwardness in warlike arts, exposed the Chinese in a peculiar degree

An Appreciation

to the supercilious criticism of early visitors from the West. So unfamiliar a race were readily credited with qualities and habits alien to human nature as exhibited in the sphere of European civilization, and they were described and treated without the toleration and sympathy which alone lead to mutual understanding and goodwill. If of late years foreigners have begun dimly to perceive the common humanity of the Yellow Race, the credit is due to the men and women who have devoted their lives to attaining intimate association with China's millions. Freed from the pose of regarding the Chinese as essentially grotesque, we can now comprehend the cause of their hostility to alien religious propaganda.

The struggle for existence in a country now known to be, on the whole, poor and devoid of convenient means of communication, had made the Chinese keen men of business but very poor idealists. The foreign trader they have generally received without suspicion or enmity so long as he deals fairly and gives no ground for suspecting him to be a fore-

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runner of sinister attempts on their country. Even the traveller was and is regarded at worst as an amiable eccentric, unless he act violently or pry into the secret treasures of the land. But the missionary was and to some extent remains a puzzle to which they are apt to fit anti-foreign solutions. Why should a man leave his own country and settle in China, not to traffic or to pursue any ordinary business, but simply to preach a strange doctrine? Had he confessed that this vagary was a penance through which to save his own soul, Buddhists might have had some sympathy with him—although the sin requiring so extraordinary an expiation must to their minds be terrible enough. But that he should profess to come simply in obedience to his Master's command and out of love for an absolutely alien race must strike the practical Chinaman as a hard saying; and when the missionary's nation has vigorously resented any attempt to persecute not only the teacher but his converts also, it is hardly surprising that the theory of missions cloaking

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political menace has too often found ready acceptance among the populace.

To the ignorant masses the most extraordinary and incredible species of missionary must have been the medical. Their native doctors frankly squeezed and squeeze their patients ; their profession was and is a dodge to get money, and nothing else. But here comes a foreigner who, in addition to preaching an unfamiliar doctrine, for no fee undertakes to doctor all and sundry, applies all sorts of outlandish remedies, takes mysterious sun-pictures of the ailing and their ailments, and insists that in cases not a few, life can be prolonged only by the use of the knife, even if the body received whole from one's parents must be lopped. When one has heard traditions of spells and philtres for whose concoction parts of the human body were essential, and when one believes in ghouls and demons which devour human flesh, in the magic removal of treasure, and in corpses possessed by fox spirits, is it in the eyes of us, whose great-great-grandfathers dealt summarily with witches, so

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very odd that the outlander should be suspected of unhallowed practices, and that the native medical trade-union has often found little difficulty in stirring up popular outbreaks against the new-fangled hospital and its doctor?

The marvel rather lies in the readiness with which volunteers have always come forward, not only to risk massacre but to face the slow martyrdom of fighting, almost solitary in an alien land, disease and squalor amid unhealthy surroundings, for no other reward than the consciousness of Christian duty done. Without in the least belittling the devotion of any worker in the mission sphere, one may surely be allowed to lay stress on the immense zeal, energy, and perseverance required to institute a hospital in a place destitute of the material and assistance which elsewhere lie ready to the hand. The medical missionary, especially in early days, must often be his own architect and clerk of the works, he must undertake the duties of operator, dresser, nurse—nay, of cook and housemaid to boot—until he can induce natives to undergo (by

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means of instruction in a tongue devoid of the proper technical terms, of which he must provide adequate translations) training which requires his constant supervision and unremitting care; he must take the weightiest responsibilities and improvise substitutes for equipment lacking or inadequate from want of funds. And all this while living in an atmosphere of suspicion, if not open hostility, where rule, prejudice and custom, and the ignorant see in the hospital a magic factory of converts to the foreign doctrine.

Difficulties such as these, which might well have disheartened medical missionaries, have merely stimulated them to put forth greater effort and live lives of noble example; and already the reward is coming into sight. The years of devoted effort, while earning the gratitude of those whose physical ills have been cured, have availed likewise to dispel inveterate suspicion, and have compelled sympathy with a doctrine whose manifest fruits are such disinterested charity and unselfish service of rich and poor alike. So it is that nowadays

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the hospitals and dispensaries scarcely suffice for the throng of eager patients, there is no lack of applicants to be trained in medicine and surgery, and the Chinese authorities set up imitations of the hospitals which not long ago they scorned and suspected. The recent adoption by native officials and leading men of the Western theories of sanitation, and their advocacy in the native press, must in chief measure be ascribed to the teaching and example of the mission doctors, whose policy of concealing nothing within their walls and of freely imparting knowledge to natives is the best counterpoise against the anti-foreign spirit resulting from the dissemination of half learned and wholly misunderstood political and economic doctrines.

We see, then, that the medical part of the mission, which may at the outset have seemed to add a separate prejudice to the aversion from Christian teaching, has now become beyond all doubt or cavil a notable help, not only to mission progress, but also to better international relations, for 'tis kindness that evermore gives birth to kindness,' and incidentally

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to China's advance towards a perfect polity, which, as their own Sage dimly saw long ago, must rest on moral duty and willing service of God and one's neighbour.

The story of the early struggles of your medical missions and of the success which God has already given them will, I believe, awaken in many hearts a grateful sense of our country's debt to the unobtrusive labours of the missionary doctors, of which the bulk, even of foreigners resident in China, are still extraordinarily unconscious.

Apologizing for this halting attempt to fulfil your request,

*I remain,
my dear doctor,
yours very truly
H. H. H.*

Medical Missions in China

CHAPTER I

'THE TENDER MERCIES OF THE HEATHEN—
ARE CRUEL'

THE origin of the art of healing is, like so many other origins in China, shrouded in mystery. The Chinese conception of history is not that of a work of art, but merely a record. Such records are necessarily defective and inaccurate.

The 'benevolent art' was but one of the 'nine professions.' It is placed next to the profession of letters in importance. Its inception is attributed to a mythical or semi-mythical emperor named Shěn-nung, who flourished about 2700 B.C. He is reputed to have been the author of the earliest medical work. Whatever may be our ideas on this point, we are not now in a position to challenge the honour.

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When the Emperor Shih Hwang-ti (229-204 B.C.), a man of consummate skill and ability, in his mad ambition to blot out all records of a former China, and to pose before posterity as the First Emperor, ordered the complete destruction of all classical works by fire—as well as five hundred scholars—ex-



SHÊN-NUNG, B.C. 2838-2698.
The reputed author of the earliest
medical work.

ception alone was made in favour of works of medicine, divination, and agriculture.

Chinese authors assume—with that complete self-complacency which is so characteristic of their race—that the indisputable and wide medical knowledge which Shên-nung possessed has been so vastly increased by his worthy successors,

that to-day the Chinese possess the art of healing in its most perfect form of development!

Tender Mercies of the Heathen

Whatever Chinese authors have to assume in respect to the art of healing, in the light of Western modern science Chinese treatment can only be considered as antiquated, and in many instances barbarous. Nothing else could be expected from a non-progressive and superstitious nation.

It is very remarkable that in a country where searching examinations are the only rungs of the ladder to a literary degree and subsequently an official appointment, no such demand is, even to-day, required of a man before he is allowed to practise as a doctor.

'Medicine, fortune-telling, astrology, physiognomy, are taken up as a trade or profession (for diversion) by scholars; the last-named only is respectable.' Thus reads a Chinese proverb. And so it too frequently happens that when a man has repeatedly failed in business or other pursuits, he resorts to the practice of medicine. No capital is necessary. The only apparent credentials and qualifications required are a huge pair of goggles and a benign, thoughtful expression. By most of us, the latter is not difficult to cultivate. Had his father preceded him in the profession, and handed down as an heirloom the secret prescriptions of his various

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concoctions and methods of treatment, so much the greater his prestige. The more ancient the prescriptions and methods, the more are both his prestige and income enhanced. Thus equipped, the enterprising medico is prepared to commence his empirical career.

That the common people are really aware of his limitations is seen by the proverb, 'To be a famous physician, it is by no means necessary to be able to read.' Still, they continue to consult him all the same.

Chinese doctors are divided into two great classes. One class is termed physicians, or 'internal' doctors. These are the most numerous, and are in the highest repute. The surgeons, or 'external' doctors, form the other class. This distinction is very important. An incident is recorded of a Chinaman having his body pierced by an arrow. A surgeon was called in who broke off the protruding shaft, leaving the head embedded in the body of the unfortunate victim. This he refused to extract, as he contended that such an action on his part was contrary to medical etiquette. The suffering patient was obliged to seek the aid of a physician to extract the arrow-head, as it was '*inside*' the body.

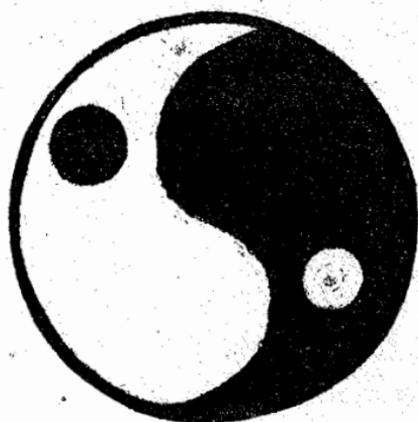
Tender Mercies of the Heathen

Again, these two great divisions are subdivided into numerous classes of specialists. This is almost analogous to the modern tendency in Europe and America. Thus we have specialists for diseases of the eye, chest, skin, women, children, bones, teeth, and glands; also barbers, pain-killers, bruise-curers, and specialists for snake bites, bullet and sword wounds, fortune-tellers, spirit mediums, doctors afloat, the miscellaneous doctor, the faith-healer, and the veterinary surgeon!

Should the skill and treatment of

one doctor fail to satisfy either a patient or his friends, then others are called in, until the patient is cured—or otherwise.

The Chinese believe that all disease is the result of some disagreement of the Yin and Yang. The Yin is the female, or negative, principle of nature, and predominates at night,



THE PRIMORDIAL EGG OF THE UNIVERSE.

The dark portion represents the Yin, or female principle, the light part the Yang, or male principle, in nature.

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while the Yang is the male, or positive, principle of nature, and, being stronger, prevails by day. These are the primaevial forces developed from the Great Monod, by the interaction of which the whole universe has been produced.

In addition to this disagreement, there exists the unwavering faith in bad humours, and the more powerful agency of evil spirits. In the case of a nation steeped in such superstitious beliefs as being the cause of all their disease, it is but a natural sequence that superstitious methods of treatment should predominate.

Thus a sick person will frequently, before consulting one of the numerous specialists, have recourse to some god or goddess, who is supposed to possess some panacea for their specific disease. Incense sticks are burned, and the patient prostrates himself before the particular idol. Should he recover, then all the credit is given to the divinity worshipped. An offering of meats and vegetables is made, the cost of which varies with the patient's means. Of course the priests who attend these idols invariably appreciate such forms of thank-offering. Even if the patient does not recover, no blame is attached to the idol. It must be

Tender Mercies of the Heathen

in accordance with the 'reckoning of Heaven.' The deduction is, that death is the decree of Heaven, but recovery and life is the will of the god or goddess who has the control of all disease.

When sickness visits several members of one family, either at one or separate times, it is attributed to the agency of the 'destroying god.' They contend that such a visitation *must* be the result of mysterious and injurious influences existing between the members of the family, the father towards his son, or husband towards his wife, and so on. Many families experiencing such a calamity decide to have a special ceremony performed by Taoist priests. Thus they bribe the angry god to dissipate, or, better still, destroy the evil influences.

Such ceremonies are almost daily witnessed in China. Taoist priests are summoned, either for one day and night or three days and nights, according to the amount of money the relatives decide to expend. A temporary altar is erected. On this are placed images, candlesticks, censers, and sometimes meat and vegetables. The weird and anaemic-looking priests, with heads shaven (if Buddhists), or with a 'top-knot' of

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hair protruding through a hole in their cap (should they be Taoists), clothed in long flowing gowns of dirty grey or yellow, for hours chant their liturgies, wail forth their dirges, ring tinkling bells, and march round the altar to the accompaniment of exploding crackers. Their performance certainly *ought* to have some influence, either for weal or woe, upon the unsuspecting divinity. It certainly has upon a foreign spectator, but, we fear, of not a very desirable nature. ○

St. John very aptly proposed a testing of spirits, and advised his beloved not to believe every spirit. There exists a similar scepticism amongst the Chinese, in regard to their spirits. They are mostly of an evil character. So they endeavour to expel various deadly influences emanating from them. For instance, should a person be mysteriously and suddenly attacked by some nervous disease causing dizziness, the loss of the use of his limbs, dimness of vision, &c., such a condition can only be ascribed to the influence of one of the seventy-two malignant spirits. A very ingenious measure is adopted to expel such an undesirable possession. One evening recently, as we wended our way along one of these dark, narrow, and muddy streets,



TAOIST PRIESTS.



Photo by Rev. J. S. Helps.

OPEN-AIR THEATRICALS AT HANCHWAN,
To appease the wrath of the spirit of small-pox, then raging.



OUR BLIND EVANGELIST, HU YUAN HSI,
Reading the Bible by the bedside of a patient in David Hill ward.
(See p. 135.)

Tender Mercies of the Heathen

we were arrested by the weird clanging of a bell in one of the houses. Peeping through a crack in the door, we witnessed the following scene. On a rough couch in the corner lay a man or woman (we were unable to decide which). In the centre of the room stood a medium-sized table. Upon it were placed three or four cups—we presumed of wine—a plate with fruit, a bowl of water, a censer, and lighted candles. A quantity of cash paper and charms were also on a stool. Seated at the table was a priest, tinkling a small bell, and wailing forth some doleful dirge. Every now and again he would dip his fingers into the water and sprinkle the fruit, wine, and paper charms. Even the poor sufferer in the corner did not escape the sprinkling!

We believe that after a prolonged performance of this kind the priest pastes over the door of the sick-room a paper charm, another is worn by the patient, whilst the third is burnt and the ashes made into a decoction, or mixed with hot water and drunk by the patient. The priest's remuneration is in proportion to the result of the experiment.

There are gods and gods. They vary in importance and influence. The minor gods

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are frequently forsaken and ignored, should their power fail either to expel or deceive the evil spirit of disease. The major gods are then interviewed. Especially is this the custom when an important member of the family is afflicted. A near relative, such as the wife, brother, or child, dressed in a white garment, visits the temple of an important idol. Frequently the supplicant will prostrate himself several times on the street, and wail. This is indicative of the greatest distress and danger. On entering the temple, he beats the drum, which is always near to the divinity, to arouse the slumberer and notify him that there is urgent need of his kind offices. Candles and incense sticks are forthwith lighted. He then prostrates himself before the idol, and pleads with great intensity for the deity to spare the sick one.

In certain temples the applicants beg an arrow-like utensil about two feet long, upon which the priest has written some mysterious characters. This is taken to the house of the sick person, placed in a frame in a prominent position, incense being daily offered before it and many oblations made, until the sufferer either recovers—or departs this life. Should

Tender Mercies of the Heathen

the 'arrow' device prove effectual, it is returned to the temple with a thank-offering of meats and money. If it prove of no avail, then the arrow is returned, accompanied only by a simple offering of mock money, incense, and candles.

If children are either born blind, deaf, infirm, or deformed, or become so soon after, such a condition is attributed to the enmity of the spirit of some ancestor, for whose follies and vices the little mite is now atoning by suffering. Offerings of meat, vegetables, candles, incense, and mock money before the aggrieved spirit are supposed to expedite the recovery of the afflicted little one.

While living in a country town our native house projected on to the bank of a stagnant pool, with open country beyond. Almost every evening at dusk several women might be seen carrying small basins of rice, vegetables, and meat to certain spots by the edge of this pool. They would then burn a quantity of cash paper, arrange the basins around, fire off crackers, and prostrate themselves. At the same time they would cry out in a loud voice for the spirit of their dead child to return home. Picking up the basins, they

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continued their crying until they reached their home. The place where the fire was kindled and offerings made was where the dead child was wont to play.

We have in our possession a small ancient Chinese book of charms. It contains a list of certain days of good or evil omen, also directions as to the treatment of children suffering from headache, colic, and common minor diseases. Thus far so good. Of course evil spirits are supposed to be the cause of such complaints. But the device for their cure is certainly ingenious. The day and hour is noted when the child was taken sick. Should there be a corresponding day and hour in this book of charms, the parent will find instructions as to what remedies to apply and also the name of the evil spirit which is supposed to be the cause of the sickness. For colic, the parent must buy sheets of white and yellow paper and prepare a copy of a certain picture found in the book representing a horse and also a boy and girl—as the case may be. These must be burned while the face of the parent is turned either towards the north, south, east, or west, according to the date and directions given in the book.

Tender Mercies of the Heathen

And so one's pen might travel on, describing these superstitious methods of treating diseases. Perhaps, after all, such methods are to be found in the history of most nations. The great difference with the Chinese is, that it has taken such complete possession of them and dominated their manner of treatment for so many centuries.

But there is the inevitable cruelty which is associated with all such methods. The Chinese frankly admit the superiority of the West in the science of surgery. This compromise is nothing to their credit. Their dread of the operative measures used by their own surgeons we can understand and appreciate, when everywhere we see the sufferings and tortures to which the natives are subjected, with the terrible results that ensue.

Dissecting is not permitted in China, hence their knowledge of anatomy is crude and ludicrous. How could it be otherwise? The daring with which the ignorant 'outside' doctor uses his skewers for acupuncture must and does result in the maiming of thousands and the premature death of countless numbers.

Supposing a patient has a pain or swelling in some part of his body. He will consult a

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specialist on that particular locality. Should he be an 'outside' and enterprising practitioner, he will clearly (perhaps to his own mind, but certainly not to the mind of the patient) and graphically describe the condition of affairs by the aid of a copper or wooden manikin and diagrams. The patient is probably amazed at such wisdom. And well might he be!

According to Chinese books on surgery—and their name is legion—our complex anatomy has graciously provided 367 places into which the Chinese surgeon can with impunity thrust in his generally unclean skewers. Their object is 'to let out the wind,' or humour. All swellings must contain 'wind,' they contend. What surprises they must have! In some cases the needle is left in for several days! The picture on p. 43 is that of a manikin from a native 'external' doctor's shop, where it was exhibited to demonstrate a few of these 367 places referred to above.

The results of such barbarous and ignorant treatment are to be seen every day in our dispensaries and hospitals. On the morning this was written we attended to a poor fellow with a deep suppurating fistula in his abdomen.

Tender Mercies of the Heathen

It appears that last year he had a swelling, and consulted a native doctor. This misdirected wielder of skewers inserted one into the poor fellow's abdomen to 'let out the wind.' We dare not describe his present condition in these pages. Another man presented himself with a diseased knee-joint. Two months ago he experienced pain in a swelling of his left knee. He forthwith consulted a native doctor. Three insertions were made with a dirty skewer into his offending member. An excision of his knee may save his leg—and life.

Little children with tubercular joints—a very common disease—are, alas! subjected to the same ignorant and wanton treatment. The histories of hundreds can be read in our hospital registers. In the majority of such cases, excision of the joint or amputation of the limb can alone save life.

Blindness in China is very prevalent, perhaps more so than in any other country. The blind are a despised class. 'Associate with beggars, but not with the blind,' says a Chinese proverb. There may be, and probably is, a large element of truth in such a proverb; but how about the little blind children? Those who are not born blind enter this world in

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the midst of dirty surroundings, void of either cleanliness or care. So are they reared from birth, without the slightest attention to cleanliness, either of their bodies or eyes, on the part of their mothers or attendants. The tropical sun and impure atmosphere are also important factors in producing ophthalmia and subsequent blindness. This class is far more numerous than those born sightless, and ninety-nine per cent. could, with care and attention, have been saved from blindness. If they escape that catastrophe during infancy and youth, then they are exposed to the interference of barbers. These scrape and clean the eyes with questionable and generally dirty instruments. The use of powerful and irritating drugs for the cure of eye complaints, also the inserting of needles by native doctors, are answerable for much blindness.

Our familiar and ever-present toothache appears to be a universal complaint. The Chinese form no exception to the pain, even if they do to the supposed cause. We agree with them that the cause is a micro-organism, but when the professional dentist very deftly withdraws a moderate-sized round worm whilst examining the aching tooth—to the

Tender Mercies of the Heathen

astonishment of the victim—we must retire from the field! The dexterity with which he introduces the worm is worthy of a conjurer. Should the tooth be firmly fixed, they do not possess any forceps capable for its extraction. But invention is said to be the offspring of necessity. By giving large doses of mercury, the teeth are loosened. Then the aching one is easily extracted by the thumb and index finger—and several others probably drop out on their own account!

In a book of this description one cannot describe the tortures to which the women of China are exposed in their times of sickness and distress. In fact, they are indescribable. From the cradle to the grave—and even after then, according to their ideas—the lives of the great majority of women in China are involved in superstition, suffering, and sorrow. The birth of a girl is looked upon as an evil omen. Subsequent treatment is meted out to them in accordance with that view. Our Women's Hospitals can testify to that fact. The chapter on Women's Work will illustrate it.

Infanticide *does* exist in China. No doubt it is more commonly practised in some districts

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than in others. The methods adopted are—drowning in a tub, throwing into a stream, or else burying alive. The first is the most common method. The father is generally the guilty party. Poverty is not the only excuse. Infanticide is practised in the families of the wealthy. No measures are ever taken to find out or punish these murderers of their own children. The custom is acquiesced in by the officials.

In many respects death is certainly preferable to the slavery into which so many of the girls of China are sold. Slavery is quite legal. A document is carefully prepared, names inscribed, price quoted and sealed. This is signed by the middle-man, writer, and security. These poor neglected slave-girls are generally ill-treated by their mistresses, and also tortured by the native doctors to whom they are dispatched for treatment after the former have brutally beaten, burnt, or wounded them. Their expression of misery is a good criterion of their real condition. But more will be said on the suffering of women in another chapter.

The nun whose portrait is given on p. 44 had charge until recently of a heathen temple at



A VICTIM TO ACUPUNCTURE.

This lad is now in Hankow Hospital with arm amputated.



Photo by Rev. J. S. Helps.

A MANIKIN SHOWING ACUPUNCTURE.



PORTRAIT OF A NUN AT HANYANG.



MR. TSEN,
HEAD ASSISTANT AT HANKOW MEN'S HOSPITAL.
On the staff for over twenty years.

Tender Mercies of the Heathen

Hanyang dedicated to Hwa-t'ó, the god of Medicine and Surgery. She is eighty years of age. Twenty-five years ago she chopped off her left hand in token of devotion to her idol. After soaking this amputated member in cotton-seed oil and drying it in the sun, she has since worn it around her neck, as in the photograph, as a rather gruesome charm. Three years ago, the temple was pulled down, and a missionary hospital erected on the site.

Patients who visit our dispensaries instinctively place their left wrist upon the table, in a convenient position for the examination of their pulse. It is what they have been accustomed to do when visiting their native doctors. Every disease is supposed to be diagnosed by the character of the pulses. Varying pressures—'light' or 'heavy'—also indicate the imaginary organ affected. With the tips of his fingers placed on the pulse, the doctor bows his head and meditates. His words are but few at any season. Dignity and silence are with him golden rules.

A certain sympathy is supposed to exist between the different points of the pulses and

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the internal organs. In each wrist the pulses are named, Inch, Bar, Cubit, the first being nearest to the hand. A change in the degree of pressure doubles the range of viscera, thus indicated :

LEFT WRIST

INCH,	when	lightly	pressed,	indicates	the	state	of	the	small	intestines.
”	”	heavily	”	”	”	”	”	”	”	heart.
BAR,	”	lightly	”	”	”	”	”	”	”	gall bladder.
”	”	heavily	”	”	”	”	”	”	”	liver.
CUBIT,	”	lightly	”	”	”	”	”	”	”	bladder.
”	”	heavily	”	”	”	”	”	”	”	kidneys.

RIGHT WRIST

INCH,	when	lightly	pressed,	indicates	the	state	of	the	large	intestine.
”	”	heavily	”	”	”	”	”	”	”	lungs.
BAR,	”	lightly	”	”	”	”	”	”	”	stomach.
”	”	heavily	”	”	”	”	”	”	”	spleen.
CUBIT,	”	lightly	”	”	”	”	”	”	”	San chiao.
”	”	heavily	”	”	”	”	”	”	”	Ming mên.

The meaning of the two latter terms is respectively ‘Three passages’ and ‘Gate of life.’ These are purely imaginary organs.

‘The Christian world is a great nervous system which ought to feel the shock and thrill of pain from its most distal extremities. Atrocities in Armenia, famines in India, floods in China, persecutions in Russia, and misgovernment of degraded or oppressed peoples

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—all bring their message and make impact upon thought, memory, and prayer; and at last, though, alas! slowly, stir the heart to help, rescue, and redeem.'

He's true to God who's true to man wherever wrong is done

To the humblest and the weakest 'neath the all-beholding sun.

That wrong is also done to us, and they are slaves most base

Whose love of right is for themselves, and not for all their race.

CHAPTER II

A BRIEF SURVEY OF MEDICAL MISSIONS IN CHINA

EVER since the days when the temples of Aesculapius were the resort of the sick and suffering, and the benevolent labours of Hippocrates were the means of immortalizing him as the father of medicine, the healing art has occupied its legitimate place in the front rank of all honourable professions. But to Christianity alone must be awarded the credit and praise for divesting the practice of medicine of its early empiricism and elevating it to its true dignity and importance as the benefactor of the human race.

Hospitals and dispensaries owe their origins to Christianity. The pagan world had no analogous institutions.

Christianity is God revealed to man in the Person of Jesus Christ. The Christian religion

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is 'not a book, like Islam; a method, like Buddhism; a political ethic, like Confucianism; but a saviour and friend.' Jesus Christ is the unconscious desire of all nations. He reveals the true God whom the heathen nations are seeking after. Christianity alone gathers up into its teachings every fundamental and pure truth contained in other systems.

Medical missions find their warrant in something more than a few solitary verses of Scripture. Prophecy pointed to the Messiah as the great healer; and when He came in the fullness of time, His earthly ministry answered to that character.

Our Lord's commission, first to the twelve disciples and afterwards to the seventy, included the command 'to heal the sick.' The interweaving of the art of healing with the labours of the evangelists is constantly illustrated in the New Testament. Medical Missions have been termed 'the substitute for miracles.'

Li Hung Chang once wrote, 'Confucianism is good enough for the souls of the Chinese, but Christians know more about their bodies.' 'I hope,' he wrote, 'you will send out a great many more medical missionaries.' Although we cannot agree with the first part of this

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sentence, we have striven now for many years to fulfil his latter laudable hope.

The question is frequently asked by both good and intelligent persons, 'Why go to foreign lands to preach and heal when there is so much sin and suffering in Christian countries?' Apart from any other reason—and there are many—the point is, that the evils and suffering in Christian lands exist irrespective of Christian teaching, but in heathen countries they are mainly the products of, and sanctioned by, most of the religious cults.

By medical missionary work we do not mean the more or less indiscriminate scattering of foreign drugs by well-meaning, though, alas! too often misguided missionaries. No doubt some good has been and still is being accomplished by this amateurish work, but it is very doubtful whether the results have justified the expenditure of either the time or money. The experience of many who have for longer or shorter periods embarked on such a service is, that their time and money might both have been used to better advantage. There is very little excuse for this form of work to-day. The fact is, these natives do not need *more* medicine. Already they possess too much of

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their own. One of the great curses in China is the absorption of drugs in large quantities for every ache or pain.

It is rather humiliating to confess that medical work in China was commenced, not by missionaries, but by a doctor connected with the East India Company. In 1820 a certain Dr. Livingstone lived in Macao. He must have been a man with a tender heart and loving sympathy. Seeing daily the intense sufferings of the natives and their inadequate and ignorant methods of treatment, he commenced dispensary work for the poor sufferers. Although he was unable to devote much time to the work himself, he began to train several educated natives. In this work he was greatly assisted by the Rev. Robert Morrison, D.D., of the London Missionary Society, the first Protestant missionary in China. His thorough knowledge of the vernacular proved invaluable, as he acted not only as interpreter, but seized every opportunity to speak a word to the patients of the Divine Healer.

This good work received but little support from the mercantile community. It increased so rapidly, that Dr. Colledge—also of the East India Company—rented and opened a

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native house for the treatment of diseases of the eye.

Dr. Livingstone was the first who systematically brought medical aid within the reach of the suffering Chinese. He was neither recognized nor supported by any Church, and his motives were only of a philanthropic character. In no wise did he pose as a missionary, as we to-day understand the term.

We must not forget that even before this time, as far back as 1805, Dr. Alexander Pearson introduced the practice of vaccination amongst the natives of Canton and Macao.

Another remarkable man, although not a doctor, was raised up to aid in the development of medical missions, not only in China, but also in Africa. In 1827 the Rev. Karl F. A. Gutzlaff, of the Netherlands Missionary Society, reached China. He made astonishing progress with the language. He adopted the native dress and assumed one of their clan names. By the practice of medicine and the distribution of Christian books he commended himself to the natives. Many an extensive journey he undertook in a junk along the coasts and up the rivers of China. It was his stirring appeal to the Churches of Great Britain and

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America on behalf of the needs of China that inspired David Livingstone with the desire to be a missionary—not to Africa, but to China. But for the opium war David Livingstone would have been numbered amongst the illustrious medical missionaries in this land of China. Throughout the whole of his life he had a peculiarly lively interest in the country that had been the object of his first love. But China's loss was Africa's gain.

About the same time that the English nation passed an Act of Parliament abolishing slavery in the sugar plantations of the West Indies, and granted the owners compensation to the amount of twenty million pounds, the American Board of Missions also sent out the first regularly appointed medical missionary, to—in some degree—free the suffering slaves of ignorance and superstition in China. The Rev. Peter Parker, M.D., reached China in 1835, and was the first ambassador of Jesus Christ to fulfil the dual office of healing and preaching in China.

Although our English Churches enjoyed the honour of sending forth to China the first Protestant missionary, yet it will ever be to the credit of the American Churches that they

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were the first to respond to the appalling need of China's suffering millions. There was something characteristically daring about the manner in which they commenced. Not one, but *five* medical missionaries composed the advance party of that great army which has been sent forth by the American Churches.

Not until thirty-two years after the Rev. Robert Morrison's arrival in China, and five years after his death, did a British medical missionary enter China. The pioneer was William Lockhart, F.R.C.S. He reached Canton in 1839. For over twenty years he lavished his numerous gifts of healing in alleviating the sufferings of the natives. He laboured in Java, Macao, Hong-Kong, Chusan, Shanghai, and Peking. During those twenty years or more, he is reputed to have attended two hundred thousand individual patients! At the conference of missionaries held in Shanghai in 1890, over which the Rev. David Hill presided, Dr. Lockhart sent the following greeting: 'As the oldest surviving medical missionary, I wish to send you all good wishes for your success in the meetings you are about to hold. May the presence and blessing of the Saviour guide you in all you

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do, and may you all return to your stations refreshed and strengthened in mind and spirit. I can say with perfect truth that I have never for a moment regretted that I went to China; the enthusiasm that took me sustained me to the end. I ever thought it the best course I could have taken and the best life I could live, by spending it for Christ, and I believe it still.'

During the next thirty years very few additional medical missionaries entered China. Those who did come hailed principally from America. The few who came forth from Great Britain at this period were veritable medical giants. Such illustrious men as the Rev. Hudson Taylor, M.R.C.S., F.R.G.S., founder of the China Inland Mission; William Gauld, M.D., of the Presbyterian Church of England Mission, and James Maxwell, M.D., of the same Mission; F. Porter Smith, M.B. (Lond.), M.R.C.S., L.A.C., representing the Wesleyan Missionary Society, and a few others, were of this period. These noble men, besides enduring privations, experiencing perils, and performing their Christ-like work under conditions peculiar to pioneer work, also did much in creating a better understanding between the

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foreigner and native. Their work was clinical Christianity. It presented to the natives another and clearer aspect of the missionaries' motives.

There can be but little doubt that for many years the Churches in the home lands merely sent forth medical men to act as pioneers in opening difficult doors, breaking down superstition, and, in general, to act as an auxiliary to the evangelistic work. Like many other things, it has taken years for medical missionary enterprise to develop to its true and only ideal. This accounts, no doubt, for the slow development of medical work. As we have read through the list of brief biographical sketches of medical missionaries, who for shorter or longer periods laboured in China, only too frequently, alas! have we been arrested by the words, 'He became engaged in private practice,' or else, 'He returned home.' Exactly; that is what alone could happen under such conditions. But we no longer see through a glass darkly. The New Testament ideal is being recognized and practised. With few exceptions, we hope, doctors to-day are not *engaged* by a Board or Committee to complete a certain scheme of work on the

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foreign field, or to be a necessary adjunct to a body of women and men, to care for their health, and, by practising among the natives, be 'the means to an end' of enlarging the Church. Surely it does not speak well for the Church if she is obliged to resort to such trickery, however benevolent. No; a *true* medical missionary is first and foremost a '*missionary*.' He is never 'engaged,' but ever 'thrust forth.' He is as truly 'called' as Paul was to preach to the Gentiles. Receiving that 'call,' he goes forth, 'counting not the cost,' and labours in the *only* sphere possible for him and in which he could be happy. His presence on the mission-field ought to be sufficient evidence that nothing but the love of Christ has constrained him to—in some degree—'fill up the sufferings of his Lord and Master.'

God said, Break thou these yokes ! Undo
The heavy burdens ! I ordain
A work to last thy whole life through,
A ministry of strife and pain !

Nearly twenty years since the Rev. David Hill wrote, 'In these days of triumphant and rapidly advancing scientific investigation and

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of popular social amelioration, we need to bear in mind that the end of medical mission work is not the glorification of Western science, nor is it merely the expression of a generous human sympathy with our suffering fellow creatures, but the great aim through it should be the revelation of the power, the wisdom, and the love of God. If the learning of the nineteenth century is intended to take the place of the miraculous interpositions of the first, then upon those who have undertaken this medical work rests the solemn responsibility of so employing, so disclosing, or so hiding that learning, that no ray of divine glory shall be eclipsed or even dimmed by the most brilliant achievements of medical science.' And he wrote thus to medical men.

Frequent waves of religious enthusiasm or revival have, during the last fifty years, passed over—or through—the home Churches. Each revival has produced medical volunteers for foreign work. In the eighties there was a yearly average of twelve additional medical missionaries to the China field. We find that there were in 1890 about one hundred and twenty-five medical missionaries in China, possessing British qualifications. And that was

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after thirty years of medical work! But in the past eighteen years that number has been more than trebled. The number from the United States and Canada has certainly equalled that of Great Britain and Ireland.

Of late years a genuine awakening in respect to medical missions has taken place in Germany, Switzerland, and Sweden. Medical men and women from these countries are now to be found doing good work in various parts of this great empire. They do not number more than twenty, but they are of sterling worth.

France is still very apathetic in her concern for 'medical' missions. It has always been a matter of surprise that the Roman Catholic missionaries have never included within their ranks qualified medical men. No doubt the reason lies in their organization. Such an order would have peculiar difficulties in a Church which does not admit of such positive lay agency in its distinctly religious work.

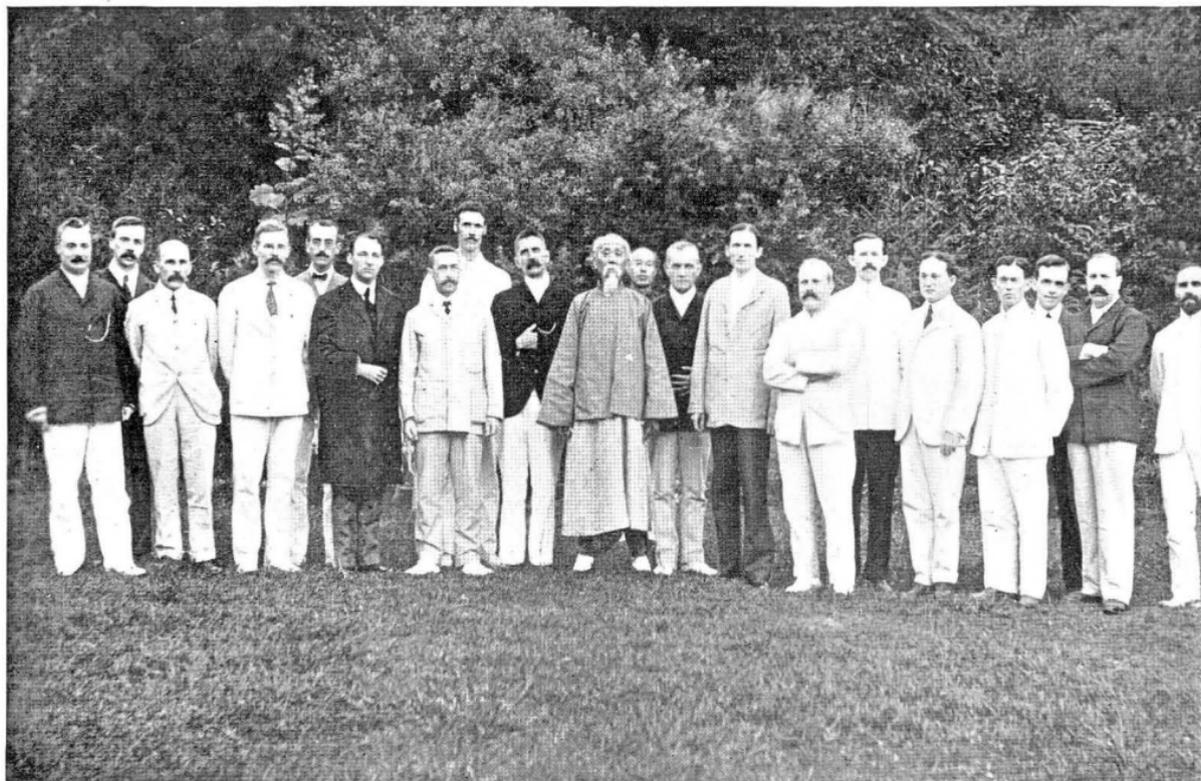
Then the practice of medicine is no longer subordinate to that of the priest or monk, in whose hands it played so often a poor and base part throughout the early and

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middle ages, but it has become a very essential part of the gospel, nay, the gospel itself. About three Catholic missionaries form the total of those directly engaged in this particular work. In other spheres France is quietly aggressive.

The census for 1908 shows a grand total of eight hundred Protestant medical missionaries working in China.

There can be little doubt that this marked increase is partly—perhaps principally—due to the God-inspired movement of the Student Volunteer Missionary Union. Its representatives are to be found in almost every university, college, and school in the civilized world. Delegates frequently visit these schools and colleges, explain to the students the great needs of the heathen world, and also the Christian students' obligation. Thus have young men and women of no mean gifts been aroused, and hundreds have responded to the divine call. No longer does the false stigma of incompetency rest upon the missionary students of education, medicine, or divinity. From our colleges and hospitals have gone forth to the mission-field some of the 'stars' of their profession. In our missionary ranks are

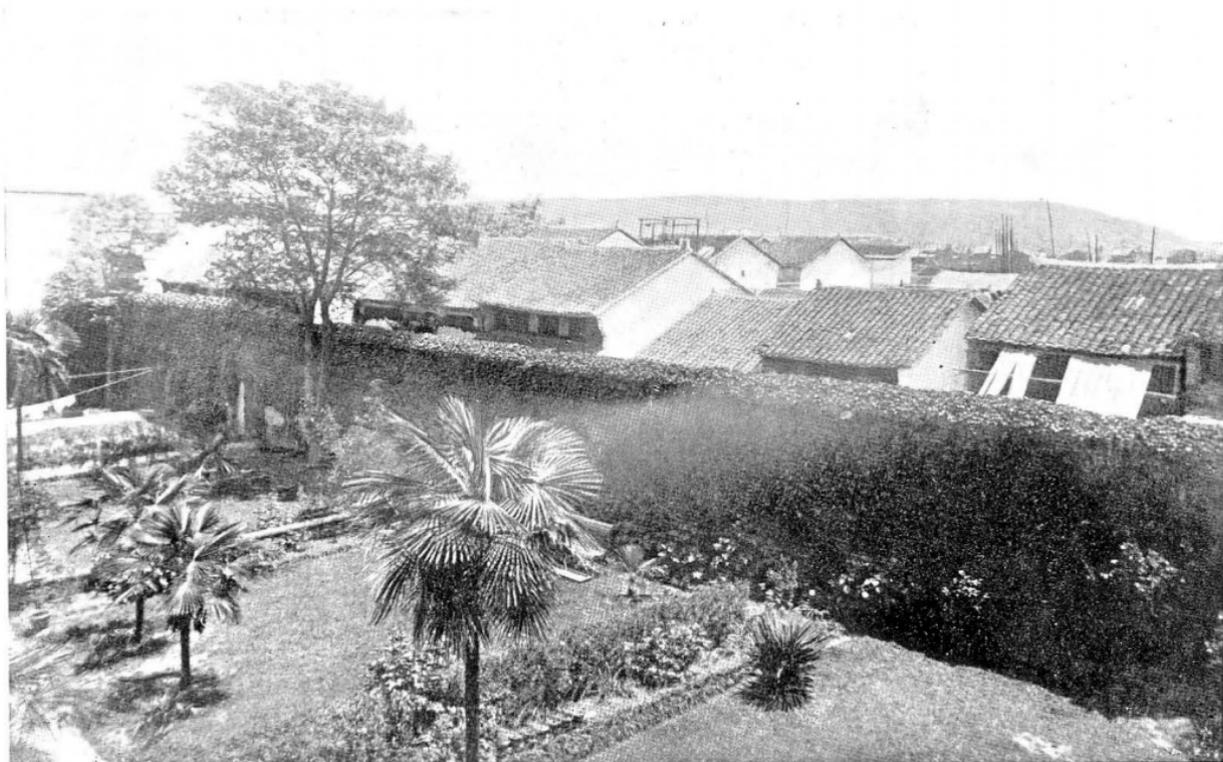


DR. BOOTH.

CHOU FU.

DR. TATCHELL.

Group of medical missionaries, from almost every province in China, who met at Kuling to honour Viceroy Chou Fu, who has taken such important action in the suppression of the opium trade.



VIEW OF THE TORTOISE HILL,

As seen from Hankow Mission Compound, showing the compound wall, gardens, and roofs of native houses.

(See p. 71.)

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to be found both men and women holding the highest possible degrees and honours to be obtained in the realms of medicine and science. And their Alma Maters delight to honour such.

Forgo thy dreams of lettered ease ;

Put thou the scholar's promise by ;

The rights of men are more than these :

He heard, and answered, ' Here am I.'

The frequent contributions of medical missionaries towards the progress of surgery, medicine, bacteriology, and other allied sciences, are recognized and sought for by the professions at home.

Medical education in China is almost entirely carried on by missionaries. Medical colleges are already established in several important centres, whilst others are in process of erection. With two exceptions, the teaching is in the vernacular. This is a work of growing importance.

Another important service which is undertaken by medical missionaries is the writing and translation of medical works into Chinese. Only one doctor is set apart for this great task ; the others are obliged to do their share, whenever they have an opportunity.

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At the present time there appear to be two real and significant dangers in connexion with medical work. One is being experienced by several Societies and Boards. They are now suffering from a dearth of candidates, as an insufficient number are responding to the call of the increasing needs. The tendency here is to lower the hitherto high standard, and accept an inferior type of medical missionary to fill vacant places caused by death, or age, or the need for extension. We must ever remember that 'many are called'—or imagine they are—'but few are chosen.'

The other danger which needs to be very carefully guarded against is the obvious present tendency of medical work to so absorb the interest of people in the home lands that they neglect the direct evangelistic work. We know full well that medical work, with its philanthropic character, strongly appeals not only to Christian people, but also to the very wide circle of those who, though non-professing Christians, are still sympathetic towards the physical needs of the heathen. 'Oh yes,' one is often heard to say, 'I do not believe in missions; but medical missions have my

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fullest sympathy.' By a strange coincidence, we had written thus far, when the mail arrived. Amongst our letters we noticed one in a strange handwriting. Upon opening it, we found it to be from a lady whom we had never met or heard of. Two sentences in her letter illustrate exactly the class of person to which we have just referred. She writes: 'My husband and I do not belong to either of the Christian Churches; but we belong to an ethical society, and attend their lectures. I am in sympathy with medical missionary work, and am glad to hear that the medical mission is a success.' Such genuine sympathy, one must admit, is more with the 'medical' than with the 'missionary.' The philanthropic is stripped of its Christian grandeur, the dead carcass of works is robbed of the living and essential faith. This distinction our Lord never knew. Medical missionary work *is* the gospel, the gospel of our heavenly Father's boundless saving love to *all* men.

We find that the most gratifying results have been obtained in allaying the prejudices of a nation—of causing them to understand the beauty of loving care for their bodies,

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in teaching them the true graces of charity, and in numberless instances leading them to the great Physician of sin-sick souls.

At the close of *New China and Old*, Archdeacon Moule describes an eclipse of the moon, which he saw through a small telescope whilst living in the city of Ningpo. The eclipse was remarkable for the long duration of its totality. Just before the darkness had passed from the surface of the moon, he noticed diamond specks of light appear from out of the gloom, as the sun's rays caught the higher peaks of the mountains. Meanwhile, the whole neighbourhood around was resounding with the roar and clang of innumerable gongs and bells, and with the incessant explosion of crackers. By these performances the people hoped to frighten away the dog who was—according to their superstitious delusion—devouring the fair satellite. Here we have a true picture of the present state of suffering China. 'Darkness covers the earth, and gross darkness the people.' Superstition, ignorance, and cruelty form almost a total eclipse.

'Meanwhile, with the incessant hum of Buddhist or Taoist incantations, and with the

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delirious noise of superstitious ceremonial, and with the deceptive music of pleasure or the hope of gain, the Chinese try to make the darkness pass—but in vain.' Prominent amongst other forms has come Christianity, clothed in the garb of healing. At present its workers are scarcely perceptible when compared with the teeming millions of Chinese exposed to the darkness, superstition, and cruelty of their native doctors. What are eight hundred specks of light upon such a dark firmament? Yet the true light is shining amidst the gloom; and it will surely grow and expand, till—

Out of the shadow of night
The world rolls into light,
And it is daybreak—everywhere.

CENTRAL CHINA

HUPEH AND HUNAN DISTRICTS

THE PROVINCE NORTH OF THE LAKE

THE PROVINCE SOUTH OF THE LAKE

THE PROVINCE NORTH OF THE LAKE

CHAPTER III

THE MOUTH OF THE HAN

LOOKING over the roofs of Chinese houses, through the hundreds of masts belonging to the mass of craft on the river Han and the smoke which pours forth from the numerous furnaces in the Iron-works and Government Arsenal in Hanyang, we can see from our verandah a flat, oblong hill, with a temple perched on the end. This is known as the Tortoise Hill. The Chinese imagine—though few others agree with them—that the hill somewhat resembles the form of that particular reptile! So strong is this belief, that not very long ago, the authorities of the Iron-works, in extending their buildings, being obliged to fill in a large pond at the side of the reclining Tortoise, the natives rose up *en*

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masse with indignation. They were afraid that the poor thirsty reptile would be deprived of water, which for centuries it had been accustomed to absorb from that particular pond, and that some great calamity would befall their city as the result of such deprivation. So the authorities quickly re-made the pond, and it is there to-day.

Many wild and exaggerated descriptions have been published by travellers concerning the view obtained from this hill. One old Jesuit traveller declared it to be 'the finest prospect of the kind in the world!' That is rather a bold assertion. Often have we walked along the back of the unsuspecting Tortoise, and certainly it does command a very unique and remarkable view, but scarcely the 'finest in the world.' To the south, as we look across the wide, rolling, and muddy Yangtze—'hastening to its Imperial audience with the ocean'—there nestles the important city of Wuchang. It is enclosed by a wide wall seven miles in circumference. Wuchang rejoices in being the capital of the Hupeh and Hunan provinces. Therein dwells the great Viceroy and all his functionaries.

The Tortoise Hill is situated outside the

The Mouth of the Han

walls of the city of Hanyang. This is a city of political importance. Since the construction and rapid development of the Iron-works, Arsenal, Powder Factory, and other industries, it augurs well to become the Woolwich of Central China.

Then to the north, across the narrow river Han—which is yearly visited by over twenty-five thousand junks and other craft—there lies the great commercial centre of Hankow. It has a reputed population of about a million. One familiar with the life, activity, and development of Hankow can understand the reason of the natives calling it the 'Centre of the Empire.' There is every evidence that Hankow will become the London of China. Already there is a well-constructed railroad of over eight hundred miles connecting it with Peking. This is but a portion of the projected scheme of girdling the country with railroads from Canton to Peking, via Wuchang and Hankow. Waterworks are already constructed to supply the native city with pure water. Poles are erected along these narrow streets, and the most modern English generating machinery erected, under the supervision of an English electrical engineer, to illuminate

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by electricity this densely populated native city, with its maze of narrow and dirty streets. A wide carriage road is now constructed upon the old city wall, which is greatly appreciated and patronized by the natives. No city in the world, we should think, has undergone such changes and experienced such improvements as has Hankow during the past ten years.

One wonders what would be the thoughts and feelings of those early travellers were it now possible for them to revisit this part of the world! No authenticated visit of Europeans before that of Abbé Huc had ever been made to these 'congeries of cities'—before their visage had been marred by ironworks, cotton-mills, electric light, and other 'things modern'—until the year 1858. Then Lord Elgin reached Hankow in H.M.S. *Furious*. He it was who opened the port to foreign trade. Hankow must have presented anything but a fruitful land! Only three years before, the city had been reduced to ashes by the Taipin soldiers. Her shell alone remained in the form of her walls. These were the sole evidences of any previous city. Truly it was not a very inviting prospect for

The Mouth of the Han

future commerce! 'Every prospect' did not 'please,' and there were few men to be vile. Anyhow, Lord Elgin unlocked the closed gates, and there followed in rapid succession the enterprising merchants.

PIONEERS

The Church was not far behind. Up till this time Protestant missionaries had not advanced beyond Shanghai. Now they commenced to penetrate into these 'regions beyond.' On June 9, 1861, the Revs. Griffith John, D.D., and Robert Wilson, of the London Missionary Society, left Shanghai and travelled up the mighty Yangtze for seven hundred miles in a native boat. Their mission was neither diplomatic or commercial. They were the bearers of 'glad tidings of great joy' to the teeming millions of heathen in Central China. To these ambassadors of the Cross belongs the honour of being the pioneers of the 'gospel of peace' in the centre of China. The Rev. Robert Wilson has passed to 'love's unclouded vision,' but the venerable Dr. Griffith John is still spared to China—and us—and resides in Hankow.

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These two had not been twelve months in Hankow before there arrived the pioneer missionary of the Wesleyan Missionary Society. Not from Shanghai but from Canton, the Rev. Josiah Cox started. And he penetrated still farther. Instead of commencing work in the Concession, with Mr. Wilson and Mr. John, where he would have the society of foreigners, he must needs, like a true Methodist missionary, enter into the very centre of the native city. This is where he was 'needed most.'

Wending his way through three miles of narrow, dirty, and dark streets, enduring the shouting of chair-bearers as they hurried along, avoiding water-coolies, wailing and sore-covered beggars, merchants, scholars, pedlars, in fact, all sorts and conditions of men, women, and children, Mr. Cox was undoubtedly divinely guided to this spot in the very centre of this heathen city. Here he decided to commence work.

As a further proof of his wisdom in selecting this position, if any be needed, the late Mrs. Isabella Bishop, the famous lady traveller, in one of her descriptive books of travel, commenting upon a visit she made to our

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Mission in Hankow, writes: 'Within hearing of the ceaseless din and within smelling of the foul and ancient odours which pervade the city, the colony of English Wesleyan missionaries has placed itself.' That is the position Mr. Cox chose. Of course, he was not responsible for the presence of the 'din' or the 'odours'—whether 'foul' or 'ancient'—for such are inseparable when living 'in the midst of the people.'

Josiah Cox was undoubtedly a man of wisdom, sagacity, and daring faith. He quickly grasped the situation. His idea of true missionary work was that we ought to offer this people a complete gospel. It must cultivate the intellect, care for the body, and satisfy the yearnings of the soul. Hence we find him 'seeing visions' of schools, hospitals, and churches. These must be established. His plan of campaign was very complete. But that is another story.

Was it possible for any Missionary Committee to resist the appeals for help from such a man? God delights to honour workers of such character and sterling faith.

Nobody whose opinion is worthy of respect would ever question the wisdom of this im-

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portant commercial, Governmental, and educational centre as being the most suitable position for a hospital. True, it was not so in the early days of our work, but herein came those 'visions' and 'dreams.' No sane person at home would think of erecting a large hospital in a village or unimportant town! No; they are wisely built in the cities. Here reside the specialists, and to those centres flock both the poor and wealthy sick. It is somewhat similar out here in China. The wealthy come to Hankow, where they know there is a foreign hospital, so also the starving, dejected, and suffering poor migrate to these cities. Many are driven off their flooded homesteads, when their mud and straw huts have collapsed with the floods, and fly to the 'cities of refuge.' These starving outcasts frequently introduce infectious and contagious diseases into these cities.

While the lonely one on the field was wrestling in prayer, and bombarding the Missionary Committee to secure a doctor for Hankow, the Spirit of God was influencing the heart of an able young practitioner in England. We never know where God is preparing His instruments. Their emergence

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from obscure places is generally a subject of surprise.. This is true concerning most of God's heroes. It was so with Dr. F. Porter Smith. Educated at Wesley College, Taunton, he had a brilliant medical career at King's College and Hospital, London. After an extensive tour through Europe, he commenced practice at Evercreech, near to Shepton Mallet. What human influences were here operating upon him we do not know. Anyhow, at this divine psychological time he was led to offer himself to the Wesleyan Missionary Society.

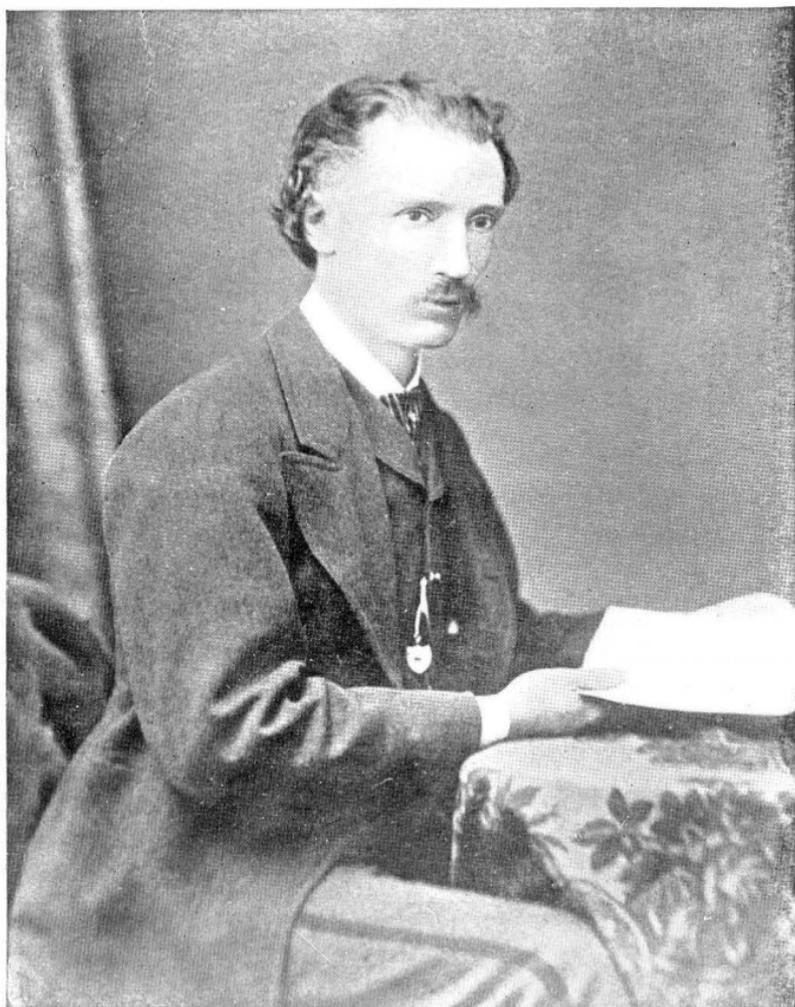
We must remember that there was not then the sympathy with medical missionary work that we to-day enjoy. Here indeed was the answer to prayer. The Missionary Committee realized the need of 'engaging a doctor' to work in Hankow, 'not merely on general philanthropical grounds, but as an auxiliary to proper evangelistic work.' The motives which actuated this young doctor to offer his services are not recorded, but from his after-history we should gather that they were somewhat higher than those of the Committee.

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THE MEDICAL EVANGEL

After some necessary preparations, Dr. Smith, accompanied by his wife, left England for China on December 10, 1863. They travelled on the sailing vessel *Brockham*, which took over five months to accomplish the journey. On May 17, 1864, they reached Hankow. He was the first doctor to pass Shanghai! What a contrast was their journey to our present means of transit! The new Siberian route brings us in touch with England in a fifth of that time. When the connexions of this overland route are completed, it is anticipated that we shall be able to reach London with less than a fortnight's travelling. There are almost visions of 'week-end' excursion trips!

How thankful and relieved must these two travellers have been as they stepped ashore at Hankow! How strange the scene! We can partially understand the mingled thoughts and feelings which possessed them at this time. Such are the experiences of all newcomers: thankfulness at being actually at at one's destination; bewilderment at the surging mass of copper-coloured and sun-



DR. F. PORTER SMITH,
The pioneer of medical missionary work in Central China.



A FEW CONGRATULATORY TABLETS, PRESENTED TO HANKOW MEN'S HOSPITAL BY GRATEFUL PATIENTS.

The doctors' sedan-chairs; entrance to hospital compound, with steps in the distance leading up to the entrance of Bennett Ward.

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burnt natives—with their queues hanging down their backs, or coiled round their heads to be out of the way—all similarly attired and apparently quite unconcerned at our arrival! At once we decide that all their features are alike and it is impossible to distinguish one from the other. But first impressions are sooner or later discovered to be but delusions.

There was but one person to greet them. Right heartily did the Rev. Josiah Cox welcome his first colleague. Henceforth he would not be alone to hold this dark and lonely outpost on the frontier of God's kingdom. Surely the 'dayspring from on high' was beginning to illuminate those that 'sat in darkness and in the shadow of death' in the centre of China!

A week after arrival, these two met together to arrange their future plan of campaign. In reading the very first 'minute' recorded of this district, we are much impressed by its wording. 'A weekly meeting shall be held on Friday evenings at seven o'clock, for the dispatch of business and prayer. It is to be understood that the secular business shall be quickly passed, in order to leave *as much time as possible for prayer.*' The next entry reads:

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'It is desirable to open a dispensary as soon as possible.' Here we find a man just a week on the foreign field, without the slightest knowledge of this very difficult language, moved by the sight of these suffering natives, and knowing that he possessed certain gifts of healing from God, with which he was able to alleviate these sick ones, overcoming the obstacles by devoting 'as much time as possible to prayer.' With such sanctified audacity he decided to commence.

Two months afterwards we find him treating patients in a small native house on the main street, with Mr. Cox acting as interpreter. His equipment was modest, but useful. This was an advance on seeing them at his own house, where they daily flocked.

But these restrictions did not agree with a man of his temperament. All his spare time he devoted to the study of the language. In this he made remarkable progress, as is proved by his writings and translations. So the interpreter was soon dispensed with.

Besides attending to this dispensary and studying the language, he consented to devote one day a week to establishing a dispensary in connexion with the London Mission in

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the Concession, which was over three miles away.

Eight days after commencing the dispensary work, he decided to erect a sign-board in true Chinese style. So a large tablet was prepared with four Chinese characters engraved:

院 醫 愛 普

YUAN
Hall

YI
Healing

AI
Love

P U.
Universal

'Hospital of Universal Love.'

This is the sign which to-day is engraved in stone over the entrance to our hospital, and also over the portals of six other 'courts of healing,' through which, during the year, thousands of sick and suffering pass in search of relief. In fact, it may be considered a 'household name' in the centre of China.

Crowds of patients, with every imaginable and unimaginable complaint, would seek for relief every time the doors of the dispensary were opened. At first no fee was charged, but experience soon wrought a radical change.

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The small slips of bamboo given to each patient on admission were discovered to be either appropriated or duplicate ones made. With these, the enterprising Chinaman—who is ever on the alert to secure a few cash—created a new business, by selling them and also the medicine he obtained to any unwary sufferer on the street. Whether his complaint was of a similar nature to his own or not did not matter. This naturally resulted in rowdiness and disorder at the dispensary. Preaching the gospel of peace and love to an infuriated mob under such conditions was not a great success. Attending to their ailments was futile. So a change was decided upon. Larger slips of bamboo were introduced, on the backs of which were written, in English, the patient's name, with the diagnosis and treatment of his disease. Then in addition, a fee of fifty cash was charged. These new customs were really too ingenious even for the wily Chinaman. The experiment proved successful. It had a two-fold effect. The dishonest business in bamboo slips and medicines ceased, and the patients who came and paid the fee were in earnest. A Chinaman invariably is serious if it costs him anything—and so are Englishmen. As

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before, the poor were attended to without any fee.

No very satisfactory medical work, either at home or abroad, can be accomplished with only a dispensary. Many of the cases needed operation or the constant attention and supervision of the doctor. The instructions as to diet, cleanliness, and other important details, which are given to patients during the brief interview in the dispensary, are mostly forgotten ere they leave the premises, or else never carried out. Such instructions are generally as foreign to the patients as is the doctor who gave them. Then, as to the preaching to out-patients and selling tracts. This is not very satisfactory. Go to any of our large hospitals at home, attempt to preach a strange doctrine to the hundreds of poor mothers with crying babies and frightened children, whom they are trying to pacify, ignorant men who are only concerned about their own ailment and have no attention for anything else, all chattering, or crying, or groaning, or attempting all three, anxiously waiting to be seen by the doctor—and you have a faint idea of the success of similar attempts out here. Only here the conditions are much less favourable. No; the only satisfactory place for

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preaching the gospel is at the bedside. Here we have the grandest and most productive soil for sowing the seed of Eternal Life. There is none to surpass it in China.

SMALL BEGINNINGS

By the end of July two small native houses had been rented to accommodate in-patients. This enabled Dr. Smith to commence important work. True, he had frequently been summoned to visit patients in their own homes, but such work, at least in this part of China, is not even encouraged by us. It is very unsatisfactory. You go to examine the patients in their homes; the friends and relatives pretend to heed most carefully your instructions as to light, air, cleanliness, and diet. But such methods are so absolutely contrary to their own ideas of treating the sick, that they are seldom, if ever, carried out. There is but one place in China where the sick can be properly attended to, and that is in a hospital.

The work of the hospital soon began to make a deep impression. Its influence affected every grade of life. Patients attended from almost every province. Tartar officials, man-

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darins, literary graduates, citizens, villagers, soldiers, and beggars were to be numbered amongst the patients. One of the chief officials of the province of Hupeh sent his little daughter from Wuchang to reside near to the hospital, in order that she might obtain the services of the doctor. It was impossible in those days to accommodate this class of patient in the hospital. Dr. Smith's family still possess the gorgeous scroll which this official presented to him as a token of gratitude and esteem. This instance is of peculiar interest, when we consider with what unutterable scorn the official class were then wont to look upon all Western science and religion.

About this time a military mandarin of high position received benefit from the skilful treatment obtained at the hospital. Shortly after his recovery, he again visited it, not as a patient, but to personally thank the doctor for his kindness. He appeared arrayed in his official visiting robes, and was attended by his full retinue of servants and attendants. He at least was one of the grateful 'ten cleansed' who returned to 'give thanks.'

A priest of the principal Mohammedan mosque in Hankow also attended as a patient.

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Dr. Smith presented him with a New Testament. This he had placed in the mosque for public use.

But all the patients were not so satisfactory. Some were rather a source of anxiety. Eye-washes they would insist upon drinking, powders they swallowed with the paper coverings, which they imagined to be more efficacious. A Chinaman is nothing if not argumentative, and his vocabulary is varied and expressive. So when he receives a bottle containing ten ounces of medicine, one ounce of which he is to take 'three times a day,' he fails to appreciate the wisdom of such a protracted method of treatment. 'Why not take the bottleful at first, and secure a more rapid result?' And many did take the bottleful, but the result was not exactly what they anticipated. Still, the doctor was not surprised at the issue. Nowadays the people are more accustomed to the foreign plan of giving medicine in a concentrated form, and we do not often have such experiences as had our predecessors. But in the country places they are frequent.

We can well understand that such success as was being enjoyed at the hospital would

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sooner or later arouse hostility, especially on the part of the native doctors. And it did. Vile and infamous libels were found posted on the doors of the dispensary. Reports began to be freely circulated as to the motives of the doctor and the reasons for his success. Foul accusations were made of the doctor extracting the eyes and hearts of little children and using them to prepare his wonderful remedies! Further, it was also an enigma to many why such an undoubted good work was being done 'for their sakes.' Obviously it was not for gain. Then it *must* be a political move. Perhaps he was a spy! Probably those keen—though kind—eyes had penetrated into the soil and detected gold, or other precious treasures; while this work of healing was only a delusion and a snare!

Except for the annoyance of such rumours, with their detrimental influence upon the ignorant, no serious harm resulted. But the incessant strain of work and climate was such, that during the second year of the hospital's existence Dr. Smith's health suffered, and he was obliged to go away. This necessitated closing the hospital for nearly two months. A kind of reaction was taking place. The

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two native houses which constituted the hospital were obliged to be given up. Certain irregularities had been discovered among the patients and assistants. It was very difficult to guard against or prevent such conduct, as the doctor's house was unfortunately situated some distance from the hospital.

In addition to these internal disturbances, Hankow was at this time threatened with the invasion of the Nien Fei, or 'league of rebels.' All the shops were closed and business suspended. The whole district was in an unsettled condition. Here, then, was an enforced opportunity for reflection, and for preparing plans for future development.

On the main street a large plot of land had been secured, close to the Mission. It was decided to erect on this site a small substantial hospital in foreign style. Dr. Smith prepared plans during this interval, and had the joy of seeing the progress of the building. It was only 78 feet long and 30 feet broad, consisting of two large and equal sections under one expanse of roof. The rear portion was undivided and capable of accommodating twelve male patients. The front section was divided into a large waiting-room, dispensary,

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and two small rooms for female patients. Altogether, twenty patients could be accommodated. This was a great advance. We note that 'the patients had a good view of the compound, with its trees and lawns.' Such a view is to-day sought for in vain. Buildings all crowded together reign in their stead.

On April 27, 1866, this new building was opened. It was the very first building ever erected in the centre of China for the relief of suffering. The cost was small. One thousand taels, or then, roughly, £350, was not an extravagant sum of money for such an object! On every day of the week, except Sundays—when no doubt they came too, as such a day was not then known or recognized in China—crowds of patients were attended to. The doctor resided on the same compound as the hospital, and had increased knowledge of the vernacular, so that the previous strain was considerably relaxed.

The hospital also became the centre of education in such important subjects—though absolutely foreign to either the mind or practice of the Chinese—as sanitation and hygiene. Dr. Smith prepared tracts in simple language, so that they could be read, if not understood,

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by all who possessed but little education. These were freely and widely distributed without cost, through the thoughtful generosity of a Commissioner of Customs. This was the first attempt ever made in China to educate the natives in the science of preventing disease. To such a race, which is void of a conscience upon such matters as drainage of houses, isolating infectious cases, removing their sick from dark rooms, impure air, and dirt into light, pure air, and clean surroundings, such information and instruction, if only appreciated and carried out, would mean an immense saving of life. Epidemics of cholera, smallpox, and other infectious or contagious diseases, have been responsible for the sacrifice of thousands of lives in China—and elsewhere. In this respect China ever has been, and, alas! continues to be to-day, in a somewhat similar condition to that of England in the days of plague. The marvel is, when we see under what unhealthy conditions these natives exist, that there are any living. By the laws of health, as we understand them, they all ought to be *non est*. The theory of immunity is seen out here to perfection. They have yet to learn that *non est vivere, sed valere vita*.

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Dr. Smith was a prolific writer on many subjects. The following are the titles of a few of his works: *Materia Medica and Natural History of China*, *Confusion of Names*, *The Horned Citron*, *Burying Straw Effigies with the Dead*, *On Chinese Slang*, *Orientalism of Russia*, *Creeds in China*, *Chinese Proper Names*, *Concerning New Black Tea*, &c., &c.

For two years Dr. Smith worked at very high pressure. Another breakdown in health was inevitable. Being single-handed, with no prospect of securing a *locum tenens*, he was obliged again to close the hospital and suspend all medical work for the second time.

Before reopening he decided to reduce the pace at which he had been previously working. This is always a good theory, but so far we have yet to see it put into practice in China. True, the dispensary was opened for only three days during the week, but the patients considerably increased in number. This was his only reduction in pace!

One noticeable feature of that time was the larger proportion of women and children who attended. This was very remarkable for those early days of medical work. They must have loved him. The line of demarcation which

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has always existed between the sexes in the East was more pronounced than it is at the present time. Christianity is breaking down that barrier. The curtain which divided the men from the women, even in church, is becoming a thing of the past. Not only were these women willing to be 'seen' by this male doctor, they also consented to be operated upon by him. This is a further illustration of his gentleness and love. These graces masked his nationality and sex. In the eyes of these suffering women, he was the 'beloved physician.' Women and children are ever the true discerners of character.

INCREASING CONFIDENCE

One of the essential qualifications needful to become a successful doctor—whether missionary or otherwise—is the ability to diagnose the temperament of your patients, and at once secure their confidence. In other words, one needs *tact*. This is a gift. Probably no race calls for the exercise of this gift more than the Chinese, owing to their complex character. The Oriental's angle of vision is altogether different from that of the Occidental.

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The former view things from the opposite side of the globe to that on which we are accustomed to look. Especially is this true of their former estimate of a foreign doctor. Of surgery they give us credit for a superior knowledge, but in respect of drugs and their therapeutic properties, they consider us to be grossly ignorant. *La critique est aisée, et l'art est difficile.* Anyhow, the combination of a foreigner and doctor exposes us to lack of esteem on the part of the natives. To assume or exercise the spirit of autocracy is neither wise nor Christian. That ought never to be the attitude of the 'missionary' doctor. It will never succeed. We are out here, not to govern or command, but to woo and win. For beneath their copper-coloured skin there lies a heart as susceptible to the influences of tenderness, gentleness, and love as is our own. They are human beings, who, up to the introduction of Christianity, had none of those holy influences or graces that have made us what we are—or ought to be.

Pity and need

Make all flesh kin. There is no caste in blood
Which runneth of one hue, nor caste in tears
Which trickle salt with all.

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Dr. Smith was not only an able and sympathetic physician and skilful surgeon, but also a Christian gentleman. To the latter characteristic the professional class succumbed in this district, which was mostly affected by the success of the hospital. Their former hostilities passed away as they learned to know the true man and appreciate his high motives. Dr. Smith gradually cultivated the friendship of the native doctors. They interchanged visits. No longer did they look upon him as a spy or usurper of their rights, but as one ever ready to help. They invited him to examine their methods of treatment through their spectacles. This he willingly did. Often might he be found seated behind the counter of a native doctor's shop, prescribing native drugs, in conjunction with an enlightened native doctor. His unique and profound knowledge of *materia medica* enabled him to do so with credit to himself and benefit to both patients and doctor. He would suggest to the enterprising native doctor, as he prescribed and dispensed his various concoctions, the addition of some particular drug which he knew the Chinese pharmacopoeia possessed, but with whose

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complete virtues the native doctors were not familiar.

The wisdom of such a course of action might be questioned, or by some even sneered at. Either method of attack would be unjustifiable. It was typical of the man's earnest desire to enlighten the people amongst whom he lived and laboured. And this he accomplished without giving the slightest offence. It was his gift of tactfulness.

This was also seen in other directions. His influence radiated through the hospital and the native doctors to enlighten the dark consciences of the people. This resulted in many of the medical charities of Hankow being made more efficient.

Needless to say, the result of the respect and confidence which he had created amongst the natives was that the twenty beds in the hospital were always occupied, and scores of patients waited their turn to be admitted.

Besides the multitudinous duties connected with the efficient working of the hospital in Hankow, Dr. Smith 'must needs go' across the river Yangtze to Wuchang, and there commence medical work. To devote one day a week to this did not materially tend to

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reduce his pace! There, in a small room, fifty or more patients would crowd in to be treated. We know from experience that it must have proved a great strain upon him, especially during the hot months. But that did not daunt him. He was the very first doctor to commence medical missionary work in Wuchang.

After six years of such strenuous life, he had the joy of seeing the work established and still developing. We must ever keep in mind the fact that this was the first medical missionary and foreign hospital in Central China. All the methods of treatment which were adopted were quite contrary to the ancient and prevailing ideas as to medical practice in the Celestial Empire.

As we ponder over these experiences, and view the struggles, trials, and obstacles of this pioneer, we are lost in wonder, praise, and admiration. Even to-day we consider it necessary to heed our Lord's commission to His first disciples, to 'heal the sick, cleanse the leper,' and to be 'as sheep in the midst of wolves.' What must have been the 'going forth' of these pioneers in China? These instructions of our Lord ought to be heeded by all missionaries in that country. Never

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were they more faithfully considered and obeyed than by this first medical missionary to Central China. For him to be able to conciliate the prejudices of this bigoted race, moderate the impatient belief of a superstitious people by word and precept, teach them a strange doctrine and win their confidence, was a superhuman achievement, wrought not by might, wisdom, or power, but by the all-persuasive and sufficient Spirit of God.

Thus it came to pass that this versatile and gifted ambassador of the Cross ever had in view the supreme motive for his presence in China. Whether it was preaching, conducting ward prayers, private conversations in the guest-room or by the bedside, in the shops or homes of the natives, translating books or writing tracts, planning and superintending the erection of buildings, operating, or nursing, in season, out of season, his all-absorbing object was to win this people for Christ. Frequently he experienced that greatest joy in a missionary's life: he saw men and women abandoning their idols, forsaking their superstitions; and by his life and message he led them to know and love Him who 'came into the world, not to be

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ministered unto but to minister, and to give His life a ransom for many.' Jesus Christ was Dr. F. Porter Smith's great example.

HOPES DEFERRED

At the end of six years of faithful and successful service Dr. Smith was compelled to return home. He had never thoroughly recovered from his severe illnesses. His only hope was in the bracing effects of a sea voyage, with several months' rest away from this treacherous climate. His brave wife and little children had endured these extremes of heat and cold for six years, and only those who have attempted several successive summers and winters in Hankow can realize what they (especially the little children) were called upon to suffer. A visit to the cemetery in Hankow is sufficient evidence of these things. Nearly twenty new graves have been made for foreigners during the fortnight before these words were written. Up to ten years ago, scarcely a summer passed without one or more of our European Mission staff, or more frequently their little ones, being sacrificed to this climate. So Mrs. Smith and their children returned home twelve months before Dr.

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Smith. He bravely, if not wisely, refused to leave until a successor had arrived to continue his work. In fact, he volunteered to remain two years longer, rather than have the hospital closed. But this was unnecessary.

At this time there was a young doctor who had just completed his curriculum. He was the son of one of our ministers. He realized that—

The restless millions wait
The light whose dawning
Maketh all things new;
Christ also waits.
But men are slow and late.
Have we done what we could?
Have I? Have you?

Dr. E. P. Hardey felt that he had not done 'what he could,' but here was an opportunity. A doctor was needed for medical work in Hankow. He would volunteer, and consecrate his gifts and talents to God and the suffering Chinese. He reached Hankow in the hot month of July 1870, and was heartily welcomed by Dr. Smith and the small missionary staff. The two worked together until December. Dr. Smith continued the medical work, whilst Dr. Hardey plunged into the study of Chinese. He knew that this was

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his only opportunity. When once he became engrossed in the actual work and undertook the responsibilities of the hospital, he would have very few opportunities for consecutive study of this difficult language.

That is one of the problems which doctors on the mission-field have to face. They differ materially from other new missionaries, in so far that they are, from the day of their arrival, able to do some amount of work without any knowledge of the language. To neglect its study is a great temptation, and should be religiously resisted. A doctor really needs to possess a larger vocabulary than other workers. Unless he is able to read and speak fluently, he is seriously handicapped throughout the whole of his career. It ought to be made possible for every doctor to devote *at least* his first two years to the uninterrupted study of the language. No responsibilities whatever should be imposed upon him during that period. But, alas, how few are thus privileged! After six months Dr. Hardey was obliged to undertake the entire responsibility of the medical work. Dr. Smith now felt that he was at liberty to return home for a rest. He sailed for England, hoping that after a brief absence he would be

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able to rejoin Dr. Hardey. But he never did. His health had been so seriously and permanently injured that the doctors at home refused to allow him to return. So he commenced practice at Shepton Mallet, Somersetshire, where he remained until he passed to his reward on March 29, 1888.

Meanwhile, Dr. Hardey successfully continued the work in Central China. He made many alterations and improvements; otherwise, the principle of the work remained the same. The hospital was able to more than maintain its former character for usefulness and efficiency. Over ten thousand patients attended yearly. The subscriptions to the hospital from both foreigners and natives also increased.

Again the inadequacy of the accommodation became evident. Confidence in the hospital had become established, and its fame had spread far and wide. Plans were again prepared for enlarging it. These were all that could be desired, but the Committee's exchequer was exhausted, and it was fruitless to seek for help from that source. Dr. Hardey, however, was not to be daunted. Gradually he collected from private sources a 'respectable' sum—whatever that may mean. It was not sufficient

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for the completion of the programme, yet he determined to go forward.

Before the conclusion of the scheme, his health began seriously to fail. All the time of his residence in China it had been very unsatisfactory, but he had courageously continued the work. Now, after five years, it began to cause alarm, and it was definitely decided that he must return home, if his life was to be spared. He consented to take a furlough, with the hope of complete restoration to health and subsequent return to Hankow. To the great disappointment of his fellow workers and especially to himself, this was not permitted. Dr. Hardey is still living in Hull.

Now came the first serious check of the increasingly successful medical work. For nearly two years the hospital was closed. How could it be otherwise when no doctor was forthcoming? Several 'offered their services,' but the Committee did not deem them suitable. At last, one who was thought to be the right man was sent out with his family, but the appointment proved unfortunate. He struggled on for a year, and then wisely resigned.

This incident caused the Committee to be very careful in further appointments. They

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decided that any future doctor must also be an ordained minister. The peculiar constitution of the Wesleyan Methodist Church made such a course desirable. Not so to-day. It has needed years of experience, grace, and patience, with the development of a truer conception of its object and worth, to deliver medical missionary work from its great and numerous tribulations, and place it in the fore rank of all missionary enterprise.

After fourteen years of medical work in connexion with our Church at Hankow, the curtain had to be lowered. In this part of this great heathen nation the work had not only been miraculous, but also a new and striking revelation of a beneficent and unselfish interest in the people's welfare. Access had been gained to their hearts, prejudices removed, and the gospel had entered through gates which otherwise would have remained barred.

On the closed doors of the hospital might have been inscribed the words written about Henry Renton of Kelso :

A death like thine hath called a truce,
Heard round about thee many a mile,
And men forget their daily use
To stand beside thy grave awhile.

CHAPTER IV

RESUSCITATION

WHEN Dr. Hodge arrived in Hankow in 1887 he did not find much evidence of any previous medical activity. This is not surprising after an interval of ten years. But that only refers to the evidence of bricks and mortar. The action of weather and climate upon the vacant old hospital buildings had made them dangerous, so with very little effort they had been pulled down to avoid a catastrophe. A few relics were treasured. There was the old and very primitive operating-table, also a small cupboard which contained several ancient and useless instruments. But one important proof remained of the good work accomplished by those pioneer doctors, and that was the fragrant memory in the minds of those who were privileged to be attended by them. Neither time, weather, nor climate could destroy that. Quite recently a tottering old man

Resuscitation

visited our hospital for treatment. Over forty years ago he had been a patient under the care of Dr. F. Porter Smith, whose kindness and skill he referred to in most affectionate and grateful terms. So the work with which Dr. Hodge was entrusted was rather that of commencing than resuscitating.

Any one who has been privileged to know, or, still better, to labour with him, could never doubt the wisdom of the Missionary Committee in committing to him such an herculean undertaking. They correctly estimated their man. It was a work that very few men would even attempt, much less be capable of accomplishing in such an able and successful manner. From a physical standpoint he appeared, and was, totally unfit. During the whole of his twenty years of service in China, he continuously struggled against poor health. But what he lacked in health was compensated for by his strong faith, endurance, and steadfast purpose. These divine gifts enabled him to succeed where many more physically capable would have failed. 'Him whom God calls He qualifies' is an old Methodist proverb, and very applicable to Dr. Hodge.

He came out to China on a somewhat

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different footing from that of his predecessors. Not only was he an able and beloved physician, but in addition, he was an ordained minister, possessing no mean preaching gifts and administrative powers. The 'call' to the ranks of medical missions came to him whilst a young and enthusiastic theological student at Richmond College. While on furlough the late Rev. David Hill visited the college and delivered one of his common-sense and characteristically passionate appeals in behalf of medical missions in China. To influence such a temperament as Hodge possessed, an appeal would have to consist of those two factors. He was arrested, and immediately yielded.

As soon as arrangements could be conveniently made for his entrance into the medical profession, he left Richmond College, and at his own expense entered the London Hospital, Whitechapel. Here he had a very successful career. The influence for good which he exercised in those days is still perpetuated, as we know from experience. It was Hodge who, in face of much opposition, commenced a Christian Association amongst the medical students, which has developed into the strongest of all similar institutions in the London hos-



REV. SYDNEY R. HODGE, M.R.C.S., L.R.C.P.



AN 'EMERGENCY CASE' BROUGHT IN.

Some of the out-patients, waiting their turn to be attended, are very much interested.

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pitals. The hospital did not possess a better musician, so his services were always in request for musical evenings. I well remember, whilst walking the same hospital, being told by one of Hodge's fellow students (now on the staff) how he refused to accompany on the piano any fellow whose song was in the least degree questionable. The drinking habits of those days he also did much to unpopularize. But all this is another story, which has been beautifully related by his friend the Rev. J. K. Hill.¹

Unlike most new arrivals on the mission-field, he had very little opportunity for the study of the language, a fact of which he was ever painfully conscious. For ten years the western part of Hankow had been without a foreign doctor, and the daily sight of the diseased and suffering moved him with compassion. It was useless to sit in Micawber fashion, 'waiting for something to turn up,' so he determined to commence in a small way with the facilities at his command. As there was no hospital, dispensary, or class-room in which patients could be seen, he invited them into his own house, and there, in his

¹ *Sydney Rupert Hodge*, in METHODIST MISSIONARY LIBRARY.

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study, examined and treated them. But their numbers so increased and the inconvenience was so great, that he decided to convert one of the rooms in the servants' quarters into a dispensary. That room is now used to store wood and coal! Any serious cases—and there were many—he was obliged to send for treatment to the London Mission Hospital, which was nearly four miles away.

Whilst carrying on his own work under these unsatisfactory conditions—attending daily in a small hot room to scores of noisy, chattering, sick natives, combating with a cholera epidemic, safeguarding the health of the missionaries, and visiting once a week a branch dispensary at Wuchang—Dr. Hodge used his scanty leisure for the benefit of others.

As the result of a special effort which had been made in connexion with the Jubilee of Queen Victoria's reign, funds were available for building a Women's Hospital, and, as his own buildings of the Men's Hospital could not be proceeded with, Hodge unselfishly devoted himself to the duties of architect and master-builder of this institution. For one absolutely ignorant of building, except what he had culled from books on the subject, to

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instruct careless Chinese workmen, unconvinced of the value of foreign methods, as they then were, and—more difficult still—to insist upon the carrying out of his instructions, was a performance which can only be adequately appreciated by those unfortunate individuals who have had any experience in such matters. Needless to say, the difficulty only roused Hodge to greater determination, and the work was completed to the satisfaction of the Committee.

During this time, by the generosity of David Hill, a large and desirable plot of ground was purchased on the opposite side of the street. Upon this was erected the first of several blocks of buildings which were to form the Men's Hospital. Dr. Hodge prepared plans for a completely equipped hospital, of which the block first erected was only a part. The complete scheme is not yet finished, as sufficient funds have never been available.

That first building was, as have been all the others, marked by thoroughness, both in material and workmanship. No jerry-building has ever been tolerated. Consequently they have been expensive. Good things always are. A doctor of another Mission pointed out to us that the whole of the hospital which

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he had recently erected had not cost much more than *one* of the 'blocks' in our hospital! This led us to embrace an opportunity to inspect his cheap new buildings. Even to the eye of an amateur it was apparent that he had obtained the class of work for which he had paid. After less than twelve months' exposure to this semi-tropical climate, the jerry-work was already yielding and decaying, and since then he has had workmen busy trying to save the edifice from ruin. In contrast with this, our latest addition, after seven years of constant use, has not needed any repairs, only to have the floors painted. Why this difference? Because in the first instance both material and workmanship were the best procurable. Surely ours is the cheapest and wisest policy! At any rate, it is the principle which has ever characterized both the buildings and work of the hospital.

That first 'block' consisted of two wards, operating-theatre, assistants' and private rooms. One ward was named 'Cotham,' after Mrs. Hodge's home, and the other 'Leys,' after Dr. Hodge's old school. The building is now in constant use and is noble in structure, occupying more ground than did the building

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which Dr. F. Porter Smith erected in those early days.

Soon after this followed the erection of the out-patient department. These buildings form an imposing block, with a frontage of 65 feet on the main street and almost immediately opposite to our chapel. On entering a large gate, with the name of the hospital engraved in gold characters over the portal, we find ourselves in a spacious Chinese courtyard, with a guest-room and what then was the mortuary on the right, whilst on the left hand is the gate-keeper's lodge and a store-room. Passing under a Norman arch, we have on the right the hospital chapel or waiting-hall, in which the daily crowds of patients either sit, lie, or walk about, listening, or otherwise, to the preaching of the gospel, until their turn arrives to be seen by the doctor. On the other side of the passage there are the consulting-room and dispensary, with apartments where minor operations are performed and dressings changed. This out-patient department was opened for service on June 11, 1890; and with the block containing wards, operating-theatre, and assistants' rooms, formed the nucleus of the splendid hospital which we now have.

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When an agreeable cessation from building operations came, the hospital was filled, and the work of the out-patient department was developing under its new conditions, Dr. Hodge was stricken down with illness and was obliged to seek change of climate and scenery at Chefoo. Being single-handed, there was no other alternative but again to close the hospital. Such a necessity is very serious out here, and people at home cannot realize how difficult—if not impossible—it is to regain the ground lost by such a course, even if only for a few weeks. The superstitious nature of the Chinese suggests all kinds of weird reasons and ill omens as the cause for closing. It is incomprehensible, to their way of thinking, that the explanation should be the sickness of the doctor! This is one of the reasons why it is advisable to have at least two doctors appointed to each hospital in China.

We find that for a considerable time after reopening there is always a great dearth of patients; while those who venture to come do so with fears and tremblings. For many months after work was resumed the number both of in-patients and of daily visits of out-

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patients did not average one-third of what it had been.

Yet despite these and other impediments, there were many evidences of success and appreciation to encourage and stimulate. One old patient, who had been cured of a very serious disease, visited the hospital, and as a token of gratitude presented a tablet with engraved characters, which in true Celestial flowery style expressed his thanks to the doctor and also to the 'Heavenly Father' for restoration. Since leaving the hospital he had diligently studied the copy of Scriptures which had been presented to him, and the interest which was created in the Word of God whilst a patient had fostered and nurtured after his return home. What was far more gratifying than the presentation of the tablet was his wish to have his name entered on the books as an 'inquirer.' There accompanied him on this visit a small company of his fellow villagers whom he had instructed, according to his light, in the Scriptures, and who now by their conversation showed their desire to learn more clearly how they might find the true and living God. This incident was the cause for much thankfulness to the

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doctor, for, after all, this was the supreme object of the hospital work.

In common with other hospitals in China, our Men's Hospital suffered severely from the effects of the Wusueh riots in 1891. These were a distinct outburst of ill-feeling against foreigners, especially against hospitals. One of the torches used to set ablaze the long-pent-up and subtle animosity against foreigners was the circulation of dastardly rumours that the foreign doctors secured babies, gouged out their eyes and hearts, which they boiled in a huge copper, and thus concocted the medicines which they used to perform their wonderful cures. Then the literary class prepared, printed, and had scattered broadcast, tracts and cartoons of the most revolting and vilest character against foreign doctors. A curious notion exists in the minds of many of the respectable Chinese to the effect that Roman Catholic missionaries are required to forward to the Pope—who is known in China—at least one of the eyes of each dead convert, whether child or adult, as a proof of having so many adherents. Central China in particular was in such a disturbed condition that our in-patients either

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ran away—if they were able—or else their anxious relatives and friends speedily removed them from the supposed chamber of horrors.

These dangers and difficulties were not the only causes for anxiety. They were indeed 'fears without,' but there were 'fightings within.' It was difficult to decide which was the worse. A sharp emergency can be frequently better overcome than a protracted and monotonous trial of endurance. The sprint up a steep hill on a bicycle is not nearly so exhausting as a five-mile run over level ground. So the courage demanded to overcome the fears connected with the riots was altogether out of proportion to the degree and quality of the daily, nay almost hourly, endurance which was essential to fight against the increasing debt on the hospital. The stock of drugs, dressings, and supplies was almost exhausted. The Committee at home were unable to meet the bill for an order sent to England for supplies. To keep free from debt was Dr. Hodge's principle, and he only kept on his work with borrowed money because he knew that the sale of the hospital fittings would, when that

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dread step became inevitable, repay all the loans.

These were dark, faith-testing days. To wait from day to day, unable to do anything, or very little, with no certain prospect as to when the time of desolation and distress would end, needed much grace and strong courage to keep one from chafing. Very few letters were received from the Committee at home, and those which came contained little of an encouraging character.

Up to that time no definite yearly grant had been made to the hospital. And the utter uncertainty whether any grant would be made, and the fear that when one was made it would be absolutely insufficient to continue the work, darkened the horizon.

DEVELOPMENTS

Such experiences were but the proverbial darkness before the dawn. The trials and difficulties through which the hospital had from the earliest days been called to pass came to an end. The Committee at home voted a yearly grant of £150! The long delay in acknowledging the pleadings of those out here was occasioned by some mishap

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during the transmission of letters from China. But truly, in all these personal trials and financial embarrassments, God was, as is His wont, concealing a beneficent purpose. For are not those things in life which come to us easily, generally lightly esteemed? The pebble on the seashore is of little value—we merely have to stoop and pick it up; but the pearl at the bottom of the deep is of intrinsic value, for it involves difficulties, labour, and danger to secure. Just so in these instances. The pearl of rare experience which was buried in the ocean depths of financial difficulties has, ever since it was obtained, proved to be a treasure of rare price. And the legacy has been passed on to us. One of the lessons learned at this time was to seek in other channels for financial assistance. This in many ways necessitated the institution of new customs. But they all conformed to Chinese etiquette. These fresh ventures proved a financial success, and the hospital coffers were greatly augmented.

About that time the Government of China instructed the enlightened and aggressive Viceroy, Chang Chih Tung, to erect large iron-works and cotton-mills at Hanyang and

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Wuchang, and to utilize the mineral wealth which Hupeh and Hunan possessed. Such an undertaking would mean the employment of several thousands of natives. Being quite unaccustomed to working amongst machinery and huge buildings, many serious accidents would consequently occur almost daily. Chang Chih Tung and other officials had frequently come into personal contact with our hospital work, and had also received the impressions which it had made upon the natives. Realizing that the native doctors were quite incompetent to treat the accidents that would certainly happen at such works and mills, it was not long ere he accepted the proposal that such cases should be received into our hospital. We were conveniently situated, being just on the other side of the Han River opposite to the iron-works. The fees agreed to would more than cover the expense incurred in such cases, and leave a balance which could be utilized for indigent patients. This was certainly an advance in the right direction—i.e. the wealthy Chinese assisting his poorer brethren. This particular form of self-support is being practised to-day, although we do not receive so many patients as hitherto: not because there are fewer

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accidents, but the Roman Catholic hospital about three miles away now receives them free of charge, and another hospital has been erected in Hanyang. Still, we continue to receive a fair proportion of the cases' and attend all the officials. Recently these officials, at their own suggestion and expense, have supplied our hospital with a telephone which connects us with all the yamens of the three cities. It was during our financial extremity that this good and prosperous enterprise was initiated. Surely God had concealed His riches in the night!

As the work of the hospital became more extensively known, so its popularity increased. Although a small charge was now made, the patients greatly increased in number. Of course the very poor were admitted free of charge. Dr. Hodge had a similar experience to that of Dr. F. Porter Smith years before, when he admitted all without a fee. Thieves and other vagabonds came in under the plea of sickness, and stole whatever they could lay their hands upon. New regulations were introduced. Patients of the better class were seen for a nominal fee out of dispensary hours. Opium suicides, if brought to the hospital,

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were treated without charge; but if we were summoned to their homes, a charge was made. The reason for instituting a charge for such serious cases is probably not readily understood by persons unacquainted with 'ways that are dark.' The motives for suicide in China are very often the reverse of what they are in the West. One of the most serious experiences that can befall a Chinaman is to have a death occur on his premises, or at his gate. For instance, two men will quarrel—even in China. One of them, thirsting for a *quid pro quo* to balance up the account for injury done to him by his adversary, will in his wrath take opium and forthwith proceed to his adversary's abode. Either inside his house—if he can gain access—or else at the entrance, he will lie down to die. Dreading the terrible monetary consequences, besides the great annoyance of a visit from the official equivalent to a coroner—attended with all his retinue, keen-scented for money and squeezes, which they generally obtain by an infinitude of ways never dreamed of in other countries—the adversary and his friends promptly have the unfortunate victim dispatched on an improvised stretcher to the hospital. It is with them all a matter of

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money. The excited interest manifested by the crowd of persons who accompany the suicide in the methods used for his restoration is by no means any criterion of their distress at his physical condition, but rather of the financial embarrassment into which his death may plunge them. Knowing this, we do not feel justified in using mission money and drugs to deliver them from such obligations. Hence the reason for the charge we make.

In connexion with the habit of opium-smoking, another important work has for many years been carried on with varying success. Victims come into the hospital to free themselves from the curse of the 'foreign drug,' as they term it, for they do not allow us to forget that it was our country which forced it into their country at 'the edge of the sword.'

The taste for opium is easily acquired. Native doctors liberally prescribe opium as a panacea for all ills, so that sickness as well as pleasure is a cause which leads the Chinese first to yield to the temptation; and as opium dens are to be found in almost every hamlet, village, and town in China, it is very easy for them to indulge in the habit. At first it holds its victim as with gossamer threads, but the

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increased craving for the drug binds its slave as with iron bands. The opium patients in our hospital are allowed to mix freely with others. The craving for it is controlled by gradually diminishing with drugs the quantity of opium which they have been accustomed to consume, until they unconsciously cease to need any. Of course, they are searched on entrance and carefully watched during their stay in hospital, as frequently they conceal opium pills on their person, or friends, in their misguided generosity, when they visit the patient, will bring them in opium in some form. As to the success achieved, it is difficult to write. Undoubtedly some are permanently cured of the craving, whilst, alas! some, probably the majority, sooner or later again resort to the pipe or pill that soothes.

SAMARITAN WORK

From the commencement of our medical work, the great need of a Samaritan Fund had been felt. Such a fund would enable the doctor to take in and care for the very poor patients; to buy second-hand clothes for those who needed them when they left the hospital for their respective homes; to pay

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their boat or barrow fares, or, if death claimed them, to purchase their coffins and bury them, this last act being very important. In a country like China, where poverty is so prevalent (and our work in Hupeh and Hunan is principally amongst the poor), such a means of help is absolutely essential. Of course we are frequently deceived, but so is every charity, even at home. Professional beggars seldom patronize us, as their open sores, deformities, and revolting condition are their stock-in-trade, and they have no desire to be deprived of them. On the other hand, poor and suffering patients will somehow travel for miles, spending days and even weeks on the way to the Hospital of Universal Love, where they have heard that they will be taken in and cared for. Often do we find them lying at our gate, huddled up in rags, and covered with dirt and vermin. To pass them in a pharisaical manner and allow them to die or suffer at our very gate would be inhuman, though but for the aid of such a fund we could not do otherwise.

One morning, as we were entering the hospital, we saw what appeared to be a mass of rags at the entrance. As we stooped and moved the rags, something groaned. It was

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a revolting skeleton of a poor dying fellow on a bamboo couch. As he saw a white face, he said in a very feeble voice, 'Foreign teacher, please have mercy on me.' He told us that he had been carried in stages from a distant place and dropped down at our entrance, homeless, friendless, and dying. We at once had him carried into the hospital, where we found him to be in a very critical condition. Both his feet were gangrenous from the effects of frost-bite. One leg we quickly amputated, the result being so good that we were encouraged two days later to amputate the other. To our surprise, but more to his own, with care and good food he made a speedy recovery. A local carpenter made for him a pair of rough but useful wooden stumps, on which he soon learned to get along. Then we were confronted with the perpetual problem what to do for or with him. Better that he had died than to be cast off in his maimed condition. Being deprived of his limbs, he would henceforth be despised by his own countrymen. So we decided to keep him awhile. He was taught to sew by our wives, and became very useful in repairing the garments of the patients. After some time

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he became restless with the desire to return to his clan. We paid his boat fare, gave him some old clothes, and off he went.

One cold day, several months afterwards, as we were about to descend the steps to cross the river Han, we heard some one call us by name. Looking around, there in a dark corner under the huge gateway we noticed the head of a man sticking out of a wooden box on wheels. So we spoke to him. 'Do you not recognize me?' said he. 'No,' we replied. At first we did not, but then it dawned upon us that it was the man whose legs we had amputated. Then he poured forth a piteous tale of how his clan had refused to receive him, but had made for him the wooden trolley in which he was huddled and sent him off. 'To whom should I go,' said he, 'but to you who before had mercy on me?' So day after day he had prevailed upon different persons to earn a little merit by pushing his perambulator a trifle nearer to those whom he knew would have compassion upon him. Again, by the aid of the Samaritan Fund, were we able to care for him. But it was not for long. His exposure, starvation, and anguish since he left the hospital had weakened his brain. The

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poor fellow became quite irresponsible for his actions. One day we missed him from the hospital. Somehow he had escaped through the gates, and never returned. Rumour has it that he committed suicide. Anyhow, his poor body was found in a large pool.

Take another case. A little fellow of about twelve years of age crawled to our entrance and begged to see the doctor. There was really nothing seriously the matter with him, except cold and lack of food. The need of a home and friends had left its mark upon him. As we looked on his emaciated features, and beheld his costume of rags weighted with mud, his poor feet and legs discoloured with dirt and cold, and covered with ulcers, our hearts went out in sympathy to him. What else could we do but take him into the hospital and do all in our power to restore him to health and strength? After a few weeks of attention, good food, and medicine, he quickly began to improve. Then again came the problem what we could do either with or for him. No longer was he an eligible patient for our wards. He had travelled nearly one hundred miles; his parents had been dead for several years; he had neither friends nor

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relatives to whom he could go. Was he not a member of that great class whom our Lord commissioned us to care for? After several efforts on the part of Mr. Tsen, our head assistant, he was apprenticed to the barber who shaves the heads of the patients and who had shaved his head many times.

These are but two typical cases of hundreds whom we have been able to relieve or save by means of the Samaritan Fund. Were we to relate the stories which we daily hear of poverty, distress, and disease, they would certainly move with compassion the hearts of the most indifferent.

The Samaritan Fund was commenced in 1890. A member of the Church of England named Mrs. Bourne, then residing in Devonport, contributed £10, which formed the nucleus of the fund. Since that time the fund has been sustained by subscriptions from individuals and societies. About two thousand patients have received benefit since its inauguration.

EVANGELISTIC WORK

A medical friend of ours once remarked 'that for real downright missionary work, there was nothing to compare with chronic

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ulcers of the leg.' Such cases necessitate a long residence in the hospital, and the possessors are able to learn much of the Christian doctrine and to understand our motives. But these are not the only cases to be influenced. The evangelistic work has ever been a prominent feature with us. Ours is a 'MISSION' hospital. We have ever endeavoured not to dissociate the dual name. 'Mission' precedes 'Hospital.' The work is carried on in that spirit and with that consciousness. 'Hospital' work alone is only a means to an end, but, coupled with 'Mission,' it attains the end itself. Our primary object for being in China is to lead our patients to the Lord Jesus Christ. But for that, we should not be here. In the hospital wards we have the most fertile soil in which to sow the Seed of Life. Human hearts at such times and under such conditions are susceptible to divine influences. We know from experience that

In hours of sickness, grief, and pain
No sufferer turns to Thee in vain.

From the beginning Dr. Hodge was a keen missionary. He endeavoured to create a Christian atmosphere in the hospital, and suc-

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ceeded. It has never diminished. In several hospitals, for want of time and other reasons, the spiritual work is delegated to evangelists. Not so in ours. The doctors themselves have been, we trust, true evangelists, pastors, and teachers. In this, as in other parts of the work, they have ever sought to lead. Of course, we have been ably assisted by our evangelists and staff.

Probably the one man whom God has used and is blessing more than ever in the spiritual work of our hospital is Hu Yuan Hsi, one of our two blind evangelists. Fourteen years ago he was one of the many blind men who parade the streets of China to earn a living by singing lewd songs. One day, as he was strolling down one of the streets of Hankow seeking for patronage, he leisurely entered a mission chapel where the gospel was being preached. He listened to the strange doctrine, and as he did so, the Spirit of God there and then convicted him of sin, of righteousness, and of judgement. He went away sorrowful, and remained unhappy for some time. At last, in his distress, filled with desire to learn more of the gospel of forgiveness and peace, of which he had heard that day in the chapel,

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he sought out the School for the Blind associated with the sainted David Hill. Abandoning a life of what he now realized to be wickedness, he applied for admission and was received. There he was taught to read and write, and instructed in the art of basket-making. Twelve months after admission he was baptized. Although his home was only two miles away, his parents, with eight brothers and sisters, refused to recognize him as a member of the family, but cast him off because he had become a Christian. He did not revile them. The one burden of his prayers was their conversion. And in prayer lies his unique power. He has learned its secret. To-day, as the result of his prayers and influence, all his family—with one exception, I believe—are Christians.

His coming to the hospital as an evangelist was quite an experiment. But it has succeeded beyond all human expectation. He was the pioneer of many of the lads who have gone forth from our Blind School as evangelists. His holy influence, his testimony to the saving and keeping power of God, of which he is never weary of speaking, his powerful prayers and irresistible preaching,



OPEN-AIR SERVICE, WITH PATIENTS, AT MEN'S HOSPITAL, HANKOW.



STAFF OF HANKOW MEN'S HOSPITAL.

Dr. W. A. Tatchell. Sister Bessie. Dr. R. T. Booth.

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have all had their effect in the lives of staff, patients, and others who have been privileged to meet with him. His blind colleague, Yang, is also a man of godliness and promise. But he has only been with us for three years.

Every morning Bible exposition with prayer is conducted in each ward by the doctors, matron, evangelists, and staff. Then bedside work is continued throughout the day. The patients have a good supply of Christian literature, whilst those who cannot read (and there are many) are taught. For the sake of those unable to leave their beds, a service is conducted in one of the wards every Sunday afternoon. To some of us, this is the happiest of all the services. Should the doctors not be preaching, one of them is always present. During the hot weather, this service is held on the hospital lawn, the patients who are allowed to be moved being carried out on stretchers. On several afternoons during the week the matron teaches hymns and singing to the little patients in the Children's Ward. This is greatly enjoyed by the small sufferers—and also by the older patients. Critical individuals who are uninitiated into the mysteries of Chinese music might be inclined to use

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another term for the performance on those afternoons. But that is immaterial.

Every Monday morning, after the ward prayers, all the staff gather together in the dispensary for a brief service. It is always conducted by one of the doctors. Dr. Hodge commenced this service after he returned from his last furlough. A few years since we discovered the staff meeting together every Sunday afternoon for prayer and Bible study. They started the meetings and continue them entirely by themselves. Every Friday evening Dr. R. T. Booth conducts a class-meeting, to which any inquiring patient is invited. This, we trust, forms a convenient bridge between our hospital and the church, for any faltering seeker to cross.

Besides these many efforts to win and woo our patients for Christ, we must remember the private conversations with them, the gentle touch, the sympathetic look, or words of comfort and encouragement, which can never be recorded in any story. These apparently trivial and almost unconscious incidents probably prove more really effective than the systematic routine of organized and orderly services. In such personal contact with those

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in trouble, pain, and distress lies the peculiar charm of hospital work. The details of a well-organized and well-conducted service may soon be forgotten, but kind words, gentleness, and sympathy can never pass from the most dull memory.

Every patient, before leaving us, is presented with a Gospel—thanks to constantly repeated grants from the National Bible Society of Scotland—also several Christian tracts. These we know will never be destroyed, even if they are not read. Equipped with these, and, we hope, bearing pleasant memories of kindness shown and help rendered during their long or brief residence in hospital, they return to their respective homes. Here the patient is greeted by anxious relatives and friends, who listen with interest while he describes the 'things which he has both seen and heard' during his sojourn in the Hospital of Universal Love.

Who can tell where such a work will end? We can trace a little of its blessing. In many instances it has been the pioneer agency in towns and villages which hitherto were impregnable against the foreigner and the gospel. Many instances could be furnished from our

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own mission, but we will relate one from the story of another, which occurred several years ago in Tientsin.

When Dr. J. Kenneth Mackenzie reached this city, in March 1879, everything looked dark for the medical mission. While at prayer with the native converts, a member of the English Legation learned that the wife of the Viceroy was seriously ill, the native doctors having wholly despaired of her case. The Englishman making an earnest plea that the foreign doctors should be consulted, the Viceroy committed his wife's case to the care of Dr. Mackenzie, who was speedily summoned to the viceregal palace, and in a few weeks Lady Li was quite well. Her treatment was followed by successful surgical operations in the presence of the Viceroy. The Court was stirred, and great public interest excited. The Viceroy agreed to pay the current expenses of both a hospital and dispensary, when erected. In a short time a building was completed, with wards for sixty patients, the Chinese themselves contributing the sum of £2,000.

'If you will try to realize the conditions of an Eastern city,' writes Dr. Mackenzie, 'you will quickly understand that when a great

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potentate takes you by the hand, the land is all before you. So we found that, in our daily visits to our noble patient, our steps were thronged with eager suppliants, who, hearing that the Viceroy's wife was undergoing medical treatment, sought for relief from the same source. You know how a story often grows as it spreads, and so this case of cure was being magnified into a miracle of healing. A Chinese official residence is composed of numerous quadrangles, one behind the other, with buildings and gateways surrounding each. To reach the family apartments we had to pass through these numerous courts, and here we were beset with patients from the crowds assembled outside the gates, and the friends of soldiers, doorkeepers, secretaries, and attendants, who had succeeded in gaining an entrance. The poor also besieged us as we entered and left the yamen. It was truly a strange gathering we found daily collected round the outer gates—the halt, the blind, and the deaf were all there, waiting to be healed; indeed, the whole city seemed to be moved. High officials sought introductions to us through the Viceroy himself.'

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It is inconceivable that any other form of missionary agency could have produced such an impression in so short a time, or have so overcome prejudice and opposition.

It is stated that Dr. Mackenzie was instrumental in bringing more souls to Christ in one year than all the other members of the mission. We cannot be credited with such a reputation. If tabulated results of conversions are needed, then we must retire, as we ourselves see little spiritual result of our labours. This we leave to others. Our hospital draws patients from far-away places, to which they return when their stay in the hospital ends. Probably we never see them again; but the germinating power of the Seed of Life is to be found in the hearts and lives of hundreds, nay thousands, now living in obscure and unlikely places, away from all Christian help and sympathy. We sow, but others are privileged to reap. Some day we shall rejoice together.

But the results of medical evangelism are by no means small. They are both numerous and far-reaching. The Bishop of Victoria, Hong-Kong, who has been connected with the diocese twenty or more years, says, 'I

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have known convert after convert in our hospital at Ningpo, and I can certainly point most distinctly to three churches which have been born in it.' 'Nearly all admitted to the church in this city have been brought in through the hospital,' is the reply of an experienced worker. Another writes, 'The majority of those who have been admitted here to our church were from the hospital.' A writer in the *Church Missionary Intelligencer* says, 'I will mention one thing that I learned in talking with the American missionaries. They told me—several, if not all of them—that they scarcely ever met with a person interested in Christianity, or a Christian inquirer, in the villages within a radius of one hundred and fifty miles from Hang-chow, who had not been brought to be interested and to inquire through the means of teaching in the hospital.'

As we have indicated before, the influence of our hospital is extensive in more than a geographical sense. 'Now I hold,' wrote an old Chinese missionary, 'that of the thirty thousand who have passed through our wards, and whose homes are scattered over an area three or four times larger than England, every

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one may be taken as a centre of influence more or less favourable to Western thought and Western men, and so to the messengers of Christ; and thus by the work done at our hospital, we are preparing the way for future conversions on a pentecostal scale.'

And such testimonies could be made concerning the spiritual work and influence of the Hospital of Universal Love.

LATER EXTENSION

In the nineties the medical work of our district was centred in three hospitals, with dispensaries, equipped by qualified practitioners. This work was supplemented by a few other dispensaries where missionaries gave some attention to the slighter ailments to which flesh is prone, which would yield to the treatment of some simple remedies. The tremendous burden and responsibility of the medical work for the whole district had for years been borne by two doctors—Morley and Hodge. Repeated requests for additional doctors were made. In the irrepressible law of progress, new medical work had been commenced in various centres, and the necessity

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for sustaining it, though essential, was a physical impossibility with only two doctors. A fortnightly visit to Hanchwan, a station sixty miles up the river, had been arranged, but very few were actually made. Once we accompanied Dr. Hodge. Leaving Hankow at evening, we sailed all night, and with a fair wind reached Hanchwan about noon the following day. Until late that night we were busily occupied seeing the crowds of patients who pressed to be attended to by the foreign doctor. After another night and part of a day in a small boat, we reached Hankow. So long as Dr. Hodge was without a qualified colleague, such journeys became impossible. The work at Hankow consequently suffered—and so did his health.

Then a dispensary was commenced at a chapel in Hankow about a mile from the hospital. This chapel was a gift of the late Dr. Wood, of Southport. As it was within walking distance, two visits a week were made. This occupied two half-days during the week. The Women's Hospital at this time was without a doctor, but it was kept open for more than a year by the over-worked doctor of the Men's Hospital. Thus

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Dr. Hodge was responsible for two hospitals, with dispensaries, both women's and men's; and three other dispensaries, at Wuchang, Hanchwan, and Kung-tien. Dr. Morley was at Teian, and responsible for that extensive district.

Surely they had cause to feel their incompetency to perform thoroughly the splendid work which God had entrusted to them! Though much was being attempted at tremendous physical and mental outlay, yet there were splendid opportunities which they were unable to embrace. Even around the hospital lay the vast and thickly populated country unvisited. So visits to Hanchwan had to be discontinued, and have never been resumed.

No story of Hankow Hospital would be complete without reference to one who, though not a doctor, yet at this crisis greatly relieved the tension of the hospital work. We refer to Edwin Jobbins, whose all too brief life and godly influence are affectionately remembered and felt even to-day. He was born of pious parents in 1846. Very few opportunities were afforded him for education, but he cultivated the art of self-improvement.

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He began to study chemistry, and when advanced in years qualified as a pharmacist. From his earliest years he manifested a great simplicity of nature, from which sprang a genuine, bashful modesty and an unselfish importunity in winning souls which characterized all his conversation.

On seeing David Hill's appeal for lay helpers in China, a new call came to him, and he responded. To better qualify himself to work amongst the heathen, he removed to the East End of London, where for several months he lodged with a poor Jewish family and worked amongst their race. There were difficulties of age and health, which his friends and also the authorities of the Lay Mission decided could not be overcome. So they refused his offer for service. But he was certain that God had called him. He worked harder than ever at his profession of a chemist, until he had secured sufficient money to pay his passage to China, where he intended to use his small private income to support himself.

And so, when nearly fifty years of age, Edwin Jobbins bade farewell to his friends and country, determining, with God's help,

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not to see them again until old age should prevent his doing further work. On arriving in Shanghai, he shaved his head—or rather, had it shaved—took lodgings in a Chinese inn, and immediately began to sell tracts on the streets. He made one journey with another missionary up the Soochow creek, but a serious attack of malarial fever laid him aside in the hospital there for nearly a month.

On his recovery he communicated with David Hill, who urged him to delay no longer in coming to Hankow to assist Dr. Hodge. This he did. It was impossible for one already past middle life to become fluent in Chinese, but he made rapid progress with the written language, and was no mean speaker. At every opportunity, such as waiting a few moments for a meal, he would take from his pocket a small book in which were written Chinese sentences, and commit one to memory. Truly he 'bought up his opportunities.'

All the work of the dispensary and the training of native dispensers was committed to him. After a very short time in China he undertook a three weeks' journey all alone into the country, and seemed to feel quite as much at home with the heathen stranger as

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with his fellow Christians. For the next eighteen months he put forth constant effort to do the best he could to fit himself to do still better, always asking himself and others, 'How can I get this people to listen to the Word of Life?'

As careless at first of his health as he was of his comfort, he was remarkably amenable to advice, and soon corrected some mistakes in living, without in the least abating his work, but rather that he might do more. In the dispensary and at the bedside he spent hours every day explaining the gospel, and found exercise in selling books and preaching on the streets. He felt that all who came into contact with him, whether rich or poor, were sent by their unknown God, for a purpose of which they were not conscious; that the opportunity for the accomplishment of that purpose lasted perhaps only for a moment, and that its fulfilment rested with him. So he did not tarry. His own time for meeting with his long-known Saviour also came unrecognized. Until the last moment of his brief illness he was hoping still to accomplish years of work. Then he was suddenly called to Him who rewards not according to the number of

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sheaves gathered in—though they be many—but according as we have loved the needy and least of His children.

Dr. Hodge's much-needed furlough was already overdue, but no doctor arrived. He manfully stuck to his post at great physical cost. He determined that so long as he could endure, the hospital should not again pass through the experience of being closed. Until relief came, he refused to leave. But his sickness and weakness led him into the valley of humiliation. He felt, as did Napoleon returning baffled from Moscow, 'God Almighty has been too much for me.' So he was obliged to yield.

As the work at Hankow was far more extensive and considered to be more influential than that at Teian, Dr. Morley volunteered to close the hospital at Teian and take Dr. Hodge's place during his enforced absence in England. That showed Dr. Morley's unselfish desire for the prosperity of God's work rather than his own special piece of it, yet the necessity for such a step cannot be regarded with any satisfaction by the friend of medical missions, who desires to see every station occupied all the time.

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THE LAST TEN YEARS

When Dr. Hodge returned from England in March 1899 he was accompanied by the Rev. Dr. R. T. Booth, a member of the Irish Conference. His support was promised by the Christian Endeavour Societies of Ireland. At last the prayers for an additional doctor had been answered. Instead of again being obliged to revive a lapsed work, they were, thanks to Dr. Morley, able to continue the work of the hospital with renewed energy and brighter prospects than ever before. Restored health, an additional doctor, and a replenished exchequer surely composed a desirable capital with which to dare developments. And many were soon proposed.

Alas! the following year the Church in China was called to endure the greatest persecution either before or since experienced. Although during this 'Boxer' year not one of our own missionaries was massacred, still, for several months the work of the hospital was partially suspended.

Some years since an ocean liner encountered a typhoon in Foochow harbour. She was 'lying at anchor,' and at the same time had

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her engines working at 'full steam ahead.' But she made no headway. All that she could do was to prevent her anchors from being 'dragged.' That was very much the condition of our hospitals and churches in China during those months of 'Boxer' riots. Other hospitals, churches, schools, and houses were looted, destroyed, and burned; hundreds of Christian men, women, and little children—both foreign and native—were murdered, outraged, and burned. But our small Methodist craft was left—in the words of the hymn—with

Rent cordage, shattered deck,
Torn sails, provisions short,
And only not a wreck.

Towards the end of July all the women and children were ordered by the Consul to leave their stations and seek refuge, either in Shanghai or Japan. Several whose furloughs were nearly due went direct to England.

All the in-patients of our hospital quickly departed, but the out-patient department remained open, although very few attended. Rioting was in the air. 'Turn out the foreigner,' was the one cry. The keeping of our hospital gates ever ajar encouraged our



HANKOW MEN'S HOSPITAL, FOREIGN STAFF.

Dr. R. T. Booth.
Mrs. Booth.

Sister Bessie.

Dr. W. A. Tatchell.
Mrs. Tatchell.



THE OPENING CEREMONY OF THE DAVID HILL AND BENNETT WARDS,
June 6, 1902.

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members to stand true. They could see that we had no intention of running away, or any desire to be turned away and leave them. Towards the end of the year in-patients were again received, but the manifest disinclination on the part of many nervous ones to enter the hospital for treatment continued.

It had been decided to erect another block of buildings on the hospital compound, and the work ought to have been begun during the autumn, but, in consequence of the riots, it had to be postponed until the following spring. Then followed the greatest and most important development in the plant since the opening of the hospital, for in one fine structure were included a large operating-theatre, a research laboratory, and two large wards capable of accommodating twenty extra patients; and in another part of the compound was built a laundry. The two wards were named 'Bennett' and 'David Hill.' They are spacious, well ventilated, cool in summer and warm in winter.

The day of opening was memorable. Mrs. Fraser, the wife of our English Consul-General, graciously 'unlocked the door.' The huge gathering was unique in character.

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Every Chinese official of these three cities, from the Viceroy downwards, either was in attendance himself or sent representatives who were arrayed in gorgeous official robes. How strange the singing of hymns, the prayers to the God invisible, and the address must have appeared to them! One wonders whether they asked themselves from what source the love and power came which enabled these foreigners to sacrifice their earthly prospects at home, come out here to build such 'halls of healing' and tend to the poor and out-cast—not for gain, but because that power and love had constrained them? We wonder, what thought they of Christ?

Including the furnishing, these additional buildings cost about £1,400. Towards this sum the Committee generously contributed £800; two gentlemen in England, quite unsolicited, each sent out £100; at the opening ceremony about £125 was realized, principally from the Chinese officials; while the balance was earned by the doctors at Kuling Sanatorium during their annual *holiday* by attending sick foreigners.

Any one possessing the smallest acquaintance with hospital management, or even those who

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do not, must know that a hospital with nearly seventy beds involves the services of trained nurses. This important branch of our work in China is peculiarly difficult. In the early days of our hospital the only apology for nursing was offered by elderly men, who were slow to learn and more slow to perform. These were succeeded by younger men, who were instructed by the doctors in the art of nursing, and, taking all things into consideration, they did fairly well. But true nurses, like musicians, artists, or orators, are born, not made like coins of the realm. And the gift seems to be distributed entirely to the gentler sex. It was, and remains still, quite contrary to Chinese ideas to have women nurses for men's hospitals, yet for many years Dr. Hodge had cherished a pious hope that 'some day' there would be an English matron to teach and control the nursing in our hospital. Such a proposition was scorned by many Protestant missionaries, ridiculed by others, and thought to be a delusion and snare by most. The one to favour and even encourage such an innovation was, forsooth, an educated Chinaman! Our late esteemed Chinese pastor, the Rev. Lo Yu Shan, had been an

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inmate of our hospital, and thoroughly appreciated all the attention given and care bestowed upon him by our men nurses. One day he greatly surprised us by remarking that 'it would be a good thing when we followed the example of the Roman Catholics in respect to nursing.' Wishing to draw him out, we asked what he meant. He replied, 'It would be better to have an Englishwoman in the hospital.' Still desirous to obtain his opinion on this important though controversial subject, we urged in succession all the objections which we had so frequently heard launched against such action. But he over-ruled them all. He said, 'The presence of a woman in the wards would suppress all wrong talk and doing; nobody would dare to say a word against her. I am a Chinaman,' he said, 'and I know my people. However well a Chinese nurse may do his work, we cannot help feeling that he does it for pay; but when an Englishwoman leaves her home to come out here to nurse us, we know that she does it for *love*.' And his opinion has been confirmed.

In November 1903 Miss Gell arrived in Hankow to act as our first matron. She was the very first foreign woman nurse to under-

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take duty in a men's hospital in Central China, if not in the whole of China. (Of course for years there have been 'sisters' in the Roman Catholic hospital in Hankow Concession, but they are not allowed to do any actual nursing in the men's wards.) When in due season she became the wife of the Rev. Sylvester Lee, the vacancy was ably filled by Miss Roscorla, an associate of the Wesley Deaconess Institute. During this time a Wesley deaconess was preparing herself to occupy the position, and in May 1906 Miss Bessie Mountford arrived.

The experiment has far exceeded our most sanguine expectation. Since the advent of 'Sister'—as the matron is called—the appearance of the wards is analogous to a bachelor's quarters (not mine, of course) a few weeks, nay days, after the advent of a careful and tidy wife or sister. Some conditions in life defy description; they can only be left to one's imagination. Chaos becomes cosmos. Never before did we realize how many things a nurse wanted—we use the word 'want' guardedly—until Sister came. She has that 'restless will' which almost hourly discovers the need of something extra for the comfort of the patients.

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The young male nurses are well trained and disciplined in the true art of sick-nursing. They receive lectures several times during the week from the doctors and matron. Promotion is secured according to their examination results. Several of our senior nurses are now occupying responsible positions in other hospitals. Many are sent to us by other doctors to enjoy—or otherwise—our curriculum. Without any pretence to egotism, our hospital is now recognized by all as occupying the premier position for efficiency, cleanliness, and discipline, with thoroughness in the training of male nurses.

So far there has not been one single instance of rudeness or disrespect on the part of the patients towards the 'Sister,' and this is worthy of note, considering the class of patients that we usually receive. Her presence in the hospital has undoubtedly produced a desirable effect upon the assistants, nurses, patients, and even the doctors.

Sick-nursing in China is but in its initial stage. It is a sphere in which the Chinese young men and women ought to excel, and to encourage them in such an enterprise and give to nursing its true dignity, we have in

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connexion with our Central China Medical Missionary Association an examining board for the biennial examination of recognized nurses, and to the successful candidates we issue certificates.

AFTERMATH

The story of our hospital during the past few years is one of cloud and sunshine, with all their varying hues. Clouds of disappointment, change, and even death have too often overshadowed the work. But the sunshine of God's smile, the perceptibly clearer Christian atmosphere, the increase in the number of patients, the growing confidence in our methods, and the more intelligent understanding of our motives shown by the natives, have chased our gloom away.

Never were the activities of the hospital more manifold or more successful than they are to-day. Never were our opportunities for wider and fuller service more apparent. The present awakening of China is in itself a stupendous opportunity. It is our duty and privilege to respond to her pleading; to neglect it would be criminal.

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As we sit and pen these closing sentences in relation to our Hankow Men's Hospital, we lift our eyes, and there, on the summit of a hill, we can see 'God's Acre' enclosed by a stone wall. As we gaze, our thoughts go out—as they often do—to the life of him whose prematurely worn-out frame had been

Nipped by the wind's unkindly blast,
Parched by the sun's directer ray,

but whose glorified spirit still keeps its vigil. Too often have we to visit that 'place of memories' to add another to the host of God's saints who rest from their labours. But we also go at other times. Then we stand at the side of Sydney Rupert Hodge's grave, and silently pay our tribute of love to the memory of a real brother, true friend, and colleague for over sixteen years. His name can never be dissociated from the resuscitation and wonderful development of what to-day is the finest hospital in Central China. For over twenty years his life in Hankow was a long succession of difficulties and trials. These he overcame or bravely endured. But his optimism was infectious. Though feeble in health, his strength was the result of his implicit trust in

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his Lord and Master, through whom he became 'more than conqueror.' To very few men is granted the privilege of reviewing such a career of increasing success or more glorious triumphs in the warfare of the Kingdom. To those of us spared to continue such a work, we purpose to

Do our part
Here in the living day, as did the great
Who made the days immortal.

One of his two unrealized schemes for the completion of the whole plan of the hospital we are about to commence. Both schemes were very near and dear to his great loving heart. During his last illness he said, 'I worked so hard and so longed to get the "Home for Nurses" finished, but I could not. Always this lack of funds! Always this burden of finance!' The 'Home for Incurables' at present is an impossibility, but already the plans are prepared and part of the required sum secured for the erection of the 'Home for Nurses.' When this is accomplished, the 'Hospital of Universal Love' will henceforth be appropriately known as the 'HODGE MEMORIAL.'

CHAPTER V

THE CITY OF VIRTUE AND PEACE

FOR an ideal country hospital Teian has premier claims. It has been called 'a storm-centre,' and no doubt some past experiences justify the term. But it has also been a centre whence the gospel of peace and healing virtues has gone forth.

It is a medium-sized prefectural city, about one hundred miles north of Hankow. Nearly thirty years ago one of our colporteurs visited the city. Whilst selling books and preaching on the street he entered into conversation with a tradesman who happened to be a native of Kiangsi Province. 'Indeed, that is my family home,' gleefully replied the colporteur. A natural friendship ensued. That night, and for many days after, he lodged in the hall of the Kiangsi Guild. It became the head quarters for our missionaries, who frequently visited the city, until they were able to rent

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a convenient house. For several years great persecution was endured. Skirmishes, attacks on and looting of our premises, frequently took place. But all that—and more—has been told elsewhere.

Early in 1886 it was with peculiar pleasure that the small band of faithful workers in Central China received the glad news that the brother-in-law of our pioneer Wesleyan missionary in Central China and grandson of an ex-President of the Conference had offered himself for medical mission work in Central China. The arrival of Dr. Arthur Morley in November 1886 broadened the base of the recently created Lay Mission by adding medical work to the evangelistic agency originally proposed. He did not at once enter the city in which his life's work was to be accomplished. During the spring of 1887 Dr. Morley, then being engaged in the study of the language, was earnestly requested to accompany our brethren of the American Methodist Episcopal Mission to the distant province of Szechwan. These brethren had been ruthlessly banished from there a few years before; and now they desired to re-establish mission work in the city of Chung-

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king. They were wise in their choice. Such an enterprise appealed strongly to the physically able and enthusiastic young doctor. So he consented. It was a perilous journey, and he almost lost his life by drowning. Along those two thousand miles of travel he assisted in preaching and scattering the Word of God. After seeing our brethren in peaceful occupation of that city, he returned to Hankow.

Soon after his return, for the first time he visited Teian. From what he saw, it was evident he would have to live a rough and comfortless life. This he was quite prepared to do, if only he could be furnished with sufficient drugs and instruments to commence and carry on the work of so Christlike a character. The house then occupied by our missionaries had been thrice assaulted. On the last occasion the missionary had been driven out, and the house looted and left a complete wreck. So Dr. Morley set to work and restored the premises, after they had been lying in ruins for over three years. The back half of the premises consisted only of the framework of two Chinese buildings. These were soon transformed into a compact little mission hospital, capable of containing twenty-

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five beds, with an operating-room, bath-room, kitchens, &c., also a residence for the bachelor doctor and minister. The fittings and medicines only cost £19 12s. 8d. A generous gift of £10 from Mrs. Morley, of Jersey, supplied blankets, sheets, &c. Was money ever better spent?

When all was completed and ready for occupation, six gentry of the city were invited to a feast and to inspect the establishment. But, alas! every one of them declined the invitation. Not so their poorer neighbours. Over fifty of them sat down to the feast, and with prayer and praise the work was sealed.

Notices containing the customs and regulations of the hospital were freely circulated in all the numerous towns and villages around. Patients soon began to come. Even a few operations were performed!

It did not take very long before the news spread far and wide. During the first year 1,450 patients attended, 99 major surgical operations were successfully performed, and 120 in-patients admitted. An opium refuge was also established, where hundreds of opium slaves have been set free from the curse.

One such, while in the refuge, became

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deeply interested in the gospel. When he returned cured to his distant home, he persuaded six of his friends and relations to abandon idolatry. Thereupon the priests and some zealous worshippers of the idols took him, like one of old, before the mandarin, and straightway charged him with spreading strange and vicious doctrines. When the poor fellow was asked his reasons and motives for such conduct, he told the official how once he was a slave to opium-smoking, but had been cured of the habit in the Teian hospital. Thus he pleaded that having been saved from one sin, he was praying to the only True God to be delivered from every sin. 'I can see nothing wrong in that,' pleaded the prisoner.

'Neither do I,' replied the mandarin, and dismissed the case.

As the hospital work developed, the accommodation became more and more inadequate. At the east gate a very desirable plot of land was purchased, and on this were erected two small bungalows for the occupation of the doctor and resident missionary.

It so happened that, once every three years, thousands of students from the five counties

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would invade Teian for the prefectural examinations and compete for the degree of 'Flourishing Talent'—about equivalent to our B.A. At the time of this examination in 1891, these bungalows were nearly completed. One day the coolies and carpenters employed on the buildings for some reason commenced fighting. During the scrimmage, two coolies were slightly injured. The Rev. G. G. Warren was at Teian at the time. He and Dr. Morley, hearing of the disturbance, hurried to the scene of strife. There they encountered a huge and excited mob. True to Chinese instinct, the two injured men declared they were mortally wounded. Dr. Morley decreed otherwise. All would have been amicably settled but for the interference of a well-dressed student. He suddenly set off with the cry, 'The foreigners have killed two Suichow men; Suichow men to the rescue!' This was the spark. Soon an infuriated crowd of students returned. They seized Mr. Warren and marched him off to the yamen. Dr. Morley, who had gone to another yamen to report the case, returned just at this critical juncture. Mr. Warren shouted to him to get inside the yamen, which was very near to

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the scene, and secure help. Pressing through the crowd, he suddenly met the leader. This misdirected youth seized the doctor's queue (Dr. Morley has always worn native dress), whilst the others fell upon him and triumphantly bore him away to the yamen. Mr. Warren rushed inside, but, as usual at such times, the mandarin was not at home. The crowd held him prisoner. The excitement of the mob in trying to separate the two gave to Mr. Warren his one great opportunity. He is a powerful man; and so, drawing himself together, he made one tremendous, rapid charge at the crowd—and got through. When the mandarin reached the temple, he found Dr. Morley with his hands tied behind his back and suspended from a cross-beam by his queue, so that his toes only just touched the ground. He was kept in this position enduring much physical pain and personal indignity until released.

During that night placards were posted in all parts of the city calling for a repetition of the riot on the following day. But it did not occur. That same evening the faithful members of our mission met in class-meeting. Not one was missing! The doxology formed the opening hymn, and experiences were plentiful and vivid.

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One result of this riot was that the hospital became better and more widely known. Dr. Morley's coolness, mercy (for none of the rioters were punished), and pluck became the subject of general conversation. Naturally, many were anxious to see this remarkable man. So the number of patients increased.

Almost from the beginning of his work Dr. Morley began—and with more or less regularity has continued till to-day—a work which nearly every medical missionary in China considers essential, though for various reasons few, if any, have ever attempted. During the Chinese New Year, when the hospital is necessarily closed, he visits in their own homes a number of patients who have been under his care in the hospital. For several weeks he is away from Teian, tramping mile after mile through hamlets, villages, and towns, seeking for old patients; with the object of following up the good work which had commenced in their hearts during their stay in the hospital. It is but natural that a doctor, who had either cured or relieved their complaint, would receive a hearty welcome. Any suspicion about or antagonism against foreigners which they previously possessed must have

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been banished during their stay in hospital. So the rough places of hatred and fear became smooth and the crooked paths into their hearts were made straight, by the witness borne by the activities of the hospital and the life of its doctor. Love overcometh.

This work has its difficulties. Through fear and other reasons, patients often register false addresses. Others live in such obscure places that they are impossible to find. Often one may travel for miles and then discover that the person sought for is unknown. But even such disappointments can be utilized to advantage, by preaching and tract distribution.

Dr. Morley has ever been not only an able doctor but also a keen evangelist. There have been several instances where the medical department has been the means of extending the evangelistic. Our present work at Tanghsien-chen is an illustration of this. Once a native preacher visited the town. He offered some Gospels and tracts to a schoolmaster, but as a Confucian gentleman, he treated the 'foreign' teaching with scorn. Curiosity, as well as contempt, is a characteristic of the literary man in any small town. Although he would not deign to purchase a tract or Gospel,

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yet he could not but listen to the conversation between the native preacher and such people as stood around.

The conversation drifted into the subject of opium-smoking. An arrow of conviction entered the proud teacher's heart, for, alas! he was addicted to the habit. What, could he be freed? This was exactly what he longed for. Here was the gospel of deliverance, the hope of freedom. He determined to enter the Teian hospital. During the weeks there, he read some Christian literature and Gospels to while away the time. On his return to his home free from the curse, he persuaded a number of his companions to follow his example and read for themselves the despised books. A welcome always awaited the missionary at his house whenever he passed through the town. Services were commenced. He not only advised opium-smokers to enter the hospital, but besought sinners of all classes to come to the Saviour.

After nine years of faithful service in Teian, living alone in a native house, bearing persecution, enduring hardship, healing, preaching, travelling, &c., Dr. Morley returned to England for furlough. During his absence, the

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out-patient department of his hospital was continued by the head assistant Mr. Li, but the more important in-patient department was closed. The best tribute that can be paid to Mr. Li's ability is shown by the fact that the number of out-patients really increased. There were a hundred more men patients, while the number of women patients was more than doubled.

When Dr. Morley returned early in 1897 with his bride, instead of going direct to Teian, he volunteered to take charge of the Hankow and Wuchang medical work, and thus enabled Dr. Hodge to return home for his overdue furlough. Mr. Li went to work with him in Hankow, and the hospital at Teian was closed until Dr. Hodge came back to China. Dr. Morley then returned to Teian.

Miss Lister, of the Women's Auxiliary, was stationed at Teian, where she did hard and conscientious work, seeing women patients in the hospital and visiting much in their homes and villages. By her presence and influence women patients were taken into a native house for treatment. The remembrance of her ministrations causes the people still to

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ask, 'When is a women's hospital to be built in the city?'

About nine or ten years after the establishment of medical work in Teian, a suitable plot of land was secured in another part of the city at a very reasonable price. On this it was decided—when funds permitted—to erect a hospital worthy of the importance of the work.

A medical missionary generally possesses the best ideas of what is needed in the construction of a hospital, even if he cannot commit them to paper. But Dr. Morley possessed both gifts. He was a draughtsman of no mean ability. Therefore before going home he designed such a hospital as he thought most suitable, both for the work and the locality. These designs he took to England for approval. They were sent back to China, and reached the Rev. David Hill a few months before his death. But it was not then possible to commence building. That was postponed until early in 1899. How the great heart of David Hill would have rejoiced if he had been spared to see the accomplishment of his own and his brother's most lavish gift to this district! Truly, the hospital was after his own heart! Nothing niggardly, yet no ex-

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travagance, plenty of space, ornamental yet useful, convenient, and solid.

The opening took place early in 1900. Services were conducted in the spacious wards. All the officials of the city came in state to congratulate Dr. Morley and to inspect the buildings. What a contrast to their attitude of ten years before!

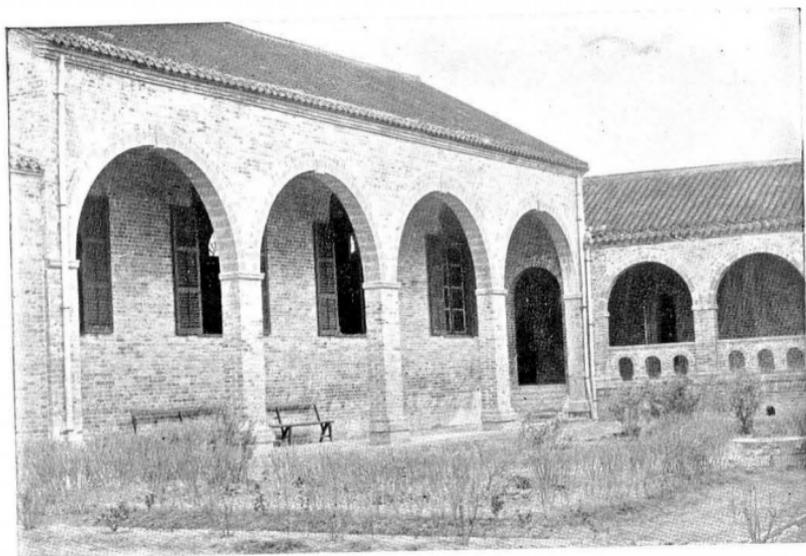
Two large tablets bearing laudatory inscriptions were presented to the hospital by the literary and military officials respectively; scrolls, pictures, and smaller tablets came from the gentry. Neighbours, members, and grateful patients were present in such large numbers that had the buildings been smaller there would have been no room for their accommodation. In one respect Chinese presentations differ from English: there is no speech-making. There is one effectual barrier that would forbid the most eloquent of any donor expressing his appreciation at the actual time of presentation—a most furious and deafening beating of gongs and firing of crackers reduces any expression of gratitude to a mere dumb show.

Of course the guests inquired, in true Chinese fashion, the price of this, that, and

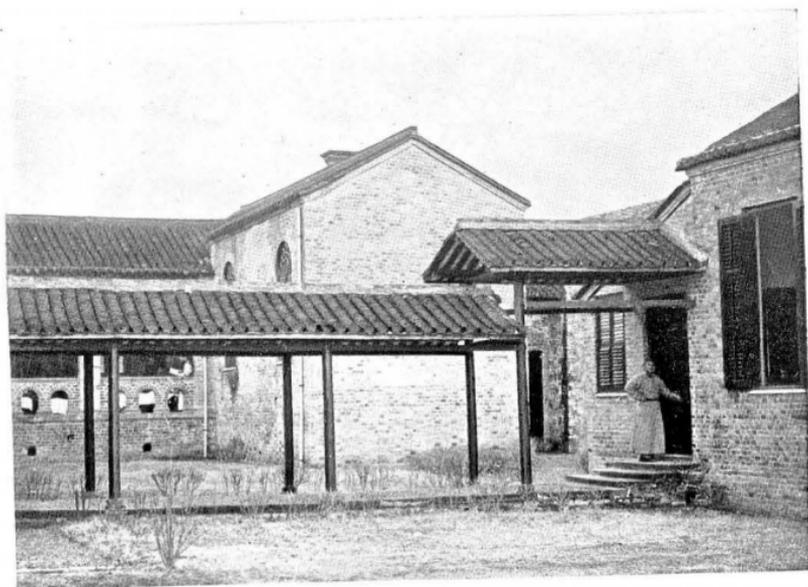


TEIAN HOSPITAL,

The arrival of two patients—one on the stretcher, and a little one in the basket.



TEIAN HOSPITAL.
Showing side of one ward and part of long corridor.



A PART OF TEIAN HOSPITAL.
Showing an assistant about to enter the operating-room.

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the other. The leading official present expressed his astonishment at the reasonable cost of the whole building and equipment. He remarked 'that the contractor knew the good that was going to be made of the building.' Probably. 'But do ordinary native contractors charge *less* when building a benevolent institution?' he was asked.

'No, they do not,' he replied.

'Neither would this contractor have charged less for a hospital, but that he is a Christian, and has found out that there are better things for a man to do than merely to accumulate wealth.'

The official went away thoughtful, for he was very rich.

As I have told elsewhere, the year 1900 will ever be remembered as the 'Boxer' year. It was a time of destruction of property, massacre, and bloodshed. Over forty thousand native Christians were horribly murdered, along with hundreds of missionaries and their little children.

Teian did not entirely escape. Rumours were persistent that foreigners, or persons in their employ, had been guilty of mesmerising and kidnapping children in the district, in order

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to use their bodies in the construction of proposed railway embankments! Christians were threatened and persecuted.

A band of Chinese recruits passed through Teian on their way to Peking to join the 'Boxers.' Trouble was anticipated, but the officials were fortunately able to control them. Shortly afterwards a band of Manchu soldiers passed through, but these were more difficult to manage. Wandering around the city, they came to our recently opened hospital, and at once demanded to see the foreigner. Being told that all the missionaries had been instructed by the Consul to leave the city, they became riotous. Assisted by a number of local rowdies, they forced their way into the building. There they smashed the glass, destroyed woodwork, and stole whatever they could find. Then they passed on.

At the end of that year work was again resumed. A few months after, the troops which had passed through Teian during the earlier part of the year and looted the hospital, returned. This time it was not to destroy and loot, but to seek mercy, healing, and kindness at the hands of the doctor. And they did not seek in vain. The poor fellows

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had endured terrible hardships. Of actual fighting, only once had they come under fire—against the French at long range. They professed disappointment at their commander, in not allowing them to attack, or to bring their field machinery into action. But he was eminently wiser than they. Their artillery consisted only of antiquated pieces of iron, each carried by a sorrowful-looking and half-starved donkey. Dr. Morley was quite ready to believe them when with pride they told him that ‘they maintained their position until the enemy retired!’

In this—to them—remarkable engagement, fifteen had been killed. But who takes notice of the wounded? If a wounded man cannot by his own exertion keep pace with the enemy, their discipline allows him to fall out of the ranks. There was no organized ambulance or medical corps. The Chinese Government does not acknowledge any responsibility for the wounded. One poor fellow whom Dr. Morley attended, with an unhealed compound fracture of his leg, had been carried upon a litter by his companions during all their marches for four months since the battle. Another soldier was covered with bruises, his

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wrists and ankles being greatly swollen. His story was this. A week previous, whilst encamping in some small place in Honan, he contracted fever. In his delirium he broke loose from his companions to cool himself in the river. Here some country people—who had probably suffered at their hands a few months before—found him. Seeing he was a soldier, they naturally supposed him to be intent on plunder. They beat him, and kept him bound for three days. When the main body of the army passed, they released him, and he was fortunate enough to overtake his company.

Altogether about forty soldiers sought help from the hospital which they had previously tried to destroy. Their diseases were varied and numerous—unattended bullet-wounds, sores, privation, dirt, &c., &c. One man had an ugly sore on each calf. They were not caused by the enemy, but were the result of a judicial beating after true Chinese fashion. When asked the reason, he replied, ‘Opium-smoking—only once, and it wasn’t worth it. I shan’t smoke again.’ Dr. Morley humbly suggested that the one indulgence in opium was scarcely worth the thrashing, although

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the lesson learnt would probably prove of value in the future. The suggestion did not appear to comfort him. He could scarcely hobble about, and how he was expected to perform his duty was not explained. Chinese methods of punishment are generally uncertain in their application, but they are always consistent in putting no value whatever upon the individual.

This year Dr. Morley will complete over twenty years of faithful and successful service in Teian. During that time he has not had the privilege of a colleague. But the splendid hospital and work there is a monument of his devotion, skill, and endurance. He is one of those rare and choice spirits who persistently—and successfully—avoid any publicity, as one would the plague. One of the most finished scholars that has ever graced our district, he has ever been revered and loved by all. Clothed in native dress, and frequently living upon native fare—thus ‘becoming all things to all men’—by his unique insight into the Chinese character and life he has endeared himself to all the natives. Such a life will only be fully appreciated when ‘the day breaks and the shadows flee away.’

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Never once has he been guilty of begging for help or of publishing a report. At each Synod, when his Annual Report has been read—by some one else, for seldom has he been present himself—half a sheet of note-paper would suffice for all he wished to make public. For instance, take his report for 1907 :

‘As is usual in our work, the dispensary was closed for a fortnight at the end of last summer, and again at the beginning of this summer, whilst the whole hospital, with the exception of one lad, was closed at the Chinese New Year. The drawback of having to close the dispensary in the early part of this summer was greatly lessened by the assistance of Dr. Cundall, who has been a great help to me in every way during the time that he has been at Teian (studying the language), and who has made me realize more than ever the advantages of having a colleague. The distinguishing feature of the year’s work is an unusually restricted range of operative surgery. I believe that this is not a temporary phase in our history, but a continuation of the tendency to which I have called attention in previous years.’

This brief report is no evidence whatever

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that Dr. Morley is not capable of writing an interesting and illuminating article when so disposed. During the autumn of 1906 a very destructive epidemic of malignant malaria visited the centre of China. The following article in the *Central China Prayer Union Letter* is from his pen :

‘ This district has suffered from the severe form of malaria which appears to have ravaged a large part of the Province this autumn. When I left Teian for Kuling in September, a great deal of our dispensary work already consisted in giving out of quinine. But worse was to follow. On returning three weeks later, I heard of whole villages being prostrated by the scourge.

‘ In the city prices of all country products rose greatly ; fuel could scarcely be bought ; rice, though the harvest had been unusually good, rose thirty per cent. ; the villagers, just able to reap the crops with difficulty, were unable to thresh the grain or to carry it into the city. It is impossible even to make a guess what the death-rate has been, but it has undoubtedly been very high. Although the Chinese have no drug to cure malaria, the simple form of the disease is not greatly

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dreaded by them ; its sometimes terrible after-effects are not connected with it in their mind. When the periods become indistinct, they will say, "The malaria is cured, but I have got this other thing!" And it is very rare for a patient to come to us from any great distance for an uncomplicated attack of malaria. Our out-patient room showed many sad sights of cancrum and dropsy, the two evil sequelae of malignant malaria, the one in the young and the other in adults ; but in giving the history of their illness, they seldom mention its real beginning without special inquiry. None of them need have reached such a pass, and I frequently draw the attention of fresh cases to these wrecks. But no warning will induce many of our patients to continue treatment after the first abatement of the fever. Quinine has an evil reputation, and many who have never tasted it have heard such fearful accounts of its nastiness, that they believe the cure to be worse than the disease. The head-man through whom we employ our chair coolies, and who has been to the hospital for other ailments, has been unable to work for two months because of malaria, but will not come to the hospital—frightened of "that

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bitter foreign drug." In the summer the Prefect came to see me about a scheme which he had for founding a hospital. "You Westerners," he said, "are excellent in surgery, but our doctors know all about medicine, and here in Teian we have a very good man in Dr. Chang." He therefore proposed opening a school to teach Chinese medicine and Western surgery. This Dr. Chang I had before heard of only as an inefficient vaccinator. Soon after our conversation, the Prefect was laid aside with what was said to be malaria. He showed his faith in the superiority of Chinese medicine by putting himself in the hands of Dr. Chang, and, getting no better, by telegraphing to Shanghai for another doctor of Chinese fame, at a fee which would be equal in England to one of £25 a day. He doubtless got something less disagreeable than quinine, but is still ill and has had to resign his post—the Westerner being *only* of use in surgery!

'As the epidemic began to abate, a great procession of idols and other idle shows was organized through the city. I could not see them, but could describe them; it would, however, be unprofitable. But the idolatrous

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procession for the stay of an epidemic shows that the difficulties in the way of spreading our science and our holy religion are the same. People believe, and yet they do not believe. They believe, but find the way of the Cross hard, and courage fails. Or, like the Prefect, ignorance—or perhaps pride—is impenetrable. But as truth in science must win its way, so it will eventually, though more slowly, in religion.'

A few months since we had the privilege of an insight into the medical work at Teian. For a few days we acted as *locum tenens* during Dr. Morley's absence to preside at the native conference. We found the hospital full. On the first day we attended over a hundred out-patients. Thoroughness and care of detail marked all the hospital arrangements; Dr. Morley's notes on cases, even those seen in the out-patient department, bore witness to his devotion; in fact, the whole work of the hospital was a revelation. It explained in a great measure his undoubted success in Teian.

Sixteen years since David Hill wrote, 'Dr. Morley's work has steadily grown in public esteem, and if the same grace be continued as has been bestowed in the past, it will go on growing.' The same might be written to-day.

Dr. Morley.



Mr. Li.

STAFF OF TEIAN HOSPITAL, WITH DR. A. MORLEY.



Photo by Rev. J. S. Helps.

A WARD IN TEIAN HOSPITAL.



GROUP OF NURSES OF JUBILEE WOMEN'S HOSPITAL,
Who earn more than one-third of the hospital's income.

CHAPTER VI

WORK FOR SUFFERING WOMEN

To a Christian woman is due the honour of establishing the first public hospital in the world. It was in the early centuries of Christianity when Fabiola, a Roman lady of ancient and noble lineage, founded the first famous Christian hospital. She selected a healthy situation outside the city of Rome. The fame of this hospital, we are told, spread throughout the Roman empire, 'from the Egyptians and Parthians to the cities of Britain.'

Then she disposed of her wealthy patrimony and founded a convalescent home in connexion with this hospital. But this was not the least important part of her noble work. Stirred by the sights of the suffering and their abject helplessness, the disposal of her money and property did not, to such a character as hers, involve much sacrifice. Even *this* did not

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satisfy her. Her sacrifice was the language of love. It is no true sacrifice to give a cup of cold water when a cup of something better is within our reach. So she gave herself. It was her all. She had not received any training except in the school of sympathy, neither did she understand the treatment of diseases. So she just asked God to 'give her skill in comfort's art' and that her life might be consecrated—

And set apart
Unto a life of sympathy,
For heavy is the weight of ill
In every heart,
And comforters are needed much
Of Christ-like touch.

And God granted her request. Her gentleness and tenderness became proverbial. Sores and diseases, at the sight of which others would turn away or refuse to touch, she bathed and nursed most tenderly. Thus by her nursing, soothing, and comforting, both she and others realized that such a ministry was for His sake, and could only be done in His strength.

In every heathen land women and children are always the greatest sufferers: the former because of their inferiority and the worthless-

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ness of their lives, from the non-Christian point of view; the latter because of their helplessness. How could it be otherwise when women are only considered as 'goods and chattels'? As such are they bought and sold. 'As heaven is to earth, so is man to woman.' A wife is not allowed to hang her garments on the same peg as her august husband uses. Probably she has no wish to use such a privilege! To eat her rice at the same time and table as her husband is considered very improper. She must retire and wait. Owing to the poverty of the labouring classes, this custom cannot be, neither is it, strictly observed. Women in China exist to serve and suffer. First comes the servitude to her parents, then follows a life of submission to her mother-in-law and slavery to her husband's family. With the advent of a son she is permitted to rise somewhat from her position of degradation. It is considered an insult for a visitor to inquire after the welfare of his host's wife. A father, when asked the number of his children, will invariably omit the girls in his reckoning. Girls seldom receive even an elementary education. Marriage is purely a

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matter of business or convenience. In this respect China is not the only transgressor. A bride oftentimes never sees her future husband until he raises her bridal veil at the marriage ceremony. A Chinese poet writes :

A mien severe and eyes that freeze
Become the future bride ;
No whispering underneath the trees
Ere yet the knot be tied.

Suicide on the eve of marriage is not infrequent. Chinese literature records many such sad incidents, while we ourselves know of several.

Not only is there cruelty in these dark places of the earth, but there is abundant evidence of what, in civilized communities, is indictable criminal malpractice, as well as of heartless neglect. It is not unusual in polygamous households for discarded or uncared-for wives to bribe the midwife to inflict an injury upon the favourite wife. Mrs. Bird-Bishop states that during her travels in China she was asked no fewer than two hundred times for drugs which would destroy the life of the favourite wife !

The immoral procedures to which thousands of women in this country are subjected in

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the name of medicine by the priest, physician, or meddling midwife are beyond description on the printed page or the public platform.

And so one might continue to describe the various manners and customs connected with the women of China, which, after all, touch the secret springs of this and every nation's life. If the wife and mother be degraded, love cannot flourish, and home life is unknown. A nation devoid of home life must pass into moral decadence. By rescuing the women of China we shall, through them, purify, ennoble, and raise the national life and conscience.

One is not much surprised that when the wives of missionaries beheld such scenes, and were day by day obliged to live in their midst, they had a burning heart which went out to these women who were neither loved nor love, who suffered and endured tortures because there was no one to have compassion upon them. After all, it is our Lord who suffers in the persons of these sick women, uncared-for, untended, and unvisited. Is not the religion of our Lord the jubilee of kindheartedness, the epiphany of exalted womanhood? The high position of women to-day in Europe

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and America is the product of Christianity. So it was that these Christian women, seeing the degradation and sufferings of their sisters, realized more than ever how freely they themselves had received of Christian blessings, and how freely they ought to give.

UNPRETENTIOUS EFFORTS

Much had been accomplished for the alleviation of suffering women during the existence of our hospital in Hankow in former years. But it was not until Mrs. North, in a very unpretentious manner, began to show compassion upon the women and children of Wusueh that any direct medical work for women by women was attempted in Central China. As far as she was able, she endeavoured to relieve their sufferings. A dispensary was established in Wusueh soon after her arrival in China. Naturally, at first she could not speak to them in their own language, but her husband acted as interpreter.

The Rev. Thomas Bramfitt had been doing some amateur doctoring amongst the men. One day, whilst he was away, a message

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came from one of the military mandarins, urging Mr. Bramfitt to come at once, as he had fallen from his horse and severely injured himself. What was to be done? With characteristic courage Mrs. North sallied forth, with her husband to interpret, to see what she could do. They found the poor man in great pain lying on a bamboo couch in a dimly lighted and dirty room, surrounded by the usual crowd of useless spectators. After careful examination, this brave little lady discovered that he had broken his arm. With improvised bandages and splints the broken bones were manipulated into position and the arm securely fixed.

Amidst profuse thanks the lady and her husband left the crowded house, no doubt feeling very satisfied with their efforts. Not so the friends of the patient. Alas! alas! the foreigners had not applied any medicine! Surely they must have forgotten it! Where were the black plasters, the mud, and other revolting Chinese concoctions which are invariably applied on such occasions? Forthwith the bandages and splints were removed and cast on one side, whilst a huge black plaster was most carefully applied. Conse-

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quently the following morning the anxious friends discovered that the arm was greatly inflamed, and the patient was in great pain. So they decided again to request the foreign lady to attend. She refused either to go or do anything until a promise had been given that they would not again interfere with her method of treatment. Her medical skill had been outraged, and she was justly annoyed. Once more, but with much greater difficulty, the bones were again set. This time her ingenuity proved equal to their primitive ideas of the correct form of treatment. Instead of plain bandages she used plaster-of-Paris, and left an elevation of plaster on the top, to show them that 'the medicine' had *not* been forgotten. This incident formed the introduction to her professional life amongst the natives. Such experiences as this, with many similar ones, enabled Mrs. North to understand the difficulties of treating Chinese patients.

After spending eighteen very busy and happy months at Wusueh, Mr. and Mrs. North were removed to Hankow, where a wider sphere of usefulness opened before them both in that crowded city.

The thought of her suffering sisters weighed

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heavily on Mrs. North's tender heart. Poor suffering women would visit her at her own house at all hours of the day, beseeching her to help them. This caused very serious interruptions in her household duties, and also to the study of the language.

Only those who have lived in China can understand, or fully appreciate, the visits of Chinese guests—who need something! Especially are women inconsiderate both in the hours of their call and the length of their conversation. If only they would tell you the object of their visit when they arrive, or even soon after, it would not be so hopeless a performance; but the ridiculous palaver with which each must be welcomed, and the strained conversation upon every conceivable topic except the one for which they have come, make such interruptions disastrous to the order and the peace of one's home. So it was decided that some alteration must be made, both to avoid such intrusions and to meet the demands of the increasing crowd of women who daily came.

There happened to be an empty room away from the house, but on the same compound. Mrs. North asked the Rev. David Hill whether

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she might use it as a dispensary for women. To this he most willingly consented.

After much cleansing with soap and water, with slight arranging, a very respectable and convenient dispensary was opened. A placard was pasted outside the main entrance announcing that 'sick women and children would be seen on the afternoons of four days a week.' This to some extent prevented their coming at all hours, and no longer was Mrs. North besieged in her own home.

The success of the work created further difficulties. Women, with or without their children, came in such numbers that it was impossible to attend to them all. To prevent disappointment to such, a further notice was posted at the side of the first one, which informed the people that 'only the first fifty patients to arrive could be seen.' History does not record at what hour of the morning those fifty arrived, but one's sympathy goes forth to that unfortunate gate-keeper who had the controlling of the crowd! Thus did the work continue to increase and succeed. Further extension and additional assistance were found to be absolutely necessary.

With the increasing duties and demands of

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the home upon her time, Mrs. North found the strain of this medical work very great, in fact, too severe. It was injuring her health, which was not very robust.

An earnest appeal was sent home to the committee of the Women's Auxiliary, explaining the real condition of affairs, and requesting them to send out a lady specially prepared for this work. In the meanwhile, God had been preparing such a worker. A young Methodist lady in England had received special medical and nursing training, to equip her for such a work amongst heathen women. Miss Sugden responded to the appeal, and in 1886 came out to China to relieve Mrs. North.

For many months the major portion of her time was occupied with the study of the language. Twice a week, even during this period, she accompanied Mrs. North to the dispensary.

About this time they had the joy of witnessing the baptism of a woman, the wife of a boatman. She had first been attracted by the dispensary work, where she not only obtained relief from her severe sufferings, but also heard tidings of great joy, and afterwards experienced 'the peace of God which passeth

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all understanding.' This boatman's wife was the first visible fruit of the medical work carried on by women for women. Gradually Miss Sugden was able to undertake more responsibility. But Mrs. North never forsook the work which she had commenced and loved. She continued her help and presence.

Besides the work at the dispensary, a new departure was attempted, which needed neither larger buildings nor increased expense. But it involved a tremendous demand upon the time and energies of Miss Sugden. Before coming out to China she had obtained her certificate for obstetrics. Here then, in this densely populated district, lay a unique field for such practice. She alone had in her possession the means and skill to relieve the thousands of suffering women in the hour of their greatest need. The tortures which these poor creatures have to endure at such a time, with no assistance but that which is derived from cruel superstitions, ignorant and dirty midwives, are indescribable. Sad and revolting are the scenes which might be related of the sufferings—and even the murders—perpetrated at such times. By this work, which she commenced and so courageously continued for

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several years, is she even to-day remembered by hundreds of women to whom she was able to bring succour. That particular branch of medical work for women which Miss Sugden initiated has developed into one of our most important and remunerative departments.

Again were they handicapped by their success. So it was decided to erect a small dispensary. This was done during the summer of 1886. This modest building consisted of two rooms, with large windows, a waiting-hall, and dispensary. It was the very first building erected for medical work amongst women in Central China. The building exists to-day, but is used as a schoolroom for girls. Some of the material used for its construction was rescued from the relics of the old Men's Hospital, and the remaining expenditure was met by the generous gift of a friend who loved the Lord Jesus Christ more than her jewels, which she willingly laid at the foot of His Cross.

Having this building, the workers were able to look forward more hopefully to years of successful work under more favourable conditions. It meant the brightening of dark lives, the breaking down of prejudices, and, above all, it would enable them to show forth

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the love of Christ for suffering women. The darkness, superstition, and despair of heathen women would be dispelled by the clear shining of the Sun of Righteousness.

The opening ceremony was a season of great rejoicing, and, as was fitting, it was distinctly feminine. All men were rigidly forbidden to attend. But there was the inevitable exception peculiar to Methodism—even in China. The Superintendent was present. What a confusion, with women chattering, babies crying, both heathen and Christian; the curious and attentive; old patients who had received benefit, and expectant ones! One certainly sympathizes with that Super.! Care or trouble for the time had vanished from their lives. The feast on which those seventy women made an onslaught with their chopsticks had been prepared for *them*, so also was the building. And they dedicated it in their own characteristic manner.

Women's medical work was by that time fairly well established. Over three thousand five hundred patients attended the dispensary during the year. Many travelled long distances to obtain relief. Considering the difficulty of travelling out here—especially for women, with

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their small, contorted, bound feet—for some of them to cover ten, twenty, thirty, or, in exceptional cases, two hundred miles, surely proves how widely the influence of the work was spreading.

Many ingenious methods were adopted to avoid the waste of time which was necessarily involved by interviewing those individuals who would visit the dispensary from mere curiosity. They were treated, but scarcely in accordance with the way they anticipated. One day a mandarin's boat anchored in the river Han near to the dispensary. His many wives, in search of some relaxation and excitement, decided to go ashore to see the foreign dispensary and wonderful foreign woman of whom they had heard so much. So they and their attendants waited their turn with the other patients, as their presence there was not known to Miss Sugden. The penalty which such curious individuals had to pay for visiting at such inconvenient times and under false pretences was a good dose of castor-oil or some other noxious draught. They paid their fee, so it would not do to 'turn them empty away.' No doubt their curiosity and thirst were satisfied, but their eagerness, one imagines, would

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be somewhat diminished. Anyhow, when their rank was revealed, they were invited into the house to drink tea, and had a long conversation with Miss Sugden.

Then others would come with the common cry, 'I have no children,' or perhaps, 'have daughters only.' Such incidents remind one very vividly of Old Testament history. The fact that a Chinese woman's happiness, both in this world and, so far as she knows and believes, in the world beyond, is entirely dependent upon her possessing children, especially sons, makes her anxiety and sorrow very real. A woman travelled a long distance, and implored, with tearful eyes and trembling lips, to have her case considered. Her agitation was so great that it was with difficulty that her story was understood. It appears that the year before, a neighbour of hers who was childless had been under treatment at the hospital, with the result that the desire of her heart had been fulfilled. With such an encouragement, this poor woman had been induced to undertake that long, weary journey. Such an incident is but typical of the boundless faith which these women have in the skill of the foreign doctor. Even in this land,



MRS. OWEN (NÉE SUGDEN).



MRS. BELL.



JUBILEE WOMEN'S HOSPITAL, HANKOW.

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where, before postal and telegraphic services were in existence, information was exceedingly difficult to diffuse, the reports of the supposed wonderful achievements of the foreign doctors travelled far and wide. But this was in the day of small things.

THE JUBILEE HOSPITAL

'A thing is great, partly by its traditions and partly by its opportunities, partly by what it has accomplished and partly by the doors of serviceableness of which it holds the key.' Then the medical mission work for women in Central China possessed a dual greatness by its accomplishments and unique opportunities. Nothing of its kind had ever before been seen in that part of China. Thousands upon thousands of women had received relief, kindness, and hope. It was the dawning of a new era for women in China, but only the faint, feeble rays of the new age. Its further chasing of the darkness was arrested by the inadequate accommodation in the small dispensary. Something daring must be attempted, and that promptly. Special accommodation and appliances for operating were

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required, and proper skilled nursing was also essential for most cases. It had been a work of love by Christian women for their degraded and suffering sisters. Would they fail, when such a crisis, the result of success, had arisen? No indeed!

Our good Queen was to commemorate her Jubilee in 1887. Her pure life and Christian example had done much for the elevation of woman. Something worthy of such an event must be accomplished by the women of Methodism. What more noble or suitable monument could be raised to perpetuate such a life and occasion than a hospital for the suffering women of China! Could such an appeal be made in vain? Certainly not, for the response was both prompt and generous. Within a very brief space of time the women of Methodism were able to place £1,000 at the disposal of the Women's Auxiliary for the erection of a suitable hospital for women in Hankow.

Towards the close of the following year, the buildings then being completed, the first Wesleyan Women's Hospital in China was formally opened. Henceforth it was to be known as the Jubilee Women's Hospital.

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Much rejoicing with sincere thankfulness characterized the proceedings. The British Consul, and four mandarins holding very high positions, arrayed in their official gorgeous robes and accompanied by their attendants and soldiers, all added dignity and glory to the scene. Chinese ladies of high social position were also present, travelling, of course, in closed sedan-chairs! Though their rigid etiquette debarred them from being present at any public or mixed function, yet on this, probably their first occasion, they dared to break down the wall of partition. Was not the hospital for their own service and that of their suffering sisters? Was it not also the very first of such a character ever erected, at least in this part of their empire? Why, then, should they not claim their just—though unlawful—right, to be present on such an occasion? They came, and were very much in evidence. A wife of one of the officials brought a wee laddie, for, said she, 'I thought that I would like the people to see how well you have cured my son.' Such objective evidence was indisputable. Was not that our Saviour's method of answering any of His critics?

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With this increased accommodation and better equipment, the workers soon discovered that they had indeed opened the doors to greater serviceableness. Soon after this advance, Mrs. Bell came out from England to unite with Miss Sugden in this noble work. She was the widow of the Rev. Joseph Bell. For six months only had she been his wife. His failing health compelled them to return home, where, shortly after their arrival, he died. Mrs. Bell determined to return to the land and people for whom her able and faithful husband had so early laid down his life, knowing that—

The sufferings of a sin-sick earth
Would give her ample scope.

to continue, in some small degree, her husband's work and fill up the sufferings of their Lord and Master. To equip herself for such a service, she went to Edinburgh and studied nursing and dispensing.

With work in the wards and dispensary, visiting the homes of both the poor and wealthy, training young women in the art of nursing, conducting Bible-classes, and cheerfully performing the innumerable duties connected with

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such an institution, one would imagine that these two would have been satisfied. But not so. Once a week they must needs cross over the river Han to our mission-station at Hanyang, where they conducted a Bible-class for women, and afterwards attended to their numerous ailments. With genuine enthusiasm and self-forgetfulness did these two heroic women spend their lives, both 'in season and out of season,' in the service of the degraded and suffering women and children of Central China.

The work of the Jubilee Women's Hospital shared in the interruptions caused by the riots at Wusueh and Teian in 1891, when William Argent was murdered. During that year the hospital had to be closed four times. Most of the staff were sent away, and those who remained were so afraid that they ran off to their homes.

It has taken many years to restore confidence. For months after the riots were over, no calls were received to outside cases, and very few patients attended at the hospital. The natives were afraid to be in any way identified with the foreigners. The country was in such an unsettled condition that nobody knew what might happen next.

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With the exception of these seasons of rioting and disturbances, the hospital continued its splendid work with increasing and encouraging success. Dr. Hodge not only most cheerfully and readily superintended the erection of the building, but responded to the numerous calls for consultation when serious or difficult cases appeared, and performed nearly all the operations.

After six years of faithful and successful work, Miss Sugden returned to England early in 1893. There she became the wife of the Rev. G. Owen, of the London Missionary Society. After a short furlough they returned to West China. But alas! Mrs. Owen only lived for a few months. A serious riot, in which she endured great sufferings, robbed China of one of the noblest characters and most heroic women workers to be found in the history of Missions. The memory of her life and influence remains fragrant, even to-day. Frequently is she affectionately referred to by the native women.

Mrs. Bell courageously continued the work alone. Of course, it entailed much more work for Dr. Hodge, but this he manfully undertook rather than have the hospital

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closed. For some time Miss Parkes assisted Mrs. Bell in dispensing, although she had not come out for that purpose.

As there was not the slightest prospect of a lady doctor being sent out from England, the services of Miss Wyckoff, an American doctor, were accepted. For nearly twelve months she resided in the hospital and relieved the pressure. Then she was obliged to return to America for reasons of health.

When the furlough of Mrs. Bell was due, the brave little woman refused to desert her post until some one was secured to relieve her. At a tremendous sacrifice of health, she held on until the arrival of Miss Lister, who was a fully qualified nurse, and thus saved the situation.

THE FIRST LADY DOCTOR

However faithfully and successfully the work had been carried on up to this time, with the exception of the presence for a few months of an American lady doctor, the foreign workers had only been qualified nurses. But for the assistance of Dr. Hodge, the hospital would never have been the success that it was. Nurses are not doctors, and both have their

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limitations. One is but the complement of the other. From the beginning an English lady doctor had been desired. In those days there were but few lady doctors. It is only during the past ten years that their number has so markedly increased.

In the homeland, God was preparing a valuable worker. A daughter of the Rev. C. H. Gough was first of all trained for a nurse. Not satisfied with that, she entered the Royal Free Hospital, and there studied for her medical diploma. This she obtained at the close of her curriculum. The needs of her suffering and helpless Chinese sisters made an irresistible appeal to her. She looked to Christ for instructions as to her life-work. We have no right to drift into our life-work merely through the forces of environment or heredity; neither have we a right to choose it because it appeals to our scientific tastes or offers a congenial occupation with pecuniary remuneration and social status. There must be the definite seeking and finding of His plan and purpose for our future lives. Every man's and woman's life is a plan of God's—or it ought to be. Until that is decided, we ought not to take even the first step into

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our life-work. Emerson says that 'the great crises of life are not marriages and deaths, but some afternoon at the turn of a road, when your life finds new thoughts and impulses.' Such a crisis came to Dr. Ethel Gough.

To the spirit select there is no choice.
She cannot say, This will I do, or that.

To welcome the first English lady doctor into the small missionary circle in Central China was no ordinary event. When Dr. Ethel Gough reached Hankow in February 1896, there were great rejoicings. Such an acquisition to the band of workers was indeed a good omen of a bright future for the women's medical work.

With all her strength of mind, body, and spirit did she plunge into the work. But she failed to rise beyond the level of physical strength necessary. The strain was too great. This might be recorded of almost every new arrival. China is not England. One's emergence from the restrictions of college rules and regulations, with the close application connected with a scholastic career, into a life of freedom and boundless opportunities for the exercise of those gifts which have taken

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years to cultivate, with a pent-up passion for souls, is not always conducive to health—especially in a tropical climate. In the April of the following year she was obliged to return home to England, with Dr. and Mrs. Hodge, to recover from an accident. The medical work suffered greatly during her absence. The out-patient department, however, remained open. Miss Moseley, of the *Joyful News* Mission, with Miss Minchin, of the Women's Auxiliary, both did admirable work at the Jubilee Hospital. Eighteen months afterwards, in answer to many prayers, Dr. Gough was again in Hankow. She had the joy of being accompanied by Miss Pomeroy, who was to occupy the position as matron of the hospital.

The medical missionary's grandest opportunity for direct Christian work is at the bedside. Here he has a unique privilege, not enjoyed by his clerical compeers. Even in the homeland a patient will be more ready and willing to reveal the secrets and desires of his or her heart to the doctor than to the parson. And human nature is not very different in China. Upon their beds they are obliged to lie for days, or weeks, perhaps

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enduring pain—if not in physical pain, then suffering from the effects of groping for years in the darkness and degradation of heathenism. Mentally, morally, and spiritually are they diseased. Who is the most likely to win their confidence, or to whom is it more probable they will lend a hearing ear than to the one who has relieved their physical sufferings? It is the Christian doctor and the assistants who can instil into them ‘new thoughts of God, new hopes of heaven.’ Alas! it is the exception in China for women to be able to read. So the opportunity is taken of their being in hospital to at least encourage them to learn to read. With few exceptions, they seem anxious to learn, and many leave the hospital with a more intelligent conception of life. With the knowledge of a few hymns, texts, and the elementary truths of the gospel, they return to their homes. How changed must they be from when they left those homes! What an influence they must exert! Should they be girls, never can they entirely forget the—to them—strange sights and teaching which they saw and heard in the hospital. The women patients cannot be the same as they were before they came under the influence

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of those messengers of hope and salvation. This medical work amongst women is daily purifying and sweetening the stream of human life in China at its very source.

For over twenty years the late Mrs. Hsie was connected with the Women's Hospital, Hankow, first as washerwoman, cook, and nurse, and afterwards as a very successful Biblewoman. In the photograph given on p. 234, she is seen engaged in her favourite occupation and in her characteristic attitude offering the gospels for sale. She was known and loved by most of the native women in this densely populated neighbourhood, and also by the thousands of patients who visited the hospital.

The 'Boxer' year, as 1900 will be called, greatly interfered with the work of the hospital. The wards and out-patient department were closed for several months. For a considerable time prior to the actual closing no calls to outside cases had been received. People were afraid to have the foreigners seen entering their houses, lest they might be witnesses to similar horrors which they had vaguely heard were being perpetrated in the north. Then came the Consul-General's

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command that all foreign women were to leave their stations and quickly hasten to Shanghai. So they had to obey.

Scores of their fellow workers in other parts of China were suffering persecution, torture, and death at the hands of the 'Boxers.' Others had lost all their earthly possessions; hospitals and orphanages were plundered and burned, churches and houses destroyed; yet our hospitals and workers were spared. Even after eight years we are only just recovering from the widespread effects of that year of darkness, sword, and famine.

During 1900 there were 'fightings without' the hospital, but the following years there were 'fears within.' The year commenced with our old foe—a debit balance. The reason of that was the phenomenal success. Only a very small and inadequate grant was forthcoming from the Home Committee. It was not sufficient even to sustain the present work, much less to allow for progress. Increase of poor in-patients involved greater expense. To the prayerful request for an increased grant, the Committee replied that they were sorry, but were themselves in debt, and so could not increase the amount. The workers were not

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only sorry, but in despair. The sorrow of the Committee did not in any way relieve the sufferers who daily besieged the hospital. A further suggestion from the Committee was that the nurses must be dismissed to relieve the financial strain, as the 'heaviest part of the expenses was paying their wages.' Now, what did 'the heaviest part' really mean? Why, that a fully qualified native nurse, after several years of thorough training, using her talents in private nursing and attending obstetrical cases—not for her own profit, but perpetually to replenish the exchequer of the hospital—received a remuneration equivalent to ten or twelve shillings a month! Then there were the in-patients to be considered. Many of them needed care and attention for weeks or months, if any permanent benefit was to be derived. And this suggestion from the Committee arrived when there were more applications for admission than ever before.

Such suggestions might be calmly—and rightly—made in a comfortable committee-room at home, but to those who received them out here, daily living in the midst of such suffering and distress, there could not possibly be any response. Something *must* be done, even

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if no assistance came from home. To close the hospital for lack of funds was impossible—almost absurd. It was a test of their faith and courage. Would their faith fail in this sharp emergency? No; neither they nor God would fail. Often before had He concealed His sources of supply and methods of relief. Such is His glory. At this very crisis some wealthy Chinese patients came for treatment. From these high fees could be, and were, obtained. In addition to this, one of the former nurses, who had married, hearing of the distress and need, of her own free will commenced to collect money from her friends, which realized about £13. Friends at home and out in China prayed, worked, and gave. Help came from unexpected sources as never before. That time of supreme testing was the time of supreme revelation of God's power, resources, and benediction.

Amongst the hundreds of patients who visited the hospital at that time was a slave-singer from one of the notorious houses in this wicked city of Hankow. Poor girl! she bore on her frail body the marks of her mistress's cruelty; bruises, lacerations, and scars almost completely covered her, the result of

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beatings with bamboos and burnings with hot irons. A distressing cough, with haemoptysis, prevented her from earning money for her cruel owners by singing lewd songs for the amusement of those who frequented the abode of wickedness from which she came. For three months was she isolated in a small ward with another consumptive girl, who had formerly been a nurse in the hospital. As time went on, fresh air, nourishing food, with cleanliness, enabled her to get up from her bed and lie on a long chair in the small open space. Her cough became less distressing and troublesome, and she learned several hymns, which she tried to sing. What a contrast to her former songs! She always listened attentively to the doctor or nurses, when they talked to her of the compassionate Saviour or read portions from the New Testament.

One day her owners came to see her. Finding that she was so much better, and greatly improved, they insisted upon her return to their house. Her pleadings to remain in the hospital were futile. With a sad heart and many tears she said 'good-bye' to those whom she had learned to love and to her happy life of the past few months. She went away sorrowful.

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About six weeks afterwards she returned to the hospital—to die. Ill-treatment, with starvation, had done its work thoroughly. During the last few days of her life she was seldom conscious. On the evening of the night that she passed away, the doctor—as was her wont—went into this dying slave-girl's small ward. The poor girl opened her eyes and recognized her. She tried to speak, but what she said was quite unintelligible. The doctor sat by her side, and, taking her wasted hand in her own, told her that she thought Jesus was coming to take her to a place free from sorrow, pain, and sin—to a home prepared for those who love Him. Just for a moment a smile made even her sunken, lustreless eyes bright, nay, almost beautiful. It was the reflection of her Saviour's smile of welcome. Then the gleam of consciousness faded away, as she quietly passed to 'love's unclouded vision.'

On the next day another slave-girl from the same house, and formerly a patient in the hospital, came to arrange about the burial of the body. She sorrowed for the loss of her companion, and told how, in that house of wickedness, they used to pray together and

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talk about the gospel stories they had been taught whilst in the hospital.

This is but a typical case, taken at random, out of thousands of such incidents to be found in the records of our hospitals.

As we have stated before, one of the most common diseases of children in China is tuberculosis of their bones and joints. Nothing similar is, fortunately, to be seen at home. The disease is intensely aggravated by the interference of the ignorant native doctors, who thrust skewers—not often clean, and never aseptic—into the diseased part. A large proportion of the little sufferers become crippled for life. Generally, as a last resource, the parents or friends bring them to the foreign doctor. A few weeks' treatment in hospital is of little value to either patient or doctor. It generally means months, if not a year or more, lying in bed and receiving every attention, to secure any satisfactory result.

But it is scarcely the right thing to fill every bed in a small general hospital with such cases. What was to be done for them? If refused admission, they would probably be subjected to cruel treatment by their relatives, or 'thrown away,' as the Chinese express it in such instances.

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Now fortunately, little children readily forget the 'things that are past'—though they be unpleasant. They are ever prospective. When free from pain in hospital, but obliged to lie still, or perhaps trussed with splints and bound with bandages, being girls, they can and do chatter. Perhaps 'noisy' would be an appropriate term to describe them. And *we* would not have them otherwise. But the elderly patients do not always appreciate the animated conversation or the innocent merriment carried on between two little lasses at opposite ends of the ward. Then when they indulge, at all hours of the day, in rehearsing the hymns which they are learning, even we ourselves must agree that it is not conducive to the other patients forgetting their aches and pains. So a scheme was suggested and plans prepared for erecting a 'children's ward,' with other necessary additions and alterations.

A NEEDED INNOVATION

The problem had never been solved how to get into touch with the women of the more wealthy Chinese families. Their etiquette forbade them to mingle with others, either in

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church or classes. Previous experience only encouraged the doctors to provide better facilities through the medium of the hospital to meet this increasing need. These women could be better reached through the medical work than by any other channel. Now arrived an opportunity to provide accommodation for such. The scheme for additions included private wards, which these women might occupy for a certain fee. The venture proved to be then, and has continued to be, an unqualified success. Wives, daughters, and female relatives of Chinese officials have never ceased—when necessary—to avail themselves of this provision. They are also frequently used by lady missionaries of our mission and those of others. Liberal support has been given by the patients, thus enabling the hospital to be partially self-supporting and to increase its work for the poor and needy.

About the same time there were two particular patients in the hospital. The fee received from the one occupying the private ward helped to support the other in the general ward. One was the daughter of a very high official, the other a poor slave-girl. So delighted and grateful was the official at his

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daughter's recovery from small-pox without much disfigurement, that in addition to the hospital fees he made a present to the hospital of about £15.

In the general ward lay the poor, ill-treated slave-girl of the lowest type. Her life of suffering, ill-treatment, and semi-starvation had resulted in paralysis of both legs. Her face—rendered more repulsive by the pitting and distortion following a recent attack of small-pox—bore a sullen, evil, and cunning expression. This is not surprising. At the end of a month's treatment, her owners, finding she was still in much the same condition, refused any longer even to pay for her rice. Her chances of improvement were so very slight that the doctor did not feel justified in keeping her as an entirely free patient for an indefinite time. Here, then, was a dilemma. What was to be done? Her owners soon decided. They sold her—probably for a small sum—to a disreputable fellow who was in search of a wife. He brought two large baskets, intending to put his bride into one and her few belongings into the other, suspend them from either end of a pole, and bear them away on his shoulder. But the doctor naturally

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refused to have the poor girl taken away like a pig. She insisted upon his bringing a sedan-chair and taking her away like a human being—if not a bride. This he did.

After a short time, her purchaser—one cannot call him husband, although he really was—fearing she might die, as she persistently fretted and refused food, brought her back to the 'Hospital of Universal Love.' He begged to have her taken in, whilst she pleaded to be rescued from her present life. He threatened that if they refused, or were unable, he would 'throw her out' on the streets. This could only mean an existence of torture, starvation, and unspeakable horror. Although it was a 'hospital' and not a 'home for incurables'—would that we had one!—yet, after all, its object has always been above and beyond the healing of the body. Here at the gate was a poor Magdalene, helpless, homeless, friendless, and dying. Could such a one be refused? No! Surely God would provide the means to save and support her. She must be precious and worthy of being saved in the pitying eyes of His love and compassion, who came to seek and save such creatures as this poor outcast. So she was taken in and cared for.



AN OPERATION BEING PERFORMED BY DR. YO
In Jubilee Women's Hospital, Hankow. Sister Nora Booth
administering chloroform.

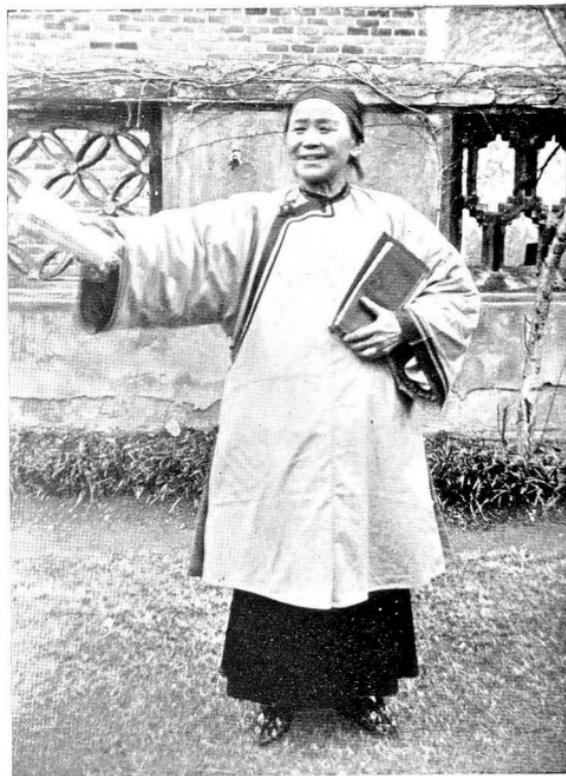


JUBILEE WOMEN'S HOSPITAL, HANKOW.
Little patients eating rice.



Photo by Mr. D. Entwistle.

'GRACE,'
As she appears to-day.



THE LATE MRS. HSIE.

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Her sullen expression gradually disappeared. Sorrow and fear were turned into joy and confidence. Although a great sufferer, yet, under kind and proper treatment, her life was spared. Being deformed and crippled, she could not walk. So a rough wooden chair on wheels was made, and in this she was regularly wheeled to church. She was taught to read and do cross-stitch. Her influence upon the other patients was distinctly for good.

So greatly did she improve, that in time she was able to walk a little. Her heart was filled with gratitude to God and His servants who had rescued her. Her progress in reading and 'learning the doctrine' was so rapid and satisfactory that after two years' trial she was baptized and given the name of Grace. She is still in the hospital, and on the day these lines were written I committed to her the partial care of the head nurse, who is lying very ill. Was she not worth saving?

A SPHERE FOR GIRLS

Several years ago a series of articles appeared in a certain periodical on the subject 'What shall we do with our girls?' Perhaps

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in no country is the problem more complex or difficult of solution than in China. For centuries have the Chinese—perhaps unconsciously—been seeking for a solution. Up to very recent years, when Christianity commenced to influence the country, three methods which have become recognized customs have been practised by the Chinese with the hope of solving the problem. First of all, in a country where ‘girls do not count,’ infanticide is practised. The ‘baby’ towers which are to be found outside the walls of almost every city and town are sufficient evidence of its popularity. If not murdered, then baby-girls are frequently placed in a basket hanging upon a pivot in a large hole, made in the outer wall of an orphanage or foundling home, which is supported by benevolent citizens or Buddhists. Whoever places the child in the basket, rings the bell; the basket is turned on the pivot, and will be received without any questions or even seeing the one who placed it there. If necessary, nurses are called in to rear the babe. Anyhow, in these foundling homes they are cared for, fed on rice water as a substitute for a baby’s natural diet (cows are

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only used for the tilling of fields and not for milking). When sufficiently old, they are sold as slave-girls, or else into a life which is worse than death. The third custom is that of early marriages. These are arranged for by the parents or guardians, generally when the girls are but babes. As soon as the one to whom they are betrothed possesses, borrows, or in any other way obtains sufficient money to complete the agreement, he is at liberty to claim his prize. The girl's feelings are not in the least considered. It is merely a matter of business between the parents or custodians of the two concerned.

But with our girls from Christian homes, or those who have come under the influence of the gospel, who have been educated, whose emancipation from the thralldom of heathenism has broadened their outlook upon life, or created in them a rightful conception and sense of the true dignity of womanhood and motherhood, the problem, with such existing customs, is not easy to solve. It is true, marriages are, as far as possible, arranged between a Christian boy and girl; but should a girl's betrothed die, or if she is early left a

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widow and is free, she is not always anxious to be married, but prefers to live 'her own life.' Outside of household drudgery, marriage, and motherhood, there is not to be found in China any sphere for young women in which to earn an honourable living. A 'single' girl is scarcely known outside of a Christian circle. It has taken years of opposition and Christian social evolution to produce the self-supporting type of girl such as is common in Western nations. So far, the only two professions open to a Chinese girl are teaching and nursing. Hundreds of girls are to-day being trained, or are holding certificates, in these professions. Our Jubilee Women's Hospital has probably done more in the training of young women and older girls in the art of nursing and the science of midwifery than any other hospital in Central China.

Not only do they nurse and attend to their own countrywomen both in and out of hospital, but their services are in constant demand among the missionary and foreign constituency. The demand is much greater than the supply. The fees which they receive form a very material assistance in carrying on the work of the hospital.

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These nurses are naturally of all shades of temperament and degrees of ability, and are drawn from various classes. Many are recruited from the most intelligent senior girls in our boarding-schools. Other missions, besides our own, send promising girls to be trained. All candidates must be able to read and write, have their feet unbound, and submit to three years' curriculum with examinations. The day must come—in fact, is fast approaching in China—when the nursing profession will be considered as essential and honoured as it is to-day in Europe and America. To medical missionaries alone is this solution of the problem due.

For several years past the Committee has been constantly appealed to to send out a doctor for the Jubilee Women's Hospital. When Dr. Ethel Gough changed her name to Mrs. Rowley, she continued her work in the hospital. But such an arrangement was neither satisfactory nor fair, either to the hospital or to her home. Fortunately, Mrs. Ts'en, the matron, was a very able and devoted worker. This arrangement could not possibly continue for any great length of time. Mrs. Ts'en found the work far beyond

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her strength, and was obliged to resign. Then Miss Nora W. Booth, daughter of the Rev. W. H. Booth, came out to fill the position of matron. Shortly after her arrival, the furlough of the Rev. W. Rowley became due, and so Mrs. Rowley was obliged to return home with her husband. Such a position as that which Miss Booth has been obliged to occupy was very trying and difficult after only a brief residence and with very little knowledge of the language. For a time she attended the out-patients, and the doctors of the Men's Hospital cared for the in-patients, and, as usual, performed all the operations. Some relief arrived when Dr. Yo joined the staff. She is a sister of Mrs. Ts'en, and had been a nurse in the hospital. Possessing exceptional abilities, she was sent to a medical school for Chinese women at Canton, where for four years she studied and obtained her diplomas with honours. Now she relieves Miss Booth of all the out-patient and outdoor work. In every respect she has proved to be a valuable acquisition to the work. But what are these few workers amongst so many sufferers?



NURSING STAFF OF THE JUBILEE WOMEN'S HOSPITAL, WITH LATE DOCTOR (back row) AND PRESENT MATRON (seated).

The majority are qualified by examination in midwifery ; they are also in constant demand to nurse foreign ladies. They make more than one-third of the hospital's income.



DR. MARGARET BENNETT.

CHAPTER VII

THE CITY OF MILITARY GLORY

THERE is no city or town in the whole of Central China which possesses greater opportunities, or has more open doors for the practice of medical work amongst women, than Wuchang. Being the centre of the governmental, military, and educational institutions, which are yearly increasing both in importance and number, it is peculiarly unique for such work. Herein resides the Viceroy of two Provinces and his enormous court of officials. Their wives, amahs, and children all live there in seclusion. We have there the undesirable combination of Indian zenanas and Turkish harems. Yet they differ from both. The women of Chinese officials are often neglected, and their sufferings, sorrows, and sacrifices are similar to those of their sisters of India or Turkey. Their apartments are generally located behind the maze of rooms and court-

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yards which compose an official's residence. They are denied a sufficiency of light, air, and company. Should they have occasion or permission to visit, the journey can only be accomplished in a closed sedan-chair with a peep-hole in front. The door into their apartments can only be opened to the knocking of a woman. To all others they are sealed.

Could there be a grander scope or more fruitful soil than this for women's medical missionary effort? In the hour of their trial and extremity, they need not fear to request the presence and assistance of a woman doctor, even though she be a foreigner. And when once that ministering sister has entered through those guarded portals, what golden opportunities for ever lie before her! If China was opened 'at the point of the lancet,' then access has first been gained to the women of the official and upper classes of China by the tender love, care, and skill of the women doctors and nurses of the medical missions in China. Of course there are also the poorer women, but in Wuchang those of the official class form a very real, unique, and important factor in our medical work.

Our mission was the first to commence

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medical work in Wuchang. As far back as 1866 Dr. Porter Smith opened a dispensary there, which he visited once a week, crossing from Hankow. This was continued, with various interruptions, until Dr. Hodge resuscitated the work in 1889. Twice a week did he travel across the Yangtze (which he dreaded so much) to see patients. This involved two whole days, in addition to his multitudinous duties and claims in Hankow. Mrs. Barber took a very keen and practical interest in this work. Really, to her is due the credit of commencing the direct medical work for women of all classes in Wuchang. After her enforced return to England, Mrs. North willingly and gladly consented to see patients, and was always present when Dr. Hodge examined any cases that were beyond her skill of diagnosis or treatment.

As I have said elsewhere, little can be accomplished by means of a dispensary only. It became more and more evident that a hospital was not only needed but essential. To erect such a building in Wuchang would indeed be a striking symbol of Christ's mission to and love for suffering women. It would be such a ministry to women as had never entered

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into the practice of heathenism. Whoever in China had known of a native lady devoting her life and talents to the service of her poor, degraded, and suffering sisters, or even to those of her own station in life? No; China, with all her highly praised, elaborate system of morals, had never made provision for the alleviation of her suffering women. In fact, where any heathen sympathy has arisen for the sick, it has never extended beyond the tribe, or at widest the nation. But the sympathies of Christianity for the sick and suffering, whether men, women, or children, are as wide as the human race. All human life is sacred. It is of transcendent worth and value. It ought not to be of any consequence to us how degraded, or crippled, or broken, or apparently unimportant, they may be, whether pauper, slave, man, woman, or child, if they suffer or are sick. Charity, is it not the legitimate offspring of Christianity? So it was decided to erect a hospital for women.

A LIFE LAID DOWN

During the furlough of Mrs. Owen in England (perhaps she is better remembered as Miss Sugden) there happened to be present

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at one of the numerous meetings at which she spoke, a young lady who, like so many others, was only 'interested' in missions. She realized that at her conversion God had given to her something, now she felt that she ought to give God something. She possessed talents of no mean order, and her wealth could command for her ease and comfort. Never before had she realized so vividly the truth of those words, 'All to Him I owe.' Then after all, is not 'ought' just the old Anglo-Saxon word for 'owe'? Her talents and wealth were only a debt of obligation. She heard the voice say, 'Go—heal—preach.' And she obeyed.

Already Margaret Bennett had obtained some experience in the stern realities of home mission work, having toiled amongst the poor and needy of the East End of London. Such work was then fashionable. But when this call came, and with it visions of wider spheres of usefulness, she at once commenced the long and exacting medical curriculum, and in due course qualified as a doctor.

After a course of important post-graduate work, she reached China early in 1899. As there was no hospital ready for her in Wuchang, she remained in Hankow to study the language

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and also study hospital methods in China. These are necessarily different from those at home. Then came the 'Boxer' troubles, and Dr. Bennett, with others, was obliged to seek refuge in Japan.

On her return, as there was no prospect of a hospital, she commenced seeing patients in a room, also visiting outside cases. This continued for the greater part of 1901. At last a suitable plot of land was selected for the hospital; but alas! in true characteristic Chinese style, an anti-foreign mandarin check-mated the signing of the deeds. Ultimately a more desirable plot was secured next to our mission premises. Upon this was erected a small and compact hospital. The money was subscribed principally by herself and family. It was opened on February 13, 1903, and dedicated to the 'glory of God, the alleviation of suffering, and the salvation of the women of China.'

Here Dr. Margaret Bennett, with her matron colleague, Miss Shillington, successfully laboured in healing and preaching for five months. All appeared very bright and hopeful. And then—what? How mysterious are the ways of Providence! Why did Dr. Bennett so mys-

The City of Military Glory

teriously contract dysentery? Why did she pass away after only five days of sickness? So many who contract the same disease, and are—apparently—less useful and could be better done without, are spared. Why were those long, tedious years of hard study at home, which she devoted to obtain her degrees, and her brief career in China, occupied in the grinding of this difficult language, only to be privileged in exercising her gifts by attending a few patients and working in a small hospital for a few months? Humanly speaking and reckoning, it was but a waste of money, time, energy, and even life. To those who think and calculate thus, it was as foolish as the Cross. But her 'call,' inspiration, and consecration had been obtained and made at the foot of the Cross. The value of such lives can never be estimated by mathematics. Such consecrated culture and noble character form the true aristocracy of the world. Life may be idly spent, or may be turned into seed-corn for future harvests. As she lay on her dying-bed, near the close of her consciousness, in answer to a question, she replied, 'No, I am not sorry, but glad that I came to China.' So are we and hundreds of Chinese women.

Medical Missions in China

A FITTING MEMORIAL

From that time to the present the hospital has been known as the 'Margaret Bennett Memorial.' After the death of Dr. Bennett, the hospital remained open. Miss Shillington, being a very capable and devoted worker, was able to continue the exercise of her gifts. The doctors from the Men's Hospital, Hankow, visited the hospital at least twice a week, attending to the out-patients, performing operations, and caring for the in-patients. During this time a very suitable building was erected to serve as an out-patient department, with rooms above to be used by the nursing staff. With these necessary additions, the hospital buildings, though small, were convenient.

Early in the year 1906 Dr. Helen Randall Vickers reached Wuchang to fill the vacancy caused by the death of Dr. Margaret Bennett and to take over the charge of the medical work. She was obliged at once to commence work, in spite of her lack of knowledge of the language. Since her arrival the hospital has been doing a quiet, useful work with the in- and out-patients, also by visiting the homes

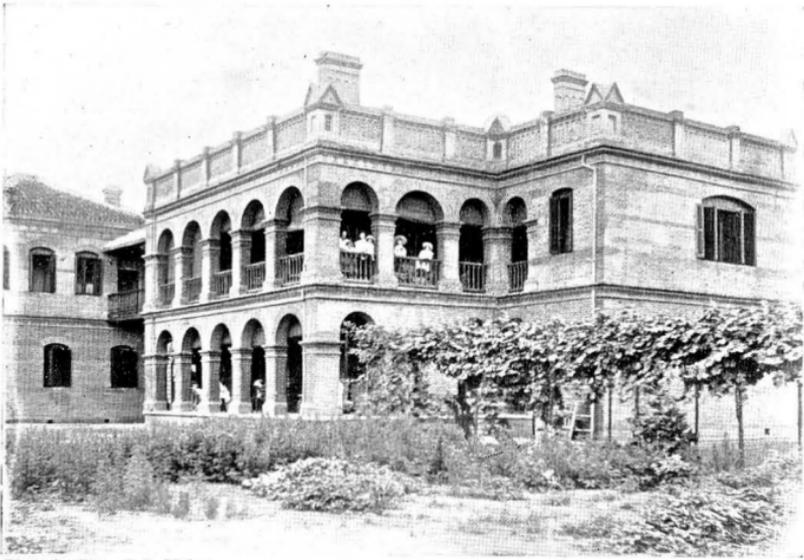


Photo by Rev. J. S. Helps.

'MARGARET BENNETT MEMORIAL' HOSPITAL, WUCHANG.



'MARGARET BENNETT MEMORIAL.'

Doctor, matron, nurses, and a few patients.



OUR DOCTORS OF HUPEH.

Dr. J. W. Pell
(Tayeh).

Dr. R. T. Booth
(Hankow).

Dr. A. Morley
(Teian).

Dr. E. Cundall
(An-lu).

Dr. W. A. Tatchell
(Hankow).

The City of Military Glory

of both poor and wealthy. Towards the end of 1907 Miss Reid joined Dr. Vickers, to act as matron. For many years she had nursed the poor in the East End of London, in connexion with our Mission there; so she was no stranger to some of the work out here. It was merely an exchange from an East 'End' to an Eastern Hemisphere, plus the characteristic odours, dirt, and scenes.

And now, as I write, the order has gone forth that these buildings are to be demolished. We would have it otherwise, but it is the decree of Caesar. The progressive Viceroy has bought all the land upon which the hospital, schools, chapels, and houses at present stand, also the buildings, so that he can complete his scheme of widening streets and building barracks and houses. In addition to a substantial sum of money, we now possess a much larger and more desirable site just inside the city wall, with several other concessions. The transaction is decidedly in our favour, and we hope will lead to the more rapid development of God's work.

Plans are prepared, and the contract settled for the erection of the new hospital. In fact, the builders have already commenced. With a

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larger hospital in such a position, with modern arrangements and equipment, we are certain that a thoroughly satisfactory and truly successful medical missionary work will in future be carried on for the women of Wuchang.

CHAPTER VIII

RECENT ADVANCES

THE LAND OF PEACE

SEVERAL years since the members of our Synod determined to develop the medical work. Wisely believing in its centralization, they selected almost the extreme stations of the Hupeh District to erect hospitals, when men and means permitted. At that time there was no prospect of either, but the two stations were chosen. It does not require much either of faith or prayer when men and means are available.

If one engages a boat at Hankow, and travels up the river Han for over two hundred and fifty miles—which has often occupied about three weeks of uncomfortable journeying—the low-lying city of An-lu is reached. There is an alternate route, but not often taken, except for itinerating purposes. On this latter

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journey you first visit Teian, then tramp about one hundred miles across hilly country, and you will reach An-lu from another direction than by the slow boat journey. We have tried both routes, and strongly advise the boat one, even though it be slow and tedious.

Whilst Teian has somewhat correctly been termed 'a storm-centre,' An-lu has never been guilty of such a character. A tripod camera may be set up on one of the streets, with the operator's head concealed under the black cloth, and no more notice will be taken—if as much—than if such a performance were taking place at home. We know of some places in China where such an innocent form of amusement would collect a mob, while in others it would create a riot. The temperament of its inhabitants exactly coincides with the name of the city, 'The Land of Peace.' Often we wish they had been otherwise. The land is undulating, and the people unemotional—and hard.

From the commencement of our work there—twenty years ago—the people have been friendly and polite, but apathetic. Even the 'Boxer' movement failed to rouse them to action. Not one member was persecuted.

Recent Advances

To work under such conditions, which make only for quietness and peace, is not always favourable to progress and development. The question frequently arose whether, after all, An-lu would be the most desirable place for a hospital. In the final voting, it was retained by a majority.

The church at An-lu, which at first was strong and healthy, has become weak and small. Some of the ablest and most devoted men of our district have laboured there. Men such as David Hill, Charles Mitchil, George Miles, and Thomas Protheroe have given of their best and utmost. Still, up to the present day, very little apparent progress has been made. Probably the establishment of a hospital and medical missionary work will prove to be *the* gospel that will appeal to their temperament. We hope so.

The difficulty of securing suitable land or premises has undoubtedly been one of the obstacles to progress. All these years we have been obliged to occupy rented native premises. But now that impediment has been removed. In connexion with the recent exchange of land in Wuchang, to enable the Viceroy to complete a huge and elaborate scheme, we

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were able to conclude the satisfactory purchase of a most desirable and extensive plot of land at An-lu.

Early in 1907 the Missionary Committee were able to send out Dr. Edward Cundall, of York. They appointed him to commence medical work at An-lu. Already he has commenced a dispensary there, and attends to patients in his house. But it is a beginning. Plans are being prepared for the hospital, and we believe that a very bright and prosperous future is beginning to dawn for the Land of Peace.

THE GREAT FOUNDRY

As we pass up the Yangtze, the captains of the river steamers tell us that the stretch of most beautiful scenery from Shanghai to Hankow lies between Kiukiang and Hwang Shih Kang. And they are right. But then they are only familiar with the view from the steamers' deck. Theirs is but the outline of the scene. To really appreciate the glories of the country, with its mountains and lakes, you must travel inland.

The temperament of a people generally

Recent Advances

coincides with their surroundings. For instance, the natives of this hilly and fertile district are of quite a different calibre from those dwelling on the plains of An-lu. Some of our finest characters and most successful preachers have 'come out' from this region. From the beginning, they have entered into the kingdom of God 'through much tribulation.' During recent years great developments have taken place in that part of the country. As its name implies, it is rich in minerals; and as the superstitions are gradually but surely passing away, the people are enjoying great prosperity and anticipate still further advance. During six months of the year, when the river is high, thousands of tons of iron ore from the district are shipped to Japan. All through the year similar quantities are brought up to the Hanyang iron-works and converted into railway metals. This enterprise has proved so successful that at the present day these metals are conveyed from Hanyang to America, and used for some of their railways. Coal is another industry which is there being developed.

It is in such a district as this that our latest advance in connexion with medical missions has been made in Hupeh. This extensive

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area comprises about two thousand miles, with their sick and suffering, and until we commenced no foreign doctor had been in that locality. About twelve months since we had the joy of establishing medical work in Tayeh. This is a town about thirty miles from the coast. A generous gift of £100 from a member of the Synod enabled us to purchase drugs, instruments, and roughly to equip a native house. Those early days and experiences will never fade from our memories: searching for a home; the renting of a native house; the struggles and agitations with the workmen to arouse them; our failures and successes, joys and sorrows. Then the journey to our new partly finished home! The alighting from the river steamer in the middle of a dark night into a surf-boat! To see our earthly treasures, like black monsters, being hurled down after us from the steamer into it, in an unceremonious manner, each thud as they reached the bottom—and we thought of their contents—causing our hearts to palpitate! The long, weary, and dreary wait of several hours at the dirty, dark steamer office, with a crowd of chatting, smoking, and expectorating Chinese! How we did enjoy that trip across

Recent Advances

country! Never had the hills, trees, and fields looked greener or more inviting, the singing of the birds never sounded sweeter! Glee­fully did we greet the men and lads wending their way to the town, carrying bundles of brushwood suspended from each end of the pole on their shoulders. Then the hearty welcome by the members! But our joy was only brief. Two days after our arrival a great storm passed over Tayeh. Our dwelling was quite unprepared for such an emergency—and so were we. To be arrayed in Wellington boots, mackintoshes, and hats, trying to rescue one's home from destruction by water, had not entered into our calculations. Then to spend our second night, covered with large oilcloth sheets, with buckets arranged around our bed, had been omitted from the programme. But the unexpected generally overtakes one in China. Such incidents are but the minor trials of a missionary's life. And doctors are not exempt. Why should they be? Some of the wives of ministers at home, when changing circuits, would do well to have a few of the experiences which our good, long-suffering wives have on the foreign field!

After much delay—for which we are always

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prepared in China—our drugs and instruments arrived. Their 'resting - places' had been numerous during their six-months' journey from England. So it was not until September that we were prepared really to commence work. Of course, much impromptu relief had been dispensed up to that time.

The building is distinctively native. The front portion serves as dispensary and ward, whilst the back part we utilize as a dwelling-house. The whole building is dark and quite unsuitable for either a dispensary or dwelling. But it was the best we could obtain. At first we were only able to receive a few in-patients. These had to lie on straw placed on the ground. Operations were at first performed upon patients as they lay upon a form taken from the waiting-hall. But the people came. In less than three months 2,744 visits were paid to the dispensary, and 80 operations were performed!

At the beginning of 1908 we were appointed to Hankow, and Dr. J. W. Pell transferred from Pao-ching to continue the work at Tayeh. With a small grant he has been able to convert two small dark rooms into a fairly light though rough ward. No longer do the patients

Recent Advances

lie on the ground with straw as a bed, but they now have native beds and bedding.

The last thing we did before leaving was to inspect some land as a prospective site for a hospital, dwelling-houses, boarding-school, and other premises. This most desirable position has now been secured. Plans are being prepared, and soon we hope to see that beautiful spot becoming as the 'garden of the Lord.'

THE PROVINCE SOUTH OF THE LAKE

CHAPTER IX

A LONG-CLOSED DOOR

THE people of Hunan differ from those of Hupeh in that they possess more character. They are braver, physically stronger, and more manly. But they have ever been a proud, exclusive, and anti-foreign race. There is a saying that 'Hupeh men are made of bean-curd, while Hunan men are made of steel.' They are a fighting race. This is probably accounted for—as we have already written concerning the character of the Tayeh natives—by their environment.

Of the eighteen provinces, Hunan is one of the richest in mineral wealth, and abounds with good stone quarries. Its navigable waterways are very extensive, and flow through valleys where the land under cultivation seems of exhaustless fertility. Its mountains are covered with the finest forests in all China.

A Long-closed Door

For many years this province has been the haven of retreat for retired officials, many of them being men of renown, and almost all of them strongly possessed with the belief that China's strength lies in her continued isolation from other nations. This belief was the cause why, when foreigners began to spy out their land, these officials decided on a mode of defence which was ingenious—and wicked.

Huge placards of the most monstrous character, falsely illustrating the objects and motives of the 'foreign devil,' were prepared and put in circulation through the whole empire. One of these placards read, 'Should you come across a foreign devil, you must act as may be most expedient under the circumstances, and rob him of his money, strip him of his clothes, deprive him of his food, or cut off his ears or nose.' In this way they sought to incite the people and build up a wall of defence around their own exclusiveness. The result was that any aggressive foreigner who was brave enough to enter this province received an immediate and rude expulsion at the hands of an infuriated mob.

Missionaries naturally began to look towards this isolated province and conservative people.

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True, this Jericho appeared impregnable. But God had spoken, 'Go through the gate,' and even these 'gates of iron' could not prevail against the forces of prayer and daring faith.

Our mission was the first to suffer as the result of such bitter opposition. The Wusueh riot in 1891, when William Argent was killed, was the direct outcome of these placards and literature emanating from Hunan. For years every effort to gain a footing in this province was frustrated.

Well do we remember being on a visit to Teian in 1893. One day a young and fairly well-to-do member, named Li Kwang-ti, came to Mr. Warren, and related to him a remarkable vision which he had a few nights previous. In this vision Christ appeared to him, and, revealing the needs of Hunan, bade him go and relieve them. Mr. Warren was so impressed by the earnestness of this young fellow, that he asked him to relate his experience to the members of the church. This we heard him do on the following Sunday afternoon, with the result that the church officers and members also became interested. Chang Yih-tze, the native preacher at Teian, became so

A Long-closed Door

aroused that he said, 'I think this call comes from God, and I should like to go with brother Li, if God will open the way.' The members of the little church at Teian formed themselves into a missionary society, raised the money, and sent forth these two ambassadors of the Cross into the dark province of Hunan, armed with tracts and Scriptures. On April 12, 1893, we were present at their valedictory service in the Hankow church. The following week they started. For an account of their exciting experiences and miraculous deliverances during these and subsequent journeys, you must read *Our Entry into Hunan*.¹

These pioneers were followed by such devoted men as the Revs. W. H. Watson, E. C. Cooper, Lo Yu Shan, and Dr. A. Morley, who undertook extensive journeys into the province. Our first premises were rented by the Revs. Lo Yu Shan and E. C. Cooper in the capital, Changsha, during 1902. From that centre we have opened stations in the north, south, east, and west of the province, and developed so extensive a work that in 1907 Hunan was separated from Hupeh and made into a separate district.

¹ By Rev. C. Wilfrid Allan (R. Culley).

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The two cities where medical work has been commenced are Pao-ching—the 'City of Precious Felicity,' and Yung-chow,—'the Eternal City.'

THE CITY OF PRECIOUS FELICITY

Pao-ching is situated in the south-west of Hunan, about five hundred miles' journey from Hankow, in the centre of an important coal-mining district. Not far from where we are now writing—in fact, one can see the masts from our upper verandah—there are lying some curiously shaped boats, made of rough wood, unplanned and unvarnished. These have come with coal from Pao-ching. To show the danger of the journey, it is estimated that out of every ten of these boats which leave Pao-ching, not more than five reach Hankow; and when empty, the boats are broken up and sold for fuel, because the navigation is too difficult to allow of their return. To avoid these dangers, our missionaries generally make the journey from Changsha to Pao-ching overland, though so doing involves about a week of hard and difficult travelling. The people are hard, and their hearts as black as the coal their district

A Long-closed Door

produces. For several years the Rev. W. W. Gibson has courageously lived there alone, adding to his evangelistic work some unpretentious dispensary work and also conducting a very successful opium refuge. Early in 1906 Dr. J. W. Pell returned to China. For several years he had worked out here in connexion with the *Joyful News* Mission, and then returned home to qualify as a doctor. The Missionary Committee appointed him to develop medical work at Pao-ching, whither after his arrival he went for a tour of inspection; and then in the autumn, after his drugs and instruments had arrived, he and his wife went to reside there. He converted some native buildings into a dispensary, and improvised a small hospital. During 1907 he accomplished a good work there, but was then transferred to Tayeh. Since then the work of the hospital has been suspended, as there was no one to continue it. But we have recently had the joy of welcoming from Tasmania Dr. W. B. Heyward, who has come out to fill this vacant and difficult post. He is a man of exceptional medical experience, and also an enthusiastic missionary.

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THE ETERNAL CITY

In April 1893 the Revs. E. C. Cooper and W. W. Gibson made an extensive exploratory tour overland from Changsha to Canton. Their object was partly to visit the most southern prefectural city of Hunan—Yung-chow. It is situated in a beautiful region on the right bank of the Hsiang River (which flows past Changsha) at the foot of lofty hills. The city is large, and its streets well-paved and busy. It has a considerable boating population, and in every respect gives promise for a wide and extensive work.

Shortly after this visit Mr. Cooper was able to rent premises and reside there. Like most missionaries, among his other enterprises he commenced dispensary work. This so developed that it was decided to establish permanent medical work at Yung-chow, and Dr. G. Haddon was sent out by the Missionary Committee early in 1907 as resident doctor. At present there is but a native house, which he has adapted to serve his purpose, but a hospital will ere long be erected. Such work must surely spread and grow until it covers with its benign influence a large area in Southern Hunan 'as the waters cover the sea.'

SOUTH CHINA
CANTON DISTRICT

CHAPTER X

BUDDHA'S HILL

WHEN Dr. Wenyon began medical work in Fatshan in 1881, the town was noted as being one of the most anti-foreign in the Chinese Empire. In the time of the opium wars it had been the scene of a fierce engagement between the English and Chinese troops. The alteration in the feeling of the people is not a little due to the hospital, which for twenty-seven or twenty-eight years has been disarming suspicion and showing to all around the true spirit of Christian love. The town is situated about a dozen miles from Canton. Formerly a tedious journey in a 'slipper-boat' was necessary, but the newly opened railway has brought the two towns into closer contact. There is a population variously estimated at between 500,000 and a million. Probably the first figure is well under the mark. It is possible to travel in a fast sedan-chair, moving

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at five miles an hour, for an hour and a quarter in a straight line from the old hospital without coming to any break in the houses. The town is a wealthy one, and has many industries. Its manufactured iron goods, furniture, and idols are sent all over the empire, and the town has been not inaptly called the Birmingham of China. Around are over two hundred large villages, containing the ancestral homes of many Cantonese families, the members of which are going abroad in increasing numbers, returning after several years to enjoy the wealth which they bring back. Probably not less than three million people live within a circle of a six-mile radius, having the hospital as a centre. In this important and densely populated area there are no resident Protestant missionaries with the exception of our own, so that Wesleyan Methodism has here a great opportunity and responsibility.

To begin with, the Weng Heng Street Chapel was used as a dispensary, but a more suitable native building was soon rented and transformed into a temporary hospital. Accommodation was provided for nearly a hundred patients. Such a large number, however, could only be admitted under most

Buddha's Hill

uncomfortable conditions. Two wards were set apart for women, and three for men, including one reserved for the treatment of those addicted to opium-smoking. In addition there were twelve private rooms, let out to better-class patients at a small charge per month for rent.

The story of the early struggles of the hospital to win a hold upon the affections and confidence of the people is full of romantic interest. Dr. Wenyon was entirely alone, and quite without trained assistants. All around was a large population, curious as to the meaning of the new venture, inclined to be hostile, and ready to give credence to the most wild rumours as to the intentions of the foreign doctor. It is hardly to be wondered at that a people like the Chinese, with their strong belief in devils and devil-worship, when they first see what to them must be the marvellous results of modern surgery, should ascribe them to magic. As Dr. Wenyon says in an early report, 'Here there are few, if any, of the native doctors who know how to open an abscess, tap a dropsy, remove a tumour, reduce a dislocation, tie an artery, or render any assistance in a case of abnormal parturi-

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tion.' For a long time the neighbours remained suspicious. Some thought that the doctor wished to get the eyes and brains of their children in order to make up his drugs. Others thought he had potent charms which would cause those whom he treated to become English in heart. It was a long time before the people began to understand that all was done with the one desire to help them. Still, in spite of these rumours, the newly opened hospital had no lack of patients from the very first. The consulting-room was daily filled with a large crowd, some attracted by curiosity and pretending to have imaginary complaints, others with wan, despairing faces and wasted limbs, who had already suffered many things at the hands of physicians, drawn by a new-found hope that perhaps the foreign doctor could afford them some relief, even if it were by magic. During the year 1882 over 11,000 patients were treated, and of these 470 were admitted as in-patients. It is easy to see what a strain this must have been upon the single-handed doctor. Seventy-seven operations on the eye were performed for entropion (incurving of the eyelid margins) and trichiasis (eyelashes rubbing on the eye) alone.

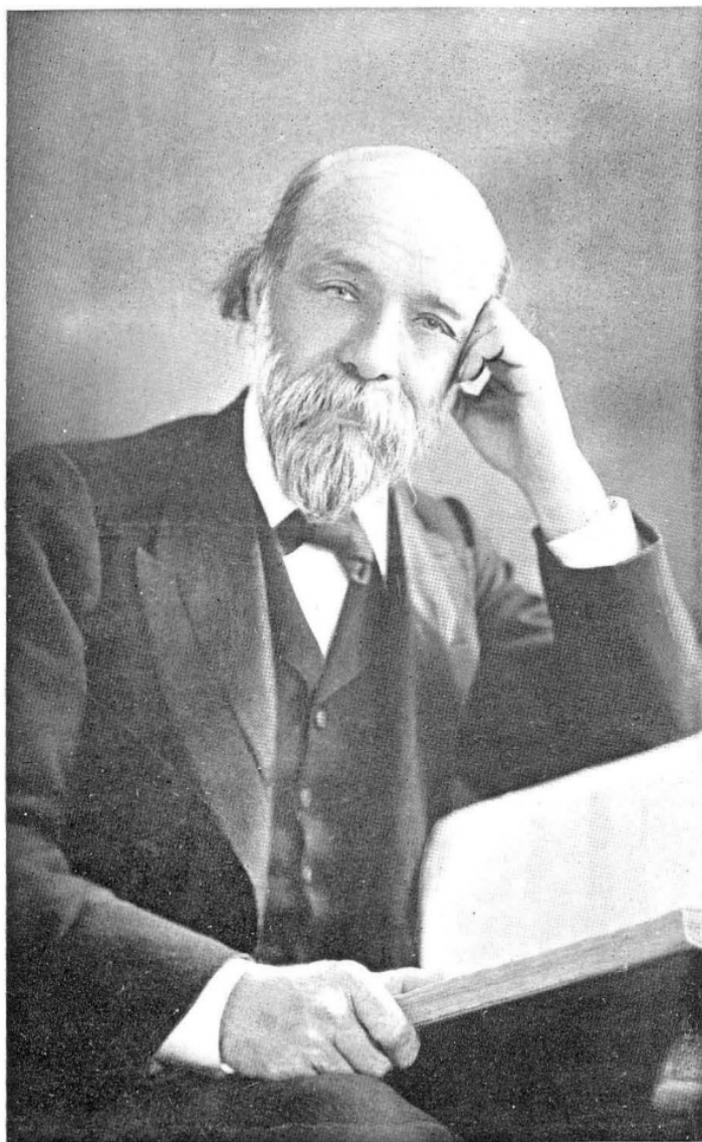
Buddha's Hill

The patients were drawn from every rank of society. Among the first cases treated were a man with four bullets in his body who declared that he had been fighting with pirates (but who was probably a pirate himself), a thief who had been speared in the back by a soldier while in the act of plunder at a fire, and a beggar who had tried to commit suicide by cutting himself about the head and throat with the sharp edge of a broken basin. During the early years a record was kept of the occupations of the patients. In one year we find that among those attended to were included 14 artificial flower makers, 6 ballad-singers, 1 betel-nut seller, 1 birds'-nest dealer, 6 candle-makers for idol worship, 2 children's doctors, 3 constables, 15 fire-cracker makers, 5 fortune-tellers, 42 trinket-makers for idol worship, 6 idol-makers, 36 incense-makers, 75 medicine-sellers, 19 opium-sellers, 7 pawnbrokers, 1 Buddhist priest, 1 Taoist priest, 8 school-masters, 22 soldiers, and 52 slave-girl dealers. The occupation with most representatives was that of farming, no fewer than 466 farm-labourers coming for treatment.

The work was interrupted in 1883 owing to the riots which occurred in Canton. The

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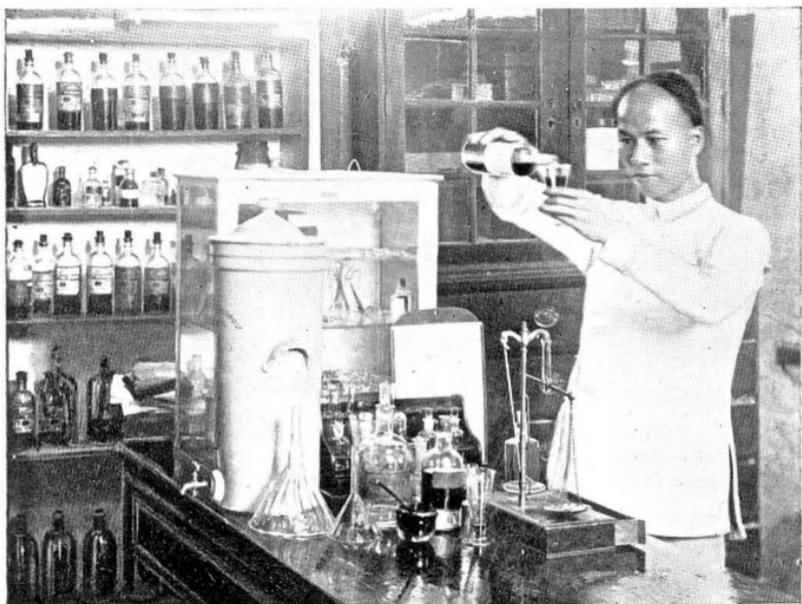
British Consul did not consider it safe for foreigners to remain in Fatshan, and the hospital had to be entirely closed for over a month. As a result, little more than eight months' full work was possible. Time, however, was found to form the first class of medical students. Seven were admitted to begin a three years' course of study, which was subsequently increased to four years. These were the first of a long series of students who have passed through the hospital during the last twenty-five years. The time at the disposal of the doctor for the purpose of teaching has necessarily been limited, so that their training has not been all that could be desired, or at all comparable to that obtainable in an English hospital. Anatomy, for instance, has had to be learnt from the dissection of pigs and from diagrams. Still, all the students have had abundant opportunities for seeing disease practically treated, and many of them are now in practice themselves and doing useful work. During their residence at the hospital they have rendered much assistance by helping at operations and attending to the subsequent dressings. Many of them have taken an active part in the evangelical side



DR. WENYON.



THE THEATRE AND PART OF NURSES' QUARTERS,
Fatshan New Hospital.



FATSHAN HOSPITAL.
Mr. So Kit Shan making up a mixture in the Drug Room.

Buddha's Hill

of the work, both by preaching at the public services and teaching the in-patients. Some, such as Mr. So Kit Shan, the present devoted house surgeon and dispenser, have stayed on after the completion of their course to assist in the work of the hospital, and occasionally, during the foreign doctor's illness or absence from other causes, have undertaken the whole responsibility. The students, almost without exception, have left the hospital as baptized Christians. Occupying, as they do, positions of social influence in the towns and villages from which they have come, they are exerting a wide influence for good among their fellow countrymen. It is an interesting fact that when the first meeting of the Chinese Medical Society was held in Canton, to which only doctors who had been taught on Western lines were admitted, about one-third of those present had received their training in Fatshan.

There have been several instances proving the devotion of our Fatshan students to their work. About three years ago we were in the middle of a severe epidemic of plague. People were dying all around. It was a sad thing to see the despair which is a feature of the disease. Oftentimes the patient makes no effort,

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and at once accepts death as inevitable. Heathenism is sadder than ever at times such as these. The hymn is literally true—

Men die in darkness at your side,
Without a hope to cheer the tomb.

Their dumb acquiescence in relentless fate is very different from the psalmist's experience: 'Though I walk through the valley of the shadow of death, I will fear no evil: for Thou art with me; Thy rod and Thy staff they comfort me.' One day we went into the town to see a little boy in the last stage of the disease. He was the only son, and all the women in the house were wailing bitterly. The poor mother was ready to grovel on the ground in the hope that something could be done, but only a miracle could have saved her child. Upon our return, there was a boat anchored by the river-steps outside the hospital, containing an old student and local preacher, who was lying on a couch suffering from the same disease in its pneumonic form, the most virulently infectious of all. Somebody had to nurse him, and one of our students, Kwok A Yam, offered to take the risk. As a student he had always been an active church

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member, and ready to speak at the services to the heathen. Being clever and reliable, he had just been promoted, after completing his course, to the position of house surgeon. During the short time he occupied this post he proved very useful and learnt enough English to read prescriptions, and thus take much work off the hands of Mr. So, the dispenser. He was shortly to be married, and we were looking forward to a long life of happiness and usefulness for him. But God had ordained otherwise. Three days after attending to his friend, he himself began to show signs of the terrible scourge, and went rapidly downhill. When first attacked, he declared that he knew he would die, but that he had 'prayed to the Heavenly Father, and was not a bit afraid.' Just before death he again said that he had no fear. The end came very soon, and surely it was a noble one, for he had surrendered his life for the friend whom he had tried to save. Nobody could give a better dying testimony. His trust and fearlessness were in marked contrast to the horror shown by most plague patients, and this contrast taught a lesson to at least one observer which it will take a long time to forget.

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In 1884 Dr. Macdonald arrived in China, and was stationed in Fatshan as Dr. Wenyon's colleague. Mr. Anton Anderssen had already been engaged as dispenser, and so the hospital was now well staffed. During this year there was further rioting. Two chapels in Fatshan were partially destroyed. The trouble was largely due to the renewal of hostilities with France. Proclamations were issued by the Chinese mandarins offering a reward for the heads of French soldiers, and this increased the prejudice of the Chinese against foreigners generally. No damage was done to the hospital, though it was repeatedly threatened and the doctors were semi-officially requested to close and leave. The inconvenience was limited to bands of roughs who assembled in a menacing way round the building.

The hostility of the officials towards foreigners did not, however, prevent them from seeing the value of the foreign hospital when medical aid was needed. Towards the end of the year a large powder-mill, situated on the outskirts of the town, blew up. It contained at the time over fifty tons of gunpowder, and the force of the explosion was such that most of the workmen, numbering

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over 200, were instantly killed. A few were found among the débris, seriously injured but still alive, and thirteen survivors were brought to the hospital at the request of the mandarins. Their condition was critical, as all had received severe and complicated injuries. Three of the patients died, but the others recovered. No doubt incidents like these helped to protect the hospital while other buildings suffered at the hands of the mob.

During the year 722 people were admitted as in-patients. These included no fewer than 180 opium-smokers who came to be cured of the habit. One of the wards had, as we have stated, been set apart for the treatment of these cases. From the opening of the hospital until the present time quite a considerable number of opium-victims have been received each year. The lot of the confirmed opium-smoker is pitiable. He grows thin and emaciated in body and stunted in mind, caring for nothing but the drug. His craving is such that in order to satisfy it he will go without food and sell his wife and children. But no case is hopeless. It is wonderful what improvement rapidly takes place when once the drug is abstained from. A typical case was

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that of a young man twenty-four years of age, of good family and position, who was brought to the hospital from the province of Kwangsi by his father. He was as pale and emaciated as any of the rest, though there was no poverty to account for it. The first few days he suffered severely, and but for the threats of his father would have left the hospital. In a few days more the worst symptoms were relieved, and after about three weeks he left the ward cured. During his stay he had gained about twenty pounds in weight. Replying to the criticism sometimes made by outsiders that the opium-smokers who are mentioned in the reports of Chinese mission hospitals are mere impostors who come to be fed, and to receive opium in the form of pills and powders without having to pay for them, Dr. Wenyon writes: 'It is only at what is a considerable expense to the poorer class of patients that opium-smokers can avail themselves of the benefits of our institution. They must pay their fare to Fatshan, if they live at a distance; must deposit two dollars with us as security before being admitted as patients; and must support themselves during the sixteen days of resi-

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dence ; they thus lose also more than a fortnight's wages. There is nothing therefore to induce such persons to come to us with any hypocritical pretences. If they seek admission to the hospital, they do so because they are convinced that the habit of opium-smoking is doing them serious injury, and because they sincerely desire to break it off. The weakness of will which prolonged opium-smoking invariably induces, and the miserable monotony of a Chinaman's life, place almost insuperable obstacles in the way of all attempts to throw off the habit ; and though we have the satisfaction of knowing that some of our patients have been assisted to surmount these obstacles, yet we cannot but believe that the permanence of the cure in all these cases must depend rather upon the inspiring influence of Christian truth than upon the mere physical effects of medicine.'

In 1885 Dr. Wenyon went to Lung Chau in company with the Chinese troops, so that for a considerable portion of the year Dr. Macdonald was left alone in charge. As he had only been in the country for six months, we cannot wonder that in his diary he says how much he felt the loneliness of his position.

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On June 1 we read: 'Alone in Fatshan. My colleague ill in Canton. Sixty-one in-patients and thirteen operations. Students' exams. Not feeling well.' On June 8 he writes: 'Attending to poor wounded soldiers, down from Nam Ning—they report many killed. Feeling ill all day; fear jaundice. The weather is scorching.' After some months' absence, Dr. Wenyon returned. His services to the Chinese troops at the seat of war were recognized by the Viceroy, who gave a special donation of about £20 to the funds of the hospital.

Next year (1886) the experiment was made of starting some branch dispensaries for the treatment of the poor only, as auxiliaries to the mission work already begun. One was opened first in Shi Kiu and then in Shiu Kwan under Mr. Li King Shang, and the other in San Ui under Mr. Tam Peking, who generously refused to accept remuneration for his services. Among the private patients treated at Fatshan itself was one of the leading gentry, the son of a former Viceroy, who consulted the hospital doctors about an affection of his eyes. As a token of gratitude after recovery he presented a handsome tablet,

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which was placed among others in the entrance-hall. It was discovered that the hospital was greatly indebted to the friendly disposition of this nobleman for the protection it had enjoyed during previous troublous times.

During the year fifteen cases of opium-poisoning were attended to. The Chinese, like most Eastern races, will sometimes attempt suicide on the slightest provocation. The cause may be merely a slight quarrel between two relatives over the spending of a few ten-cent pieces. Perhaps a son has been reprovved by his father. In order to spite his parent, he will swallow a poisonous dose of the drug, which is only too ready at hand. One case which came under our treatment was that of a young man whose father and mother were dead. Authority thus rested, according to Chinese custom, with the eldest son. This man, being of a niggardly disposition, refused to buy a wife, when requested to do so, for his younger brother, who accordingly swallowed a large dose of opium merely with the idea of bringing trouble upon his relative. Oftentimes, however, the poison is taken as a last refuge from a life of cruelty and tyranny. One very sad case was that of a woman whose

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husband had been addicted to the vice of opium-smoking for years, and had brought his home to utter ruin. He had been persuaded to give up the drug, but was afterwards discovered by his wife purchasing some more in order to begin again. The poor woman, fearing that poverty and neglect and cruelty were once more coming upon her home, took the opium herself in one large dose. Unfortunately, in cases like these we are often called too late. Occasionally the aid of the mission doctor is requested even when the patient is known to be dead. There is a curious superstition that a day or two after a man has died from opium-poisoning he sometimes shows signs of life just for a few minutes. A message once came from the workmen on one of the large wood rafts which float down the West River asking the doctor to see a young man who had taken opium after quarrelling with his father. The crowd of relatives present agreed when it was pointed out that the man had been dead for some time, but they repeatedly asserted that sooner or later he would revive, and earnestly besought some powerful medicine to give him at the right moment, in order

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that the patient might not lose his chance of recovery.

In 1888 Dr. Wenyon, just back from a year's furlough in England, was again left in sole charge of the hospital. Mr. Anton Anderssen went to Ku Shiu to open a dispensary there, and Dr. Macdonald went up to Shiu Kwan on the North River. The hospital records of about this time refer to two incidents which well show the unscrupulous way in which misleading reports are spread about in China, to the disadvantage of our work. A certain native doctor had a young girl brought to him whom he was unable to cure. He accordingly took her to the hospital. When admitted, she was suffering from a compound comminuted fracture of the right thigh, of by no means recent date, and much aggravated by neglect. The injury had evidently been inflicted by some very cruel treatment; but the girl preferred to keep silent upon that point. The patient was put under chloroform, the projecting end of the bone was removed, and the limb was placed upon a suitable splint for three months. At the end of this period, when all the wounds had healed, the girl, whose general health had very much improved

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during residence, went back to the doctor with a shortened, but still a good and useful, limb. The native doctor thereupon took all the credit of this case to himself, and at once gave out that he could set bones fractured in three places, and the girl's friends presented him with a black-and-gold tablet inscribed with most laudatory characters.

In another case a young woman had been under the treatment of some native doctors for the cure of a tumour. By the use of strong caustic applications for several months they had exhausted the strength of the patient, and at length had broken into a large blood-vessel. Unable to arrest the bleeding, the authors of the mischief refused to have anything more to do with the case, and the mission doctors were sent for. The woman was dying when they arrived, speechless and almost pulseless. It was easy to stop the bleeding, and not a single drop more of blood was lost; but it was too late, and the woman died that night. The native medicine-men forthwith caused it to be announced in the native newspapers that a young woman having been under the treatment of native doctors for several months without any disadvantage,

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had at length, in spite of the remonstrances of her advisers, been submitted to the treatment of a foreign doctor, with the result that she died the same night.

The old premises, consisting as they did of mere native buildings, roughly adapted for the purpose of a hospital, were far from suitable. Moreover, the rent, which for the first few years had been generously paid by Mr. James S. Budgett of Guildford, now began to prove a serious charge upon the income. Accordingly, it was decided to purchase a piece of land with a frontage on to one of the main streets on the other side of the river. During 1889 Dr. Wenyon's time was largely taken up with superintending the erection of the buildings, and in the following year the new hospital was opened. There were four small wards and eight private rooms for wealthier patients. Everything was still almost entirely native in style, but the arrangements were in many ways more convenient. Accommodation was provided for about forty patients.

During the first few years of the hospital's existence practically no charges for treatment were made, and operations were performed

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gratuitously. At that time this was the almost universal practice throughout China. Now there is probably not a single mission hospital where some, at least, of the wealthier patients do not help a little towards the expenses. The Fatshan hospital was among the first to introduce this change. The poor must always be warmly welcomed at our mission hospitals without any charge, but it seems unfair to take money which has been given in the home country at the cost of much self-denial in order to benefit some rich man who has already spent large sums of money on native doctors, and who is quite willing to contribute something to meet the cost of treatment. Not only does this system of partial self-support relieve the financial burden at home, and so enable two or three hospitals to be established where otherwise only one would be possible; but it allays suspicions regarding our work, causes the wealthier classes to place a higher value upon the benefits of Western science, and makes them more willing to submit to prolonged and careful treatment. After six years of indiscriminate free healing, the system of partial self-support was gradually introduced with beneficial results. Ever since,

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while giving gratuitous treatment to the poor, attempts have been made to raise the funds necessary for doing so by receiving contributions from those patients who are willing to pay.

With the small staff of men available it was soon found impossible to carry on effectively the branch dispensaries, so that with great reluctance these were all gradually closed. The story of Dr. Macdonald's attempt to start work in Shiu Kwan is told in another chapter. On his return to China in 1893 he was again stationed in Fatshan. Here he remained alone while Dr. Wenyon and Mr. Anton Anderssen took their furlough. It was a worrying and trying time. One evening, during a strike of the iron-workers of the town, placards were affixed to the hospital threatening the doctors with death; but the doors remained open, and preaching went on next day to larger audiences than usual. On another occasion a call came from a distant village for the doctor to attend an urgent case of sickness. While returning late at night, his chair was suddenly surrounded by a small band of robbers, who demanded the surrender of everything of value. Resistance was use-

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less. The chair-bearers had already accepted the inevitable, and placed his chair on the ground. Dr. Macdonald gave them what they wanted, including a few dollars just received as a subscription from the patient whom he had been treating. When the robbers had taken all they could lay hands on, Dr. Macdonald began to tell them how he was just returning from a long journey undertaken to save life, and that the money had been given with a view to carrying on his work of helping their fellow countrymen. The robbers asked him his name, and on hearing who he was, apologized for mistaking him for somebody else. They had heard of his kindness to the poor, and were sorry for having molested him. They then handed back the money, and told the chair-bearers to walk on.

The following incident, which occurred about this time, shows how, in China as elsewhere, the gospel has power to influence the most degraded. Wong A Ho, 'a woman who was a sinner,' was brought by her heartless owners, when of no further profit to them, and left at the hospital to die. She was married at seventeen to an opium-smoker, and after the birth of her first baby was stolen, probably

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with her husband's connivance, and carried off by main force to Canton. Her health became completely shattered, so that treatment only served to prolong her life, and render her last days more endurable. The Bible-woman daily instructed her and the other women in the Scriptures. Towards the end she dreamed one night that a man in black tempted her, saying, 'How is it you have been lying ill so long and growing gradually worse?' Before she had time to reply the scene was changed. She stood in a brilliantly lighted hall, filled with people dressed in beautiful apparel, some seated, some standing, but all carrying bouquets and wearing pearl necklaces. The principal personage, who was clad in imperial robes, bestowed similar gifts upon her; and bade her be seated among his guests. The vision gave her great comfort; to the last she declared she had seen Jesus; and as she asked for baptism, and stated that she forgave all who had injured her, she was admitted into our fellowship.

When Dr. Wenyon returned in 1895, he found Dr. Macdonald broken down in health. He contracted typhoid fever, and this was

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followed by pleurisy and severe haemoptysis. One lung became seriously affected, and an immediate furlough was deemed necessary as the only hope of saving his life. Dr. Macdonald was never again appointed to Fatshan. When, contrary to the expectations of his colleagues, he returned to China, he was requested to begin work in the newly opened port of Wuchow, where he remained until the time of his death.

Dr. Wenyon retired from the field in 1896 after sixteen years of hard service, faithfully rendered. In the meanwhile Mr. Anton Anderssen had become legally qualified to practise as a doctor. Mr. Anderssen had been closely associated with the work almost from the beginning, first as dispenser and then as house surgeon. By diligent reading and observation he soon acquired a good practical knowledge of medicine, and eventually successfully passed the examination for his degree at Denver University in America. During the four years following Dr. Wenyon's retirement he lived on the hospital premises and bore the sole responsibility of the work. On one occasion he nearly lost his life. Hearing burglars moving about his rooms

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over the hospital at night, he sprang out of bed and encountered a robber. A struggle followed, in which Dr. Anderssen was severely wounded in the face and head by a knife which the burglar was carrying. When the native assistants arrived, the man had already made good his escape over the roof, and the doctor was discovered lying on the floor in a semi-conscious condition. Fortunately, the wounds did not prove fatal, and Dr. Anderssen recovered with no worse effects than some deep scars.

It was a great relief when Dr. W. J. Webb Anderson arrived from England in 1900, and at once, while learning the language, began to engage in the hospital work. This was the year of the 'Boxer' riots. Although a sum of £50 was offered for the heads of the foreigners, and the doors had to be closed altogether for two months, so far as the hospital was concerned, the year passed without serious trouble.

Dr. Webb Anderson, soon after his arrival, began to enter into negotiations for the purchase of some land on which to erect a new hospital, well equipped with modern conveniences. Many reasons made this step advisable.

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The old hospital was too small. Several in-patients had to be accommodated in boats anchored to the river steps. The surrounding neighbourhood was densely crowded and unsanitary. On one or two occasions there had been outbreaks of tetanus in the wards. At times of flood the lower stories were covered with some feet of water. It was proposed to retain the old hospital as a dispensary and receiving-room, for which purpose its central position made it most suitable, and to build a new hospital in a more healthy district. Land-buying in China is a most tedious business. All is done through a middleman, and often there are thirty or forty people to be consulted; but eventually, towards the end of 1901, negotiations for the first portion of the new site at Man Cheung Sha were concluded and the bargain-money paid.

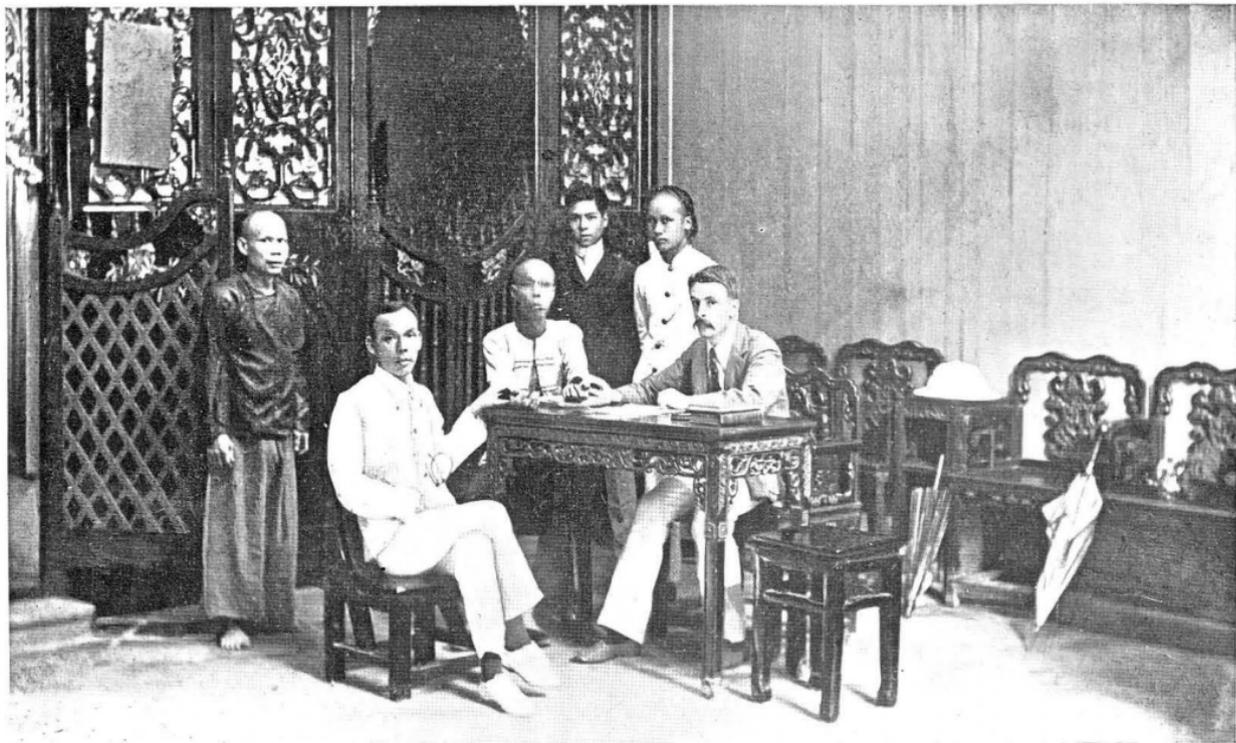
In the meanwhile work went on in the old hospital as usual. There was a severe outbreak of cholera in the town during 1902. Among the patients was the Rev. C. A. Gaff, who recovered after a severe attack. The influence of the hospital was steadily growing. This was especially noticeable in the greater demand for operative treatment,



FATSHAN HOSPITAL.
Dr. Webb Anderson and students and nurses.
Operation for Cataract.



FATSHAN HOSPITAL.
On a Saturday morning : coolies washing the
front steps,



FATSHAN HOSPITAL.
Dr. Dansey Smith interviewing out-patients,

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and the larger number of influential families whose homes were opened to the foreign doctor. One interesting patient was a wealthy old Chinese lady, aged ninety-three, whose death had been predicted by one of the most celebrated idols in Canton, but who recovered in spite of this prophecy. To show her gratitude she presented \$100 to the hospital funds.

In 1903 Dr. Anton Anderssen retired. It would be difficult to put too high a value upon his work, especially during the years between Dr. Wenyon's retirement and Dr. Webb Anderson's arrival. The Chinese native church in Fatshan owes him a deep debt of gratitude for the way in which he served its interests for so long. Dr. Webb Anderson, though far from being in robust health, was now left alone in charge.

This is perhaps a good opportunity for referring to the evangelistic work carried on in connexion with the hospital. Great prominence is given to this all-important feature. Services are held morning and evening for the in-patients, and the doors are frequently thrown open for the general public. These services are conducted by the doctors, or by the catechists and students, and sometimes by

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the other missionaries, who have always been most willing to assist. In addition, there is heathen preaching in the hospital chapel every morning. Each year probably not less than five thousand women are preached to in the wards and in their own homes by the Bible-women. The patients, during their stay in the hospital, are frequently accompanied by friends and relatives. Every one of these is brought under the influence of the gospel. Some are eventually baptized, though we regret that the number of these is far fewer than we should desire. Many more, we hope, return to their homes permanently affected for good, and well disposed to the Christian religion.

At the Synod of 1904 it was thought advisable that the Christians who worked in connexion with the hospital should be formed into a distinct church and circuit, separated from the original Fatshan circuit. Accordingly, the first day of the Chinese New Year marked the establishment of the Fatshan Hospital and the Man Cheung Sha circuit. The opening services were held in the barn of the newly purchased oil-works on the site of the future hospital.

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Towards the end of the year a series of special missions was held on the empty land opposite the old hospital. The students and employés levelled up the ground with sand. A bamboo framework was erected and covered with the cloth which, after sterilization, was to do for next year's bandages. Seven foreign missionaries and eight Chinese preachers took part. For several evenings in succession over a thousand men were present, and large numbers gave in their names as wishing to learn more of the doctrine.

Unfortunately, at this stage Dr. Webb Anderson's health broke down, and, at the beginning of 1905, he was compelled to go home on furlough. Dr. Dansey Smith, who had arrived in China a year before, came down from Wuchow to take his place. He was joined in April by Dr. Philip Rees. This year there were nineteen medical students in residence. An encouraging feature of the twelve months' work was the continued increase in the number of visits paid to the homes of patients. These exceeded three hundred, in addition to sixty occasions on which the doctors were requested to attend cases of difficult labour. In Fatshan a pro-

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fessional visit is a much more ceremonious affair than in England. To a new-comer, indeed, it is most embarrassing. The journey itself, made in a sedan-chair, is a novel experience. If it is an urgent call, the doctor is carried along at a good pace through the narrow, crowded streets. The chair-bearers call out loudly to the people to get out of the way with cries of 'Save life!—save life!' 'Mind your back, little brother!' 'Thank you, elder uncle!' &c., &c. Often, in reply to interested spectators, they will shout out details of the case to which we are going, and on the return journey are quite willing to reply to inquiries as to how we left the patient. Wayfarers, who are loitering along unmindful of the request to make room, are unceremoniously pushed aside, but they put up with this with great equanimity. One man who had received a vigorous jolt from the end of the pole was observed merely to rub his head and exclaim, 'It's very hard!' One trembles to think what an Englishman would say under similar circumstances. When the patient's home is reached, the doctor is invited in by the head of the house, and some time is wasted in each trying to make the other sit

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down first. According to the Chinese Classics, the rules of ceremony are three hundred in number, and those of behaviour three thousand ; and one can well believe that it is so. Tea has to be drunk first, and much conversation entered into before the suggestion is thrown out at last that perhaps the doctor might like to see a case of sickness in the house. In the meanwhile, if the patient happen to live in a distant village, the whole population will turn out and form such a crowd outside the house as to block the street. After the patient has been seen and any necessary operation performed, a small feast is prepared, and perhaps arrangements are made to spend the night in some ancestral temple. It is then that abundant opportunities present themselves for friendly conversation about the gospel.

Dr. Webb Anderson returned to Fatshan in 1906, much benefited by his visit to England. Dr. Philip Rees was appointed as his colleague, but, after another twelve months, had to leave to take charge of Wuchow, there being at this time, owing to sickness and death, only two medical men in the district. It was thus unavoidable that Dr. Anderson

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should be left alone, though the work had now reached such a stage of development that it was impossible for one man adequately to cope with it. Considerable anxiety was caused during the year by the receipt of blackmailing letters, threatening to kidnap the doctor's little child, and intimating, in abusive language, that the hospital would be burnt down unless a sum of £500 was immediately paid. Special Chinese gunboats were stationed at the river entrance to the compound, and there was a visit of inquiry by H.M.S. *Robin*.

In 1908 Dr. Anderson was joined by Dr. Alfred Hooker, and early in the year the new hospital, though far from complete, was opened for the reception of patients. Ever since the purchase of the first plot of land, about six or seven years previously, negotiations had been steadily proceeding; additional land had been purchased, and buildings erected as money was forthcoming. It would be wearying to recount the different stages by which the property has been patiently acquired. Altogether, a fine plot of two-and-a-half acres has been secured, at a cost of £1,250. A bund wall, with a flight of stone

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steps, has been placed along the river-bank. Facing the street there is a lofty front entrance, used as a chapel on Sundays, and a block of buildings containing drug-rooms, study, reception- and students' rooms. An operating-building has been completed, containing two theatres (one for septic and the other for aseptic cases), two casualty-rooms (for men and women respectively), and store-rooms. Other buildings include nurses' and Bible-women's quarters, cook-house, mortuary, and one block of private rooms, each with lavatory and cook-house attached. In addition, a commodious chapel, seating five hundred people, has been erected opposite the old hospital. A grant of £500 was received from the Twentieth Century Fund. With this exception, the money for the purchase of land and erection of buildings has all been obtained without charge to the Society.

Unfortunately, there are as yet no wards for in-patients, many of whom have still to be cared for in the old hospital. At present, owing to lack of funds, it is impossible to proceed further with the scheme, but it is hoped that before long there will be ample accommoda-

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tion available for both men and women, so that the old premises may be used merely as a dispensary for out-patients, and as a receiving-room for in-patients before being transferred to healthier and more suitable surroundings.

The following figures will give an idea of the work accomplished by the hospital since its foundation in 1881. During the past twenty-eight years the numbers have been approximately :

Out-patient cases	194,000
In-patients	8,100
Midwifery cases	960
Operations upon the eye	1,400
Operations for stone	480
Total operations	6,800

Perhaps when compared with the records of a big hospital at home, these figures may seem small, but it must be remembered that for the greater part of the time there has been only one doctor to superintend the work. The stone operations alone represent the relief of what is truly a vast amount of misery and suffering. This painful and fatal disease is common in

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South China. The native doctors are quite powerless to deal with it. Many of the patients on arrival are so worn out and emaciated by years of agony as to be unable to walk. The following case is a type of many similar ones. The patient was a little child who had been ailing for years. All remedies were tried, but without affording any relief. At last her mother, feeling that she was sure to die, sold her as a slave-girl for a few dollars. Her new owner had heard that similar cases had been cured at the hospital, and so brought her up to be operated upon. The child was wasted almost to a shadow, with a pathetic little thin and wizened face, deeply marked as the result of constant suffering. For some time after operation the result was doubtful; but she soon began to improve, and eventually left the hospital entirely free from pain, double in weight, and as happy and cheerful as other children.

Nearly one thousand cases of midwifery are included in our list. The Chinese have no knowledge as to what ought to be done in times of difficulty. As a rule, in any seriously abnormal case of childbirth the mother dies. The large majority of those who come under our treatment require operation. Not infre-

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quently a long journey to a distant village is necessary, and after the operation the doctor and nurses have the privilege of telling about the Great Physician to those who are in a receptive frame of mind to hear the gospel for the first time.

It is encouraging to think of the number of eye cases included in the above statistics. Many of these fourteen hundred operations have resulted in the saving or restoration of sight, and in addition large numbers of patients have been treated medically for different forms of ophthalmia which otherwise would have led to absolute blindness. The dirt and squalor which are characteristic of the crowded homes of the Chinese poor make them easy victims to all forms of inflammation of the eye. Their sufferings are aggravated by the effects of bad treatment, a favourite remedy consisting of powdered shell or sand rubbed into the inflamed organ. The havoc which these diseases work among little children is terrible. In any Chinese street one can frequently see crowds of beggars in long procession, who have been blind since infancy, all for the want of a little careful attention. The lot of the blind man is sad; but that of the blind girl is infinitely

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sadder. A blind man may earn a miserable living by begging in the streets, but it is a pitiful fact that the blind Chinese girl of the poorer classes has often absolutely no chance of obtaining even enough to eat, except by a life of vice. If a mission hospital accomplished nothing else beyond alleviating this condition of affairs, it would still justify its existence.

Fatshan Hospital has already had a notable history. But we hope that in the future, with better premises and better equipment, it may be still more useful in its twofold aim—the relief of suffering and the proclamation of God's love to sinful men.

CHAPTER XI

THE 'TREE OF THE PHOENIX' CITY

THE city of Wuchow is the chief commercial centre of the little-known province of Kwangsi. It is admirably situated at the junction of the West River and its tributary the Cassia River, about 240 miles away from Canton. The country around is covered with range after range of hills and mountains. Though many of these are full of various kinds of minerals, practically no attempt has as yet been made to tap these sources of wealth. The soil is not very fertile, and the villages as a whole have a poverty-stricken appearance, very different from those of the delta around Canton. The inhabitants are lawless and warlike. Many almost inaccessible mountain fortresses form convenient hiding-places for robber bands, and make it difficult for the Government to enforce its laws. The whole province has time after

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time been swept by rebel armies, who have destroyed the crops and harassed the people. The great Tai Ping rebellion, which nearly succeeded in overthrowing the present dynasty, had its origin here. After its failure, those who escaped returned to their homes, and ever since their descendants have taken toll from their more peaceful neighbours. The inhabitants are backward in education and civilization. Until quite recently, hardly any attempts have been made to introduce Christianity, and even now, from a missionary point of view, the province is perhaps the most neglected in China.

In the year 1897 Wuchow was added to the list of treaty ports. Dr. Roderick Macdonald had just returned from a furlough in England, which he had been compelled to take owing to an attack of haemorrhage from the lungs. It seemed at one time that it would be impossible for him to resume work. However, with characteristic courage he determined to go back, and it was towards opening up Kwangsi to the influence of the gospel that his thoughts turned. A branch of the Imperial Maritime Customs Service had been stationed at the new treaty port, and a medical officer

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was required. Seizing the opportunity, Dr. Macdonald applied for and received the appointment. He took up his residence in Wuchow a few days after the town had been declared open for foreign trade. Here he lived for the next nine or ten years, refusing to go home on furlough, never taking a holiday, only leaving the port for about ten days each January to be present at the District Synod, gradually overcoming the prejudices of the people by his self-sacrificing life, until at last, at the time of his death, he had laid the foundation of what we hope will one day be one of our most flourishing mission centres.

The start of the Wuchow medical work was a humble one. The doctor and his wife lived in a Chinese house-boat among the crowded river population. This proved to be an unsatisfactory place for the dispensary, owing to the sudden winds which converted the river at times into a small storm-tossed sea, and caused the boat to rock so much as to smash the bottles in which the drugs were stored. Arrangements were accordingly made to rent a small Chinese house on shore close by, and here the patients came to be seen for some months. Later in the year a plot of land was

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secured, about a mile from the centre of the town, and the first building of our Wuchow compound was erected in the shape of a little wooden hut, raised above the ground on posts as a precaution against floods. At first the people were rather hostile, but they gradually became more and more friendly. Disputes as to land were settled without any appeal to the authorities, Chinese or British. Local workmen only were employed. The comfort of the neighbours was considered by the repair of two public roads which passed right through the purchased land, and the erection of a flight of sixty stone steps up the muddy river-bank, which all were allowed to make use of. Almost the first in-patient was an official from Kwai Lam, the capital of the province, who was received into the wooden hut and operated upon successfully.

Another early patient was Bishop Chousy, who had been for forty years the Roman Catholic bishop of the province. It is one of the advantages of medical mission work that it enables us to show kindness to members of other missions with whom otherwise we should be brought but little into contact. The relations of our Wuchow mission with the Roman

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Catholic priests, who are numerous in the province, have always been friendly, and on several occasions we have been able to give them medical help. In the summer of 1899 Bishop Chousy was brought down by his Chinese servants in a dying condition. Dr. Macdonald attended to him during his last hours, and afterwards assisted in the funeral service.

During the year 1899 Wuchow was visited by a terrible epidemic of plague, and large numbers of the inhabitants died. Dr. Macdonald did all he could to relieve the sufferers, receiving them on to the compound and going into the town whenever requested, but it was disheartening work. In order to understand the difficulties encountered, it must be remembered that in a Chinese town sanitary science is absolutely unknown. In one of his early reports to the Imperial Maritime Customs Service, Dr. Macdonald gave a vivid description of the town from a doctor's point of view. Probably the same description holds true of most Chinese cities.

'The streets are not wide enough for the traffic. When the population is purchasing provisions preparatory to the two principal

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meals of the day, passengers are obliged to proceed at snail's pace through the streets and submit to be jostled by an unwashed crowd, whose homes and garments without doubt harbour infectious diseases. The narrow streets are further encroached on by tradesmen's stalls. Fish tails are purposely allowed to drip over the edge of the stall, where foot-passengers' clothing is constantly soiled by them. Flies assiduously make trips between the garbage beneath the tables and the food exposed for sale thereon. Pigs are habitually turned into the streets to pick up a living by feeding upon offal. These disgusting scavengers are afterwards sold for food. Slops are suddenly pitched out of open doorways and from upper windows upon the passengers in the street. The roads are unevenly paved with large, ill-fitting stones. Loose blocks may conceal puddles, and when stepped on, squirt liquid filth over the unwary pedestrians' dress. This is not, as might be supposed, a gamin's practical joke. It is simply due to neglect. The rudimentary street drains are defective in every respect, neither keeping the pathway dry nor preventing drainage from soaking into the subsoil. Few have any mortar, and most

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are stopped up with silt. From them may be inferred the condition of the covered drains. Rubbish is simply dumped on river-banks and waste plots. The dead are buried upon every hill in such fashion as to spoil every landscape and foul every spring of water in the neighbourhood. Sometimes the dead are kept, by the geomancer's advice, in their coffins amongst the living in dwelling-houses for months, or, it may be, years. The houses are ill-ventilated. An Irishman might safely say of most of them that the front and back doors were the only windows they possess. They are dark, damp, and dirty. Water is laboriously and expensively drawn in buckets from fouled wells and the defiled liquid at the river's bank.'

Under such conditions it is hardly to be wondered at that the epidemic of plague, once started, spread with alarming rapidity. Of eleven people who inhabited one house, nine died. In another case the members of a whole family had succumbed, together with all the servants, with the exception of one who was out of town. On her return, the neighbours came to congratulate her on inheriting so much property. Upon entering into possession of the house, however, she

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herself caught the disease, and died. No attempts were made at disinfection. It is true that a proclamation was issued commanding that the clothing of plague patients should be burned, but no trouble was taken to see that the order was obeyed. Large sums of money were uselessly spent by the populace in providing idol processions. Out of twelve districts, ten had such processions in order to stay the disease. If only half the money had been spent in disinfectants which was wasted in fire-crackers, the mortality would have been far less.

In the same year (1899) the first converts of the newly established mission were received into the Church. Four men and four women were baptized at the same Sunday service. But it was a long time before the people as a whole could be prevailed upon to trust the new doctor. Mrs. Macdonald, in the biography¹ of her husband, relates that about this time 'one very superstitious heathen neighbour came to the doctor in great distress and grief. Some years before her husband, an opium-smoker, had died, and she assured the doctor that she had well paid a necromancer to find

¹ *Roderick Macdonald, M.D.* (R. Culley).

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a suitable hill-site on which to place his tomb. But now her only two grandchildren had died, and she discovered, on consulting a witch, that her husband's spirit was not happy in Hades; his tomb had been wrongly placed; and to show his vexation, he had fetched away both his grandchildren. In vain the doctor tried to convince her that the little children had died from lack of proper nourishment and care in dysentery. Another necromancer's aid was obtained, the grave was opened, and the coffin buried in a more propitious site. All this cost a considerable sum of money. In course of time she came again—was she not right? her husband's spirit was at rest once more; and as an invincible argument she carried in her arms a tiny grandson!

'She begged for some medicine that would make it well and strong. It was a puny, sickly child, and we did our best for it; but with all the love and care we fain would lavish on these people, their superstition baffles us at every turn. In spite of the love she bore her grandchild, to prove whether the child was human or the spirit of one of the departed grandchildren returned to earth, she allowed it to be exposed all through the cold night under the bamboos

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near the house. In the morning, when I visited the scene, a little crowd stood round the tiny bundle, not even the sad young mother daring to touch it. Taking it in my arms and chafing its tiny limbs in the hope of saving it, a faint flicker of life was perceptible. Seeing this, the poor mother held out her arms, silently, and took it to her bosom. Alas! what can these ignorant young mothers do with the inexorable mother-in-law? The grandmother insisted that once more exposure must be tried!

In spite of many ugly rumours, the peace of the compound was not disturbed during the time of the 'Boxer' troubles, and the medical practice gradually increased, though the accommodation for in-patients remained very limited. During 1901 patients presented the dispensary with eleven ornamental tablets as tokens of gratitude for benefits received. These tablets are made of wood. It is customary to hang them round a hospital as a kind of testimonial to past success and encouragement to future patients.

The presentation of one of these tablets is an experience which, once passed through, is not readily forgotten. It is an imposing

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procession which starts from the house of the donor and wends its way through the streets until it arrives at the front door of the hospital. At the head is a 'band' producing a volume of discordant sounds which only a Chinaman could distinguish as meant for music. Then there comes the testimonial board itself, all gaily decorated with red cloth and tinsel. Accompanying it are presents for all, doctors, nurses, students, and coolies included. Not the least attractive feature from a Chinese point of view is perhaps a pig, roasted whole, suspended between two men. The usual crowd of excited small boys brings up the rear. After much drinking of tea and many polite speeches, the gifts are handed over and some thousands of crackers set off, the noise produced being deafening. That Dr. Macdonald should have received eleven boards during a single year is a proof of the growing confidence felt in the new hospital. It is interesting to notice the diseases for the cure of which gratitude was expressed :

1. Difficult labour.
- 2 and 3. Malarial fever.
4. Ophthalmia.
5. Cramp.

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6. Paralysis of lower limbs.
7. Dislocation of arm.
8. Fracture of leg.
9. Tumour.
10. Twelve children cured of plague during the last epidemic.

11. For the release of a wrongfully accused man from prison, and the cure of loathsome sores contracted in the filthy place.

During the middle of July 1902 there occurred one of the great floods which periodically overflow the country. Many of the neighbours were rendered homeless. A warm welcome was given to any refugees who cared to come on to the compound for shelter. The little hospital and the missionary's private rooms were soon filled. The bathrooms were occupied by the catechist's family. Twenty-five women and children slept on the verandah. A room partitioned off the back verandah was occupied by a woman expecting confinement. A little child died of measles in the store-boat. Some of the refugees brought with them their pigs, and room had also to be found for these. A mat-shed was erected on an adjoining hillside, and was at once crowded out. It was by acts of kindness

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such as these that the affections of the people were won.

The doctor's aid was often asked in the settlement of disputes. Once during his earlier years of residence in Wuchow he helped to avert serious trouble in the newly opened port. The foreign captain of a small river-steamer called the *Do Sing* had shot his Chinese compradore dead during a fit of drunken rage. Several Chinese soldiers on board, on their way to the seat of a rebellion, wanted in revenge to drag the captain from his cabin and murder him. It was Dr. Macdonald who was asked to go on board, and who reasoned with the infuriated soldiers, eventually dissuading them from further acts of violence. Later on, pieces of broken nutmeg used to be frequently received. These were the recognized signal to go and consult with the elders about some dispute in the valley.

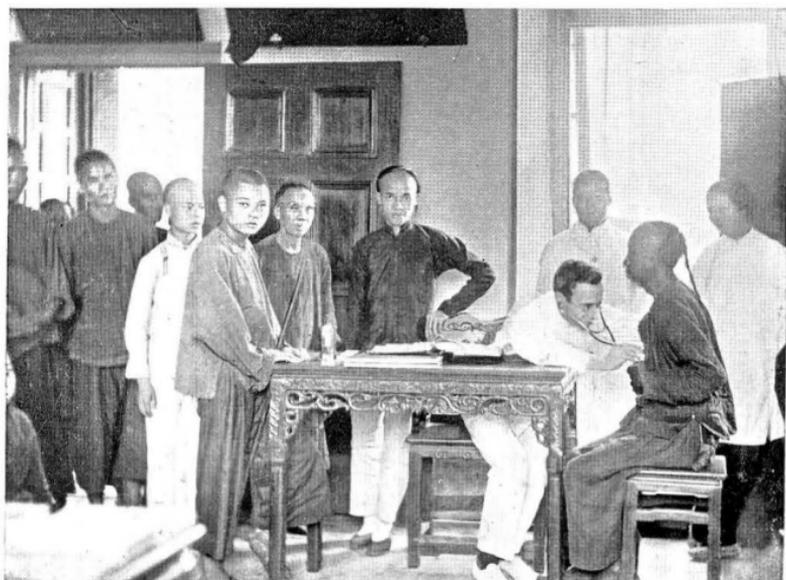
Dr. Macdonald's relations with the officials were of a very friendly character. Thus in a letter dated March 22, 1903, he writes: 'On the 16th I had a telegram from Tak Hing for medicines urgently required; and the Prefect wrote asking me to obtain a permit for two coffins containing his relatives' corpses,



Roderick J. Macdonald



FRONT ENTRANCE TO HOSPITAL, WUCHOW.



DR. PHILIP REES SEEING OUT-PATIENTS, WUCHOW HOSPITAL.

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to Tientsin via Shanghai. The new district magistrate sent to know when it would be convenient for him to call. I invited him to tiffin next day. . . . The district magistrate took tiffin with me alone. We conversed of education, and also of the Christian faith. I found that he was an intelligent man, who naturally looked at all questions from the Chinese standpoint, yet was beginning to make some concessions to a foreigner in the direction of the necessity of enlightened educational reform. He had not read the New Testament. I therefore sent him as a present next day a copy of the Bible, with the places marked which had formed the topics of conversation at tiffin. I hope he may read it with profit. . . . I forgot to tell you, when the magistrate arrived in all his state, with gong and retinue, &c., I was saving the life of a poor woman who, for lack of a maternity ward, had been brought into the women's chapel; this is the third case of its kind this week.'

During this year the front hospital building was completed. Owing to lack of house accommodation it was found necessary to use most of it as the second minister's house, and the Rev. H. E. Anderson took up his residence

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there. It was not till three years afterwards that the whole building could be given over to the treatment of patients. The dispensary, however, was transferred at once from its temporary quarters to its permanent home.

One morning, after the other patients had gone, groans were heard outside the dispensary, and, on going to the door, there was seen a pitiable object in rags, crawling on hands and knees up the dispensary steps. This was a starving beggar, covered from head to foot with loathsome sores. He begged for his life to be saved, saying that no one else would now help him, as his case was considered hopeless. He was provided with the necessary medicines, given some money to buy food, and taught to pray simply. When next he came he repeated the prayer, saying he never used the remedies without doing so. He soon began to improve. One day he came again, so altered as to be hardly recognized. His sores had all healed. He was washed and clean-shaven, and dressed like an official's servant in a long robe. His face beamed with gratitude, and he at once broke out into praising and blessing God for curing his disease and saving his life. He ended by

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saying that he desired to testify his gratitude by joining the Church. He was taken into chapel to morning prayers, and afterwards introduced to the members present, and with their consent enrolled as a member on trial.

In reviewing the increasing number of weak, diseased, and sad men, women, and children who passed through the dispensary during this year, the report states that there were to be seen 'not only many people with slight ailments quickly relieved, but also others with more remarkable complaints, such as many different kinds of fever, blindness, paralysis, and also fantastic tumours and weird ulcers such as are seldom seen in a Christian land; timid lepers, half concealing, half revealing the extent of their dreadful disease, earnestly beseeching us mercifully to cleanse their leprosy; famine sufferers from a distance, some with chronic dysentery and dropsy; slave-girls captured at the pillage and burning of villages in the rebellion, one brought by her purchaser to be cured of insanity (caused, it is thought, by the shocking scenes enacted at the sudden murder of all her relatives by the soldiery), another for medicine or charms to prevent her

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escaping to try to get back to her up-country home; a soldier with a bullet wound; others reputed to be possessed with devils; and the corpse of a baby brought to the dispensary at dead of night by its weeping mother for us to raise it from the dead.'

The Rev. H. E. Anderson had for some time rendered great help by giving chloroform at operations, and relieving the doctor of some of the out-patient work. Mrs. Macdonald, by attending to the women and children suffering from minor ailments, had also been of much assistance. Still, Dr. Macdonald had long felt the need of a medical colleague, and accordingly, Dr. Dansey Smith received a warm welcome when appointed to Wuchow in 1904. His arrival left Dr. Macdonald and Mr. Anderson much more free to attend to the growing Church and the numerous buildings in course of erection.

One of these was a little chamber called the 'Peaceful Room.' So afraid are the Chinese of spirits that, except in the case of a near relative, they have the greatest horror of being in the same room with a dying person. This superstition often leads to much

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cruelty. A boatman will refuse to rescue a drowning man for fear he may expire in his boat before he can be brought to shore. In Canton, only a short time ago, a coolie who was attending to some damage done to the electric lighting wires received a shock and fell down. His comrades at once tried to procure a boat in order to take him to the hospital. Upon perceiving their intentions, every available boatman moved out into mid-stream and refused to receive the poor man. The same superstitious fear compels us to be very careful as to whom we admit to our hospitals. It is always an unfortunate thing when a death occurs in a general ward, even when everybody knows that such a result was inevitable from the very first. On such occasions it is no uncommon thing for the doctor to find that what in the morning was a ward crowded with patients has become by evening entirely empty. The 'Peaceful Room' was set apart as a dying-chamber, in which patients incurably ill might be received and cared for without leading to such disastrous effects. One of the first to occupy it was a little slave-girl, the property of an official's wife on her way to Canton. She had suffered from rheumatism,

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and so been unable to get through her proper amount of work; as a punishment, her inhuman mistress beat her most cruelly, and then left her on the hillside to die.

The next two years were busy ones. The rapid awakening of the whole empire filled Dr. Macdonald with enthusiasm. All his diaries and letters tell of schemes for the future. He notes with pleasure how the prefect of the neighbourhood has issued proclamations prohibiting witchcraft and idolatry, and ordering the idols in the temples to be broken up. One high official asked him to accept the position of head master at the recently opened Government College. About the same time six masters and eighty boys marched to the compound requesting that they might be given a science lecture. Several students were received to learn English and medicine. Suddenly, in the middle of all these activities, the call of the Master came to the higher service. Dr. Macdonald left Wuchow on July 9, 1906, to attend the Summer District Synod in Canton. This was the first summer during nine years that he had left his up-country station. At the Synod he preached the official sermon and afterwards administered the Sacrament. On

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July 13 he booked a passage by the steamer *Sai Nam*, expecting to reach home again the following day. The only other foreigners on board were the captain and chief engineer. In the evening, just after dinner was finished, there was a sudden disturbance among the passengers, many of whom were really pirates in disguise. Overpowering the watchmen on duty, the pirates at once attacked the foreigners and compelled them to return to the saloon for shelter. Hearing from the captain that he had been shot, Dr. Macdonald began to attend to the wound. While he was doing so, a stinkpot was thrown in at the door. The three men, unable to endure the poisonous fumes, were forced to seek refuge elsewhere. The captain and chief engineer managed to escape, the former by feigning death, and the latter by hiding behind his boilers. Dr. Macdonald, however, was shot dead just as he got outside the door. So the end came to one of the noblest men who have ever served our missionary cause.

Dr. Dansey Smith remained in Wuchow until early in 1907, when serious ill-health compelled him to be invalided home. Dr. Philip Rees then came up from Fatshan to

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take his place. He was joined during the last three months of the year by Dr. Alfred Hooker. In March, while the Rev. H. E. Anderson was lying dangerously ill with typhoid fever, the hospital was visited by burglars, who broke into the operating-theatre and removed most of the more valuable instruments. The work, however, continues to make steady progress. The growing confidence of the people was shown by the increase in the number of in-patients, nearly three times as many being admitted as in any previous twelve months. Many of these stayed on the compound for several weeks, and so were brought into close contact with Christianity in a way otherwise impossible. Situated in the West River, a little above Wuchow, there is a large island containing several villages. One of the patients baptized during the year was an inhabitant of this place. On his return he related his experiences to his fellow villagers. His relatives and neighbours not only became kindly disposed towards the new religion, but wished themselves to be put on trial for membership. Part of a shop has been rented, and a little church has been formed, with a resident catechist. This

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is an example of the way in which the medical side of our work is assisting the evangelical.

In 1908 the whole neighbourhood was again inundated. The waters rose so rapidly that large numbers of persons were drowned. Following our previous custom, the compound was thrown open to refugees. It was easier to find room for the homeless men, women, and children than it was for the large number of domestic animals which they brought with them. When it seemed as though almost every inch of available space was occupied, a request came from a young man that we would receive his pigs and save them from drowning. It appeared that he was a prospective bridegroom and about to get married on the proceeds of the sale of the animals, and that if anything happened to them, the wedding ceremony would inevitably have to be postponed. Such an appeal was irresistible, especially as the doctor himself had just brought home his bride, and the pigs were allowed to float about on a hastily constructed raft over what had once been the garden.

Mention has already been made that Dr. Macdonald accepted the post of Customs surgeon.

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when the port was first opened for foreign trade. This we still retain. In 1903 the British Consulate was established, and since then the mission doctor has also acted as surgeon to the Consulate. These two appointments give us a position of increased influence among the official and wealthier Chinese which is very helpful to our work. The income derived from them, together with some gifts from friends at home, enables the hospital to be entirely self-supporting so far as ordinary current expenditure is concerned. A large number of educated Chinese are employed in the Customs Service. With them the Customs surgeon is necessarily on intimate terms. Some have entered the Church, and the addition of these intelligent and well-read men has done much to strengthen the cause. Visits are frequently exchanged between their wives and the ladies of our mission compound. Their homes are open to us. In one or other of them a short service is held weekly by our Bible-women and nurses. There is no doubt that the results of holding these positions have been well worth the time they have necessarily taken up.

The present hospital buildings consist of

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a reception-room, dispensary, an operating-room, a casualty-room, five private rooms for men, two general wards for men (one of which, however, is at present doing duty as a chapel), and two small wards for women. In addition, a new women's hospital is almost ready for use. This will contain five private rooms, an operating-theatre for maternity cases, and one large general ward with outhouses attached.

In connexion with the Wuchow Hospital we have a small almshouse and a small leper colony. In the former a home is provided for a few aged and friendless men and women. A pathetic incident which happened there a short time ago shows the hold which the memory of Dr. Macdonald still has upon the affections of the people among whom he lived. One of the old ladies lay dying. Some years previously she had been brought to the hospital very seriously ill, and been transferred to the 'Peaceful Room,' but had eventually recovered and been received into the almshouse. Just before the end, she related a dream which had given her great comfort. She had dreamt that she was dead, and that a number of wicked soldiers came

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towards her with the intention of taking her spirit to hell. All seemed lost, when suddenly Dr. Macdonald appeared and said, 'M Tak' (you cannot), and ordered them to allow the good angels to escort her to heaven.

By means of our leper home we are attempting to do something to alleviate the distress of the numerous lepers in the neighbourhood. At present, with the exception of the work done in connexion with our mission, no effort is being made throughout the whole province to deal with this terrible disease. The lepers are allowed to eke out the miserable living which they can obtain as fishermen by wandering up and down the country begging. So the infection is spread far and wide by the poor, maimed, and disfigured wretches, until at last death comes as a merciful release.

Our work among the lepers was begun in 1905 under the following circumstances. One of the early converts of the mission, who lived on a little country farm with his family, was unfortunate enough to develop the disease. His relatives bought him a boat and drove him out. When he attempted to moor by the river-bank close to his old home, the villagers

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assembled and stoned him away. This led Dr. Macdonald and the Rev. H. E. Anderson to purchase a small island, about ten miles above Wuchow, where the man could live in peace. The site was a suitable one, as it was some distance from the town and yet not so far away as to prevent frequent visitation. The original occupant was soon joined by a few more fellow outcasts, but the number whom it has been found possible to support up to the present has rarely exceeded half a dozen. Until the present year no houses have been erected for them, and they have been compelled to live in their little boats. This has entailed considerable suffering during the cold winter.

We have been in communication with the 'Mission to Lepers in India and the East' for some time, with a view to extending our work in this direction. This society has kindly offered to build a series of suitable cottages for the lepers, and to provide for their food, if we will undertake the supervision and medical attendance. The first series of cottages has already been completed. Each little house is built on wooden piles. This is necessary, as during the rainy season the West River

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rises considerably, and sometimes entirely covers the surface of the island. The houses are very simple, but they are well adapted for their purpose, and allow the inmates to live under the most favourable circumstances, with plenty of fresh air and plenty of sunshine. We try to provide occupation for those suffering from a less advanced stage of the disease. Some spend their time in fishing; others cultivate the land around the cottages.

We have not as yet been able to start work among the women lepers. How much this is needed will be seen from the following incident, which occurred only a few months ago. A woman arrived at the hospital with suspicious signs of the disease upon her. Her friends were so frightened at the mere idea of her having the complaint, that they were determined to get rid of her at once. One of the neighbours advocated that the woman should drown herself immediately. This suggestion found considerable favour. Others, more mercifully inclined, suggested that she should be removed to the top of a distant mountain and there be allowed to live entirely by herself in a small hut. The scene in the hospital was a very sad one. The woman cried bitterly,

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and went down on her knees before the doctor, pleading piteously for mercy.

On this occasion, unfortunately, there was not much doubt about the diagnosis. Sometimes, however, the suspected leper proves to be suffering from some other complaint, and then it is our great joy to be able to promise a cure. The ignorant country people class many intractable forms of skin disease as leprosy. Such mistakes cause much unnecessary suffering. The suspected person is compelled to live with real lepers, and perhaps by doing so may actually contract the more serious disease. Last year a patient was admitted suffering from a severe and widespread attack of psoriasis. From the story he told, it appeared that the people of his village had made up their minds that he was a leper. They accordingly opened a subscription list, gave him sufficient money with which to buy a boat, and told him to go and earn his living by fishing, and on no account to return. Instead of at once buying a boat, the man used some of the money to come to the hospital. After three months' treatment he went back to his home cured. By thus clearing up suspicions in doubtful cases, a hospital

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in the East can indirectly do a considerable amount of good.

There is a saying of Mencius, often quoted by Chinese literary men, that 'The feeling of pity is common to all men.' We hope that by thus appealing in various ways to those feelings of humanity, common to East and West alike, we may be able to commend our faith to the people around.

CHAPTER XII

THE 'SHIU' BARRIER CITY

THE story of the medical work in Shiu Kwan is disappointing. Although over twenty years have passed since a start was made, we are still without any hospital or even proper dispensary.

Shiu Kwan is a prefectural city, situated three hundred miles up the North River, close to the borders of Hunan. With this town as our base, in spite of many difficulties, evangelistic work has been carried on in the Hakka district for more than thirty years, with so much success that there is now a large Church consisting of about one thousand full members. In 1886 the Canton Synod resolved to make a beginning with medical work. As no European doctor was available, a Chinese student, who had received three years' training under Dr. Wenyon in Fatshan, was sent up to open a dispensary. The agreement was

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that, in addition to his private practice, he should gratuitously dispense medicines to the poor on two days every week. Of his own accord the doctor added one day a week to the two for which he was employed, but the arrangement did not prove altogether satisfactory. His absence for the remaining four days of the week was fatal to any great success. In 1888 the Synod decided to send up Dr. Macdonald to accompany the Rev. S. G. Tope, who was then in charge of the North River circuit. On their arrival, a dispensary was opened in the chapel, and a consulting-room was set apart in the native house, at that time occupied by our missionaries. There was considerable opposition from the very first. Stones were thrown into the consulting-room at night, and rumours were spread abroad that Western medicine was nothing else than poison. Patients, however, were numerous. Fifty or sixty were frequently seen at the close of heathen preaching. During the summer there was a severe epidemic of cholera, which is said to have carried off three thousand of the inhabitants in a single week. This gave abundant work to the little dispensary.

During the next two or three years repeated

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attempts were made to purchase a site for the new mission compound and hospital. On one occasion an official, who had received benefit at the hands of the doctor, succeeded in getting the mandarins to grant a commodious building, but the opposition to this scheme was so intense that it had to be abandoned. Another plot was then acquired, just outside the city. The two men who were brave enough to sell the land had to put up with a considerable amount of persecution. They were imprisoned and informed by the district magistrate that they must immediately get the money paid back to the foreigners and have the deeds cancelled. He threatened that if they did not obey, he would put them in another prison 'like hell.' If the money had already been spent, they were even to sell their wives and daughters to procure it. By the intervention of the missionaries, however, the two men were eventually released, the purchase of the land was confirmed, and in 1890 it seemed as though the long-wished-for project was at last to be completed. The sum of £25 was subscribed by some of the local gentry, and a grant was promised from home. The work of excavating the foundations was commenced.

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For some months the city had been disturbed by the fact that many graves situated on the surrounding hills had been broken open and the contents removed. Rumours had been plentiful, pointing to the foreigners as the culprits. They were said to rifle the graves for human bones to make into powerful drugs. These suspicions were shared in by the mandarins and gentry. An edict was issued making the taking of dead men's bones for the purpose of medicine a capital crime. A reward of about £10 was offered for the capture of any guilty person. Five arrests were made, and two malefactors were put to death after confessing that their object had been to find jewellery. In spite of the confession of these men, rumours continued to spread connecting the foreigners with the rifling of the graves.

Then there happened one of those curious incidents which in Europe would be quite unimportant, but which in China, under certain conditions, are apt quickly to lead to serious results. While the men were digging the foundations of the new hospital, some human bones were found, belonging probably to an ancient graveyard. They were carefully re-buried, but the news that they had been found

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rapidly spread. The officials pulled up the stakes and forbade the men to continue work. There was very nearly a serious riot, as some of the common people carried the bones round the town in procession, alleging that the foreigners had again been interfering with their ancestral graves. Matters only quieted down when the site was voluntarily surrendered.

The whole weary round of inquiries had then to be repeated. Other sites were applied for, but there was delay after delay; and when Dr. Macdonald left in 1892 for furlough, little real progress had been made. Afterwards, circumstances prevented the appointment of another doctor, so that for sixteen years the scheme remained in abeyance.

In January 1908 it was resolved that the restarting of the work could be delayed no longer, and Dr. Dansey Smith was sent up the North River. He reached Shiu Kwan about the beginning of March. Three years previously the mission-houses had been destroyed by incendiaries. The servants' quarters had escaped, and one of these rooms, 10 by 8 feet in dimensions, has been arranged as a temporary dispensary. Here patients are

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attended to daily. On market-days patients are also seen in the city chapel, and occasional trips are made to the country stations. The attitude of the people has greatly changed. They are now quite friendly, and the negotiations which are proceeding are meeting with much better success than before. There is every likelihood that the Shiu Kwan Hospital, so much needed and so long prayed for, will soon be an accomplished fact.

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LIST OF PAST AND PRESENT MEDICAL MISSIONARIES OF CHINA, IN CONNEXION WITH THE WESLEYAN METHODIST MISSIONARY SOCIETY

F. PORTER SMITH	1864—1870 (<i>deceased</i>).
E. P. HARDEY	1870—1876.
A. LANGLEY	1876—1877 (<i>deceased</i>).
CHARLES WENYON	1881—1896.
ANTON ANDERSSEN	1882—1903.
RODERICK J. J. MACDONALD	1884—1906 (<i>deceased</i>).
ARTHUR MORLEY	1886—
SYDNEY R. HODGE	1887—1907 (<i>deceased</i>).
JOHN W. PELL	1892—
W. ARTHUR TATCHELL	1893—
ETHEL ROWLEY (NÉE GOUGH)	1896—
MARGARET BENNETT	1899—1903 (<i>deceased</i>).
ROBERT T. BOOTH	1899—
W. J. WEBB ANDERSON	1900—
DANSEY SMITH	1904—
PHILIP REES	1905—
HELEN VICKERS	1905—
EDWARD CUNDALL	1906—
GEORGE HADDEN	1906—
ALFRED W. HOOKER	1907—
W. B. HEYWARD	1908—

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