Dignity of the Nation, Gender Equality, or Charity for All? Options for the First Modern Chinese Women Doctors

Angela Ki Che Leung

Introduction

In China and Japan, the ideal of formal equality encountered a fundamental problem in “women.” Individual citizens were to be counted formally equal under the new regime. But who qualified as citizens? As far as women were concerned, the range of answers put forward to these questions in China and Japan followed patterns already established in Europe and North America over the late nineteenth and early twentieth centuries. Exclusion of women from the franchise, from representation, and from other aspects of public life, highlighted the gendered construction of the modern citizen. It signaled on the one hand the separation of the public sphere from the domestic, to which “women” were relegated, and indicated on the other that citizenship status was conferred on “men” not as individuals but “as members and representatives of a family.” No sooner was it espoused, than the enlightened ideal of formal equality of citizens was compromised by the new kinds of categories which made up the nation.

The fixed categories of the nation, as observed by Naoki Sakai in his chapter, helped to displace the hierarchical ethics of empire. They also displaced the relational categories around which the Confucian hierarchy was constructed. Though wives and mothers had a fixed (if demeaning) place in the relational hierarchies of family and state, they barely rated mention as “women.” The kinship relations that mediated gender and class on the Confucian model needed to make way for specific relations — relations
enabling identification with the nation through categories stripped of kinship mediation — before “women” or “woman” could emerge as a significant category. Even then, the category “woman” did not always imply national Chinese women. As Tani Barlow observes, the category “woman” was embedded in a range of discourses in twentieth-century China, some less constrained than others by national boundaries and state regulation.  

“Woman” emerged as a modern social category late in the Qing era. In nationalist texts, women emerged as a category that brought shame on the nation. Among women themselves, it emerged as a category that distinguished them from the wives and mothers of yesteryear but differentiated them as well from the men who ran the nationalist movement. One such man was Liang Qichao. To Liang, women of the empire were no better than “slaves” and parasites — demeaned by their servile status in relation to men, and useless to the modern nation-building project unless they discarded the effete habits prescribed by Confucian mores and turned their skills and labor to the service of the nation.

Some women agreed. The nationalist martyr Qiu Jin wore men’s clothing and studied the martial arts to demonstrate her commitment to radical equality with men. She sacrificed her life for the national cause. For nationalists such as Qiu Jin and Liang Qichao, the status of “women” was to be elevated to redeem the honor of the nation. But not all women agreed. For some, the category “woman” was not exclusively a national category but a broader transnational one insofar as it linked “women”, as individuated bodies and as a gendered social category, by virtue of a common interest in health and reproduction.

As specialists in women’s health and reproduction, women doctors occupied a pivotal place in the overlapping discourses of the national and transnational women’s movements in China. The female doctor was an independent producer and hence a worthy “citizen” of the nation. She also cared for the reproductive health of Chinese women and hence, for the reproduction and health of the nation. But the health sciences were themselves divided between practitioners of particularistic Chinese medicine and those trained in “universal” Western science. In many cases, the female practitioner of Western medicine was a product of Christian missionary education, with sentimental links to the humanitarian ideals and “spinsters” ethos of the gendered sub-culture of her alma mater. The evolving field of medical practice thus offered female doctors opportunities for exploring a range of options for identification with “women”, the nation and the world in the late imperial and early Republican periods.

Their choices were nevertheless limited by men. The case of women doctors in the late Qing and early Republic illustrates the general proposition that the status of women, in revolutionary and decolonization projects, is one of the “important mechanisms in which ethnic and national projects signified — inwardly and outwardly — their move towards modernization.” Female doctors represented a powerful symbol that fully articulated the ideals of China’s modernization, and the country’s aspiration of becoming a new and strong nation. However, women doctors at the turn of the century were more than a symbol. The complexity of their identities, including those of class, religion, and gender, and their unusual knowledge in medicine, determined very different attitudes towards the increasingly overwhelming nationalist discourse of the time. However, whatever position they were in, none could be fully integrated into the nationalist grand project at the turn of the twentieth century, constructed essentially by elite Chinese men. The limits of their choice may perhaps illustrate the male-centered character of the nationalist agenda of that time.

The Woman Doctor as a Symbol

The woman doctor was, first of all, a healer of the sick body, thus a potential savior of China, then commonly represented as a very sick man. Medicine was indeed generally considered as essential for the physical strengthening of the Chinese Han race in increasingly influential Social-Darwinist discourses. Chinese nationalists often took the example of Japan’s Meiji Restoration to illustrate the point: “I hear that the state of medicine [in a country] is related to the vigor or the weaknesses of [its] race ... When Japan tried to restore her strength, she put her priority on medicine ...” It is not surprising that important political and cultural figures of this period like Sun Yat-sen and Lu Xun began their nationalist career by studying medicine.

The woman healer was, moreover, considered especially as an expert on the female and infantile bodies, key roles in the biological reproductive process. In other words, she was expected to be directly instrumental in the strengthening of the Chinese (Han) race. Such expectations of women were clearly expressed in the “Regulations” of the first women’s medical college in Shanghai. Established in 1905, the Women’s College in Chinese and Western Medicine (Nüzi zhongxi yixueyuan 女子中西醫學院) aimed at training women obstetricians and gynecologists; “Women’s illnesses are more than those of men When a male doctor treats a woman, he can only deal with half of her problems ... As for difficult childbirth, [even] the most famous [male] doctors were of no help, and as traditional midwives are reckless, [often]
both mother and child died ... Thus the most essential aspect in gynecology is obstetrics, and only women are prepared to study gynecology."

The female doctor was symbolic in the nationalist discourse in a second way: being a professional medical doctor implies that the woman was now an independent economic producer, and thus a worthy “citizen” in the nation to be built. Suggested by the influential reformer and thinker Liang Qichao (梁啟超, 1873–1929), the idea that Chinese women were economic “parasites” and slaves became a commonplace. In a short article on female workers in the US, an author reiterated Liang’s idea and stated that “Today, the majority of China’s women consume instead of produce (供利而不能利)，little wonder that [the country] is poor and weak.” The masses of idle women (often cited as 200 million, half of the estimated Chinese population) were considered as one major cause for China’s weakness. The professional woman doctor then symbolized a totally metamorphosed economic and social being for the new nation-to-be. She, more than the man, symbolized “the transformation of the members of an ethnic into citizens.” Women entering new professions like medicine were indeed seen as extremely profitable for “human economics.”

Being a doctor in this period was significant in a third way. The doctor was considered the bearer of a specialized and useful knowledge. Here, one should distinguish between Western and Chinese medicine. Western medicine was considered as a “science” indispensable for transforming China into a worthy member of the international community of modern nations. Whereas “Chinese medicine has the loftiest principles, but no empirical methods ... so that medical studies decline and weaken in our country and cannot have the effect of strengthening its people.” However, perennial nationalists would consider Chinese medicine as a national essence indispensable for China’s identity as an ethnic nation. In other words, Chinese medicine represented them an immutable, authentic Chinese tradition.

Emerging expectations of women medical practitioners at the close of the Qing dynasty coincided with the appearance of an ever increasing number of them, both in Chinese and Western medicine. As there was in fact a long tradition of women practitioners in Chinese medicine, the presence of women doctors in Chinese medicine was not new. The emergence of female doctors in Western medicine, on the other hand, was a novel and interesting phenomenon. The training of women doctors in Western medicine in this period was, as is well known, directly linked to missionary education. In the nineteenth century, the arrival of American and European medical missionary women in China provided unprecedented opportunities for young Chinese women to study Western medicine. Chinese women were, in fact, a special target of medical missionaries. Mary Fulton, the founder of the first medical college for women in Canton, said “I know of no surer, quicker, better way to evangelize China than through Christian physicians,” and the training of women doctors was especially crucial as they would “hasten the salvation and uplifting of this multitude of women and girls.” In other words, Western medical training of Chinese women was inseparable from what certain nationalists would call Western imperialism.

Medical training of Chinese men and women by missionaries began with the establishment of the “Medical Missionary Society in China” in 1838. By 1897, it was estimated that there were 161 men and 33 women being trained in small classes of missionary stations in various treaty ports. In 1888, Jin Yunmei (金幼梅, 1864–1934) from Fujian graduated from the Women’s Medical College of the New York Infirmary, becoming the first woman from China to have an American medical degree. Before the end of the nineteenth century, at least three other Chinese women obtained American medical degrees. The Canton Hospital, one of the first missionary hospitals in China, provided the earliest regular service by native women practitioners: of the 508 home visits made in 1896 by mission medical women, 239, or almost half, were made by Chinese women doctors. The Kwang Tung (Guangdong) Medical School for Women, later known as Hacket Medical College for Women, which was founded by Mary Fulton in 1901 in Canton, was probably the first of its kind in China. Diplomas were given to two students in 1903 (out of nine who entered the class in 1901), four in 1904, three in 1905, and three in 1906. In 1906–07, the curriculum was extended to four years, and up to 1909, over thirty students had graduated. We learn from a 1926 report that the curriculum was eventually extended to six years, and up until that year, 155 students had graduated, about 60 percent of whom settled in private practice, while 20 percent stayed with missionary institutions. In Suzhou and Peking, women’s medical colleges were also established in the same period.

Such numbers were of course extremely small in relation to China’s enormous population. But they were significant as they represented the very first Chinese women doctors practicing Western medicine in treaty port societies. The fact that the majority of such women trained in Canton were in private practice (60 percent) was also meaningful. As stated in an earlier report (1894) of the Foochow (Fuzhou) Hospital, “Native women doctors do succeed well in private practice.” In other words, they were a truly growing professional body in the more westernized sections of Chinese society.

The training of women in Chinese medicine in the same period was, on the other hand, a much more obscure story. Traditionally, medical training
Zhang Zhujun, joined the Red Cross volunteer corps that accompanied the revolutionary army to Wuhan in the autumn of 1911.  

Indeed, the emergence in this period of women doctors as public figures, despite their limited number, was a new phenomenon. It was new in the sense that these women doctors, unlike their predecessors in traditional Chinese society, were not only professional practitioners, but were also active in the public, and often the political, arena. One of them became the subject of a well-known article by the influential Liang Qichao. In his famous piece written in 1896 entitled "On Madam Kang of Jiangxi" (贛江西康女士), Liang described with unreserved admiration Ida Kahn (Kang Cheng 堅成, 1873–1931), one of the first Chinese women doctors to obtain an American medical degree. After a brief biographical sketch of Kang, Liang described her graduation ceremony at the University of Michigan as if he were present, quoting the Dean (總教習): "Do not say Chinese are inebriated. We might not be able to do what those Chinese are capable of doing. If one compares this lady with our American women, for instance, we should feel ashamed." From there, Liang speculated on Kang's resolve: "The lady has no other purpose in life. She just feels deeply ashamed of the accumulated weaknesses of China. Spontaneously, from her generous heart, she wants to serve [these] 200 million [Chinese women], hoping to uplift and transform them." Indeed, in Kahn, Liang saw the entry of Chinese women into the public arena.

Kang Cheng, along with the above-mentioned Zhang Zhujun and Jin Yamei, and Shi Meiyu (Mary Stone 石美玉, 1873–1954), He Jingying (Hu King Eng 何金英, 1865–1929), and Shi Fumei (Zoh Fo Me, 石福妹), among others, who had similar missionary background and medical training, became heroines mentioned not only by reformers such as Liang, but also by later Western-trained professionals-turned-officials of the Nationalist government, such as the famous doctor Wu Lien-teh (伍連德). In these women, much more than in those trained in TCM, nationalists of all trends saw the hope and future of the Chinese nation. When Ida Kahn and Mary Stone graduated brilliantly in 1896 from the University of Michigan, "The missionaries had at first some doubts as to the wisdom of allowing a public ovation to two young ladies, but their native friends pressed the point and gained the day."

The Complex Identity of the First Chinese Women Doctors

Expectations of women doctors were based on an abstract understanding of them as progressive, scientifically minded, ambitious, and professional
women with patriotic ideals. This image of women doctors actually masked the complexity of the identities of these women trained in Western medicine.

Reformers and revolutionaries of the late Qing and early Republican period, and even present-day historians,\textsuperscript{54} choose to underestimate or even ignore the religious background of women doctors in Western medicine, often a determinant in their identity construction. Christian education of these women could very well have inculcated in them an outlook that was more universalistic than nationalist. While it was true that these women doctors devoted their lives to charitable medical work especially for women and children in China, it is not clear from their deeds or words that they did this for nationalistic reasons. As recent research reveals, women’s greater pacifism and internationalism may make them less involved with the nation and nationalism than men.\textsuperscript{55}

As stated in the editorial of the July 1901 issue of *China Medical Missionary Journal*, “The question of medical education for the Chinese may be viewed from two principal standpoints: that of an aid to the evangelization of China, and that of humanitarianism in providing a means for the relief of much of the suffering of this disease-cursed people.”\textsuperscript{56} Most missionary women doctors seemed to subscribe to these standpoints. Ida Kahn and Mary Stone apparently identified more with their Western names, remained loyal to their missionary orders throughout their lives, and turned down offers of sponsorship from local gentry and officials including Zhang Zhidong (張之洞, 1837–1909) to set up modern schools when they realized that accepting such offers would imply an alienation from the Church.\textsuperscript{57} They were, on the other hand, enthusiastic delegates in international Christian organizations like the Y.W. C.A.\textsuperscript{58} Stone, later working for the Red Cross during the 1911 Revolution, refused to take sides in the national conflict and remained neutral.\textsuperscript{39} A reader of some of Kahn’s English writings can get the impression that she regarded the Chinese as “the others” and considered herself a member of the missionary audience observing Chinese society from a distance.\textsuperscript{40} It was unclear that their ultimate concern was significantly different from that of the Western missionaries who had educated them.

Women doctors in TCM had a much more straightforward identity, and many were explicit about their nationalistic ideals, though they were much less under the spotlight at the time. The above-mentioned Zeng Yi, deeply alarmed by the threat of Western imperialism, advocated that all women in China should undertake their “natural responsibility” of “educating their children,” and “nurturing citizens with the basics” (pèiyù guìmín zhī fěi fǔ 培育國民之基礎). On the other hand, she was also proud of traditional Confucian virtues: “Whether they are from famous families or just simple peasants, our women all meticulously observe chastity and filial piety. This is where our country is superior to other countries in the world.”\textsuperscript{41} Unequivocal about her cultural identity and her duties towards her threatened nation, she logically and naturally believed her learning in TCM to be a precious cultural heritage, a tool to “strengthen our race” (see above).

The differences between the likes of Zeng Yi on the one hand, and those of Ida Kahn and Mary Stone on the other, are also determined by class. It is well known that Western missionaries in the nineteenth century, by necessity rather than choice, only recruited believers among the lower classes.\textsuperscript{42} In the True Light Seminary for Girls in Canton, a preparatory school for medical college from the late 1870s onwards, for example, pupils generally left after three years of free classes either because their labor was needed at home, or the amount of education received was considered sufficient by their family.\textsuperscript{43} Interestingly though, American women missionaries of the late nineteenth century were themselves “largely composed of women who had not enjoyed the advantages of higher education.”\textsuperscript{44} Their parental families were, in Hunter’s words, “poor, but in good standing and ambitious, mainly Christian.”\textsuperscript{45} The deep affection that often developed between American women missionaries and their Chinese converts might be explained by a social affinity that transcended national or ethnic boundaries. Indeed, most of the first women doctors trained by missionaries were from modest families. Ida Kahn, most representative of these, was given up as a baby by her impoverished parents to be adopted by the American missionary Gertrude Howe, whom she would regard as her own mother. Similarly, Jin Yunmei was also adopted by a missionary family after her parents died when she was two. Mary Stone and He Jingying were of Christian parents, probably of modest means. In short, none of these women came from traditional elite families.

Indeed the relatively lowly social origins of the Christian community at the turn of the century posed a serious problem for male gentry modernizers. Ida Kahn, after her return to China in 1896 as a Western-trained doctor, received a delegation from the local gentry in Jujiang (jiangxi) offering to sponsor her work on the condition that she quit the Church. They reportedly told Kahn, “It is really no credit to you to belong to the Church. The people who belong to the Church are rather of the lower class and their object in joining the Church is to get some pecuniary good.” Such attitude irreversibly alienated Kahn from the gentry. In fact, like these gentry men, most Peking officials shunned the Chinese Christian community until well after the 1911 Revolution.\textsuperscript{46}
Zeng Yi, on the other hand, was a typical product of the elite class. Her father passed the imperial examination to be a jinshi in 1844, preparing him for a successful bureaucratic career. Her mother, a literary talent in her own right, was also from an elite lineage, with a grandfather who was the governor of Hunan province and her father a prefect of Fengyang district in Anhui. Zeng herself married her cousin, a middle-level bureaucrat in Hunan. Her learning in TCM was part of her elite education. Indeed there had been a long tradition of elite women well versed in medical classics since at least the Song (960–1279). It was not an accident that her 1907 book on education was prefaced by such prominent officials as Duan-fang (端方, 1861–1911), governor of several provinces and an active modernizer, and Zhang Boxi (1847–1907, see above), Superintendent of Educational Affairs in 1902.

Such class differences were completely ignored in most nationalist discourses. Liang Qichao’s unreserved praise for Ida Kahn is a good illustration of this point. When he said that if Kahn had not had the opportunity to pursue higher studies she would have been similar to the 200 million ordinary women, “idiotic, idle, solitary, and withdrawn,” he undoubtedly had in mind the leisurely upperclass women. The majority of lower-class women, who by necessity actively participated in all kinds of manual labor throughout the ages, were deliberately ignored. This lacuna, expressed in the maxim “the majority of China’s women consume instead of produce,” was typical in nationalist and feminist discourses of the time. By the same token, female industrial workers in the West were naïvely considered to be role models for all Chinese women. Zhang Zhujun, in her preface to the regulations of an association for the promotion of women’s education, squarely put the blame on women for men’s failure to be patriotic: “Since today’s women are mostly idle, men have to exhaust themselves to make a living for the family, and soon lose their patriotic vocation ... Is it not because women cannot make a living on their own that men’s strength and determination are worn out?” The many workshops that were created in this period for the training of women to become workers also clearly showed the biased perceptions of the feminine condition in China, disregarding the situation of lower-class women and misappreending the problems of upper-class women. As Beahan has observed, authors of the nationalist press of this period, especially women, “were limited by their own upper class backgrounds.”

A third constitutive element of the complex identity of women doctors of this period was gender. This is perhaps the most intricate and important aspect of their identity problem. In terms of how they positioned themselves on the spectrum of emerging nationalism in China during this critical period. Their problem of gender identity was often a struggle, conscious or unconscious, between femininity and feminism, inextricably linked with the prevalent nationalist agenda constructed by elite men.

Liang Qichao expected the new women to be educated, economically independent, or feminist on his terms. The aim of women’s education for him was to teach women how to “assist their husbands, teach their sons, thus invigorating the nation and opening up the minds of the people.” In other words, in his nationalist agenda, women’s traditional role as wives and mothers was further confirmed. His expectations of a woman such as Ida Kahn were basically limited to the feminine sphere: to uplift and transform the 200 million idle Chinese women.

The missionaries, on the other hand, had their own ideas of femininity based on Victorian values. Hill reminds us that “Women who took up the cause of foreign missions after the Civil War were explicit in their rejection of egalitarianism and felt compelled to dissociate themselves and their movement from the woman’s rights crusade.” The influence of the values of these Western women missionaries, gradually outgrowing male missionaries in numbers, has unfortunately never been thoroughly studied. We have to be content with just the example of Jiu Yunmei, the first woman to obtain an American medical degree. In a 1907 article she wrote, “the woman who wields the most powerful influence is the one whose education has but added strength and keenness to the usual feminine virtues, rather than the violent agitator of equality.” Her attitude clearly reflected a perception of gender influenced by the female missionary sub-culture in China. It should be stressed here that “spinsterhood,” ambitious, and the language of self-sacrifice of these missionary women were compatible with the Victorian code of “proper women.”

Indeed, it was the very feminine quality of self-sacrificing caregiver that was demanded of young Chinese female medical students. For them, practicing medicine could bring rewarding results: In Canton of the 1880s, “a medical lady will have a sphere all her own ... it still remains true that Chinese women are beyond the reach of the male physician for many of their peculiar ailments.” It was in fact quite well known among American missionaries that, compared to women doctors in American society, Chinese women doctors encountered much less discrimination from male doctors. Male medical missionaries in China painfully allowed the training of female medical students early on. Sexual segregation as a social institution in China had traditionally provided a sphere of professional activities for women medical practitioners of all classes, and had very probably opened up a
Reactions to Nationalistic Expectations of Women: Three Alternatives

The case of Zeng Yi

In 1906 at the age of 54, Zeng Yi, an accomplished doctor in TCM from an elite family, authored her own medical work entitled *Yixue pian* (醫學篇), containing theoretical discussions of medical classics and prescriptions she had written and collected during years of practice. Her success was further reflected by the fact that her story was recorded by the medical profession of her community and her medical thought and practice are still being discussed in modern Chinese medical works. What distinguishes Zeng Yi from other TCM women doctors of her generation is that she was outspoken about national problems. In the preface of her 1907 work on women’s education (*Nixue pian* 女學篇) she wrote that, “[women] should educate their children about undertaking their responsibilities. This is to nurture citizens with the basics; [they] should work hard and be frugal so that all members of the family should be sufficiently provided for; this is to plan home economics in its elements. Medicine and hygiene are to assure health and vigor, this is the principle of strengthening [our] race.” The purpose of her work on women’s education was to teach women how to “love their country (愛國) externally, and regulate their family (齊家) internally.” In other words, Zeng understood women’s role in the new nation as basically twofold: as competent home-makers and as the nation’s healthy biological reproducers, a view that echoes Liang Qichao’s stance.

Zeng squarely disagreed with the idea that “political rights of men should also be conceded to women,” her reasons being, “women’s natural responsibility (天賦之責) is to take care of domestic affairs ... As for political questions, these are external to women’s duty (分外之事) ... This is because men and women are born with different natures, and with different gifts. Each has a given capacity, men should undertake work outside [the home] whereas women should work inside.” She also claimed, however, that women’s responsibilities were as important as men’s.

Zeng was well aware of the more radical views on sexual equality that were gaining influence at the time. Her attitude towards these ranged from distrust to disdain: “those few who understand a little about new policy (新政) pick up superficial things of the West. They claim free marriage, or equality, or independence. They imitate [westerners] in their ways of eating and dressing. Wailing with tears, they loudly make speeches about current affairs ... yet they are never clear about their own responsibilities that they never make an effort to undertake.” Moreover, she estimated that if her position would be “detested by the conservatives (守舊者) for its fervor and eccentricity, scorned by the modernizers (維新者) for its trivialness,” she would gladly accept being jeered at as occupying the “middle of the road” (中立).

Zeng’s position was a deliberate choice of a highly educated woman from a traditional elite family. It was also a choice made by a confident woman well informed on current affairs and intellectual debates about the nation’s fate, thus very much aware of the alternatives available to her. It was her elite background and her accomplishments in medicine that empowered her to join the public discourses on women’s education and nation-building. She was well aware that she had a voice and that her opinion counted.

Zeng’s ideas were also reminiscent of Western bourgeois morality in relation to the rise of the modern European state. Women’s exclusion from the public sphere was part and parcel of the construction of the entitlement
of men to democratic participation which "conferred citizen status not upon individuals as such, but upon men in their capacity as members and representatives of a family." Zeng's position was a natural shift from the traditional Chinese elite conception of strict sexual segregation to a westernized one of gendered public/private spheres, typical of bourgeois family morality constituting the nation-state. The difference between the two was that while traditional sexual segregation in China was based on the strict physical separation of the sexes, the institution of the public/private spheres differentiated the social functions of men and women, defining the essentials of masculinity and femininity. Politics in the public arena, by such definition, was a strictly masculine occupation, while child-rearing at home was a "naturally" feminine obligation. Thus, for Zeng, women's "liberation" meant unbinding their feet so that they could enjoy outdoor activities, or receive public education like men, or even with men. As biological reproducers, women no longer reproduced solely for the lineage, but above all for the ethnic nation. However, they had no role in public affairs. Their contribution to nation-building had to be accomplished indirectly, through the family.

Zeng Yi's choice of nationalism was also conditioned by the nature of her expertise. TCM, cherished by Zeng as representative of national essence, was already under serious attack in the early twentieth century by radical nationalists as a major handicap for China's modernization, as it was not "scientific." A typical criticism would be: "Han medicine could lead to the elimination of our race (華種), as its crimes could be summarized as an ignorance of science." The heated debates between doctors of Western and Chinese medicine did not reach a state of outright war until the New Culture Movement in the 1920s, when nationalists chose between embracing and rejecting Chinese culture. We had to wait till the 1930s to see TCM women doctors organizing themselves to defend Chinese medicine as a national essence.

The case of missionary-trained doctors

The modest social origin and Western education of missionary-trained women doctors explain their much more complex and subtler reactions to the nationalist cause. First, their Western education background, especially their medical training, was likely to cultivate in them a certain distance to Chinese culture. Ida Kahn wrote in a missionary journal in 1905, "Probably no one would deny that the skill of even the most mediocre Western practitioner is immeasurably above that of those self-appointed 'doctors' who throng about us. Then why not show to the Chinese that such knowledge and skill is worth having?" In other words, Kahn's appreciation of Chinese culture was totally unlike that of Zeng Yi. What Zeng considered as a national essence was despised by Kahn. Kahn's position, however, was perhaps different from that of the activists of the May Fourth "total westernization" movement in that her critique of Chinese culture was from a Western perspective, whereas May Fourth activists' stance was a Chinese and nationalistic one. Her position probably explains why she, and many other missionary-trained women doctors were not involved in the controversy in the 1920s on the necessity to ban TCM.

Second, their lower-class background could also have helped channeling their compassion to caring for the needy, leaving them uncomfortable with nationalistic discourses in literati jargons. Beahan's study on women's press in the period provides some clues to this hypothesis. She discovers that women authors of the press believed that their feminism was an integral part of nationalism and should be subordinated to it. These authors, moreover, were basically upper-class women. It is thus difficult to tell if women doctors from modest social origins felt comfortable as members of the Chinese modern nation, "bonded by a myth of common destiny." The same ambiguity was to reveal itself again later in anti-Japanese literature by major women authors such as Xiao Hong, as has been skillfully demonstrated by Lydia Liu.

Moreover, their understanding of femininity formed by their missionary education was also a decisive factor. While Zeng Yi's idea of femininity was defined within the context of the family/nation continuum, missionary-trained women doctors assumed their feminine responsibilities in the professional realm, following the examples set by Western missionary women. Their rhetoric of self-denial and sacrifice had also little to do with the conscious feminist struggle integrally linked to the nationalistic discourse. However, their visibility, their status as single women, and their medical careers created an image that could well have inspired a brand of radical feminism not at all endorsed by them.

What other choices did a highly educated woman doctor have in the overpowering tide of nationalist passion if she found it absorbing but could not be satisfied with the "middle-of-the-way" position of Zeng Yi? The case of Zhang Zhujun illustrates this last alternative.

The case of Zhang Zhujun

Zhang Zhujun (1879–?) was nicknamed "the Female Version of Liang Qichao" (婦女界之梁啟超) not only for being Liang's compatriot of the Pearl
River delta region, but also for her outspoken patriotism, and her activism in promoting women's rights and education. She procured her influence as a public figure also from her training as a medical doctor in Canton in a missionary medical seminary around 1900.90 She remained extremely visible in Canton and later in Shanghai until the 1911 Revolution, not only as a doctor but also as a social and political activist. Of all the women doctors of this period, she was perhaps the most militant in the political arena.

Zhang's flamboyant personality in fact masked a woman of many ambiguities. Her social origin, for one, remained a mystery. The revolutionary Feng Ziyu (馮自由) (1881–1958), who personally knew Zhang, claimed that her father was a “prominent official.” One of her admirers, Ma Junwu (馬君武) recorded that she was from a notable family in Panyu. Later biographers simply repeated this point without further inquiry. Li Pingshu, Zhang's collaborator in Shanghai, gave us more precise information: she was the niece of a foreman in an arsenal in eastern Guangdong (廣東石井鎮彈局), a colleague of a friend of Li.92 Considering the fact that only young women with limited means would accept missionary education at the turn of the century, it was most likely that she was from a rather modest social background. That her father was a prominent official might be made up by herself or her friends to give the impression that she was from an elite family, an identity that she seemed to have cultivated conscientiously.

Zhang Zhujun's religious conviction was also ambiguous. Despite her Christian education at a young age, she rarely revealed her Christian faith in her writings, in contrast to the likes of Ida Kahn. Nor, in turn, did Western missionaries mention her in their writings as they did Kahn, King, and Stone. According to Ma Junwu, as a Christian, she never discussed “Genesis” nor “Revelation,” considering these too bizarre. What she liked to discuss as expressions of Christian faith was “nothing more than the uniqueness of God, the equality of all beings, how to love one's enemies as one's friends, how the ruler should serve the people.” The favorite theme of her weekly sermon in the chapel inside her clinic in Canton was the refutation of the “nonsensical” arguments in the Bible, including St. Paul's pronouncement that women could not preach. “Men and women have equal rights, how could it be that women could not preach,” she would argue.93

She was said to lecture occasionally on “current affairs, propagating reforms and modernization (維新學說),” winning her the admiration of “all those in educational and journalistic circles,” so that the majority of those who attended her weekly sermons were “intellectuals and non-Christians.”94 Ma Junwu relates that, because of her unconventional evangelistic style, Zhang was considered “preposterous” by local preachers.95 After she left Canton for Shanghai in 1904, she seemed to have abandoned her religious activities altogether.

Her contemporaries also liked to joke about her national identity. She was described as always impeccably clad in Western attire, traveling around in a Western-style open sedan chair carried by four bearers, taking on a solemn air, attracting the attention of all passers-by. Some spread the rumor that the English books she appeared to be reading in that sedan chair were often held upside down.96 Zhang obviously made an effort to demonstrate that she was a connoisseur of Western culture. The sarcastic tone in which stories about her were told might indicate that she was not always convincing.

Equally ambiguous was her gender identity. In Canton, she was jeered by conservatives as a “man–woman” (男人婆) as she was coiffed in a male-style pigtail, wearing men's shoes, and was never seen in earrings. It seems that people had difficulties in telling from her appearance whether she was a man or a woman. For her, these symbolized her devotion to the reform program advocated by Liang Qichao.97 Zhang had apparently vowed to remain single all her life “because she was physically weak and often fell ill.”98 Zhang's spinsterhood was, however, not a product of Victorian femininity. She created around her an extended fictive lineage with herself as the “patriarch.” Feng Ziyu told us that Zhang established fictive lineage relations with many upper-class women in Guangdong, wanting to be called “father,” not “mother.” She was, notably, the “foster father” of the children of her closest friend and sponsor, Xu Peixuan (徐佩賢; 宗英), a rich widow, later to become the concubine of the revolutionary Huang Xiuqiu (黃興).99 With her male friends, however, she established a different set of relations, a kind of comradeship based on regular intellectual exchanges on current political affairs.98 She left Canton after she was accused of whipping two pupils in the women's college established by herself.100 These anecdotes show Zhang to be a complex person, a sometime authoritarian who took pride in being more like a man than a woman, especially in her intellectual capacity. In this she was quite different from the categories represented by Zeng Yi and Ida Kahn.

Her status as a Western doctor continued to serve as her passport to high society and the public arena in Shanghai after 1904. She established the first medical college of Western and Chinese medicine for women in Shanghai with the local dignitary Li Pingshu, and she continued to be a socialite and a doctor, gave public lectures on women's rights, and promoted women's education. Her arguments for women's rights to education were similar to that of Liang Qichao and Zeng Yi: women's education was necessary for their economic independence, required to free men's energy for building China
into a modern nation. She did not seem to be bothered by the contradiction between her opinion and her own experience. Her last major public task was to organize with Li Pingshu a Red Cross volunteer corps in Shanghai to accompany the revolutionary army to Wuhan in October 1911. Zhang's involvement in the Red Cross was never politically neutral like that of Mary Stone. She used the organization as a cover and supportive medical force for the revolutionaries. The expedition of Zhang's Red Cross corps was widely covered by the press and she publicly expressed her support for the revolutionary cause. After the 1911 Revolution, she remained involved in Red Cross activities in Shanghai for a short while before she suddenly disappeared from the political scene in 1912. According to her biographer Feng Ziyou, she completely retired from society in the Republican era.

Zhang Zhujun's choice was one of active participation and direct involvement in the nationalist enterprise. She was apparently well accepted by the (mostly male) revolutionaries of the time, and was admired as an exceptional woman. She seemed to have cultivated her popularity among the reformers and revolutionaries along several lines: by highlighting her training in Western medicine, while downplaying her Christian background, by giving an impression that she was from an elite family, and, last but not least, by taking up an ambiguous gender identity. Her prestige as a doctor in Western medicine was in fact not quite up to that of the Khans and Stones, nor was her elite status as unequivocal as Zeng Yi's. Her charisma in the social circles of revolutionaries was based on her radicalism, symbolized by her ambiguities and eccentricities. In this respect, Zhang Zhujun's response to the nationalist project was similar to that of Qiu Jin, the revolutionary martyr.

Conclusion

None of the women doctors described here remained important in the nationalist project after the 1911 Revolution. Missionary-trained doctors like Kahn and Stone were increasingly marginalized in nationalist discourses. Later communist nationalists readily dismissed missionary-trained native doctors as tools of Western imperialism. Zeng Yi continued to receive moderate praise as a doctor and as a patriotic educator, but was criticized for her "feudal" ideas. Zhang Zhujun, closest to nationalist expectations at the turn of the century, fell into obscurity after 1912.

Did their experience constitute yet another example of women being systematically excluded as "others" in nationalist projects? As Yuval-Davis emphasizes, women are "often excluded from the collective 'we' of the body politic, and retain an object rather than a subject position. In this sense the construction of womanhood has a property of 'otherness.' In fact, our story of these doctors at the turn of the century in China shows perhaps a more complex picture. Women were never completely excluded as "others," and were enthusiastically included in the nationalist project in certain ways, although they were never considered as equal to male citizens. China at the turn of the century was naturally more like a semi-colony than an autonomous and struggling modern European nation-state. One difference between the two in their efforts in constructing their nationhood is that, while the latter was selective in the granting of citizenship, the former was eager to grant it to all. In the case of China, women's role in the public sphere, especially as professionals, was never taken from them after it had been obtained (without much fuss, moreover) at the turn of the century, unlike, for instance, French women who were driven back to the domestic sphere after 1793, and had to wait for more than a century to acquire full citizenship.

We should, however, further break down the experiences of the three categories of women doctors we have studied. If the nation-building project around 1900 was composed of both the creation of a new national identity and that of a new public sphere, then we may say that the likes of Zeng Yi had no difficulty considering women as part of the collective "we" in the new nation, but at the same time were accomplices in the marginalization of women as "others" in the public realm. She, moreover, denied her own right, and that of other women, of entry into the public sphere. Whereas Ida Kahn, Mary Stone, and many of their kind clearly marginalized themselves as "others" in the project of the creation of a new national identity, but remained active and assertive in the public realm. Their unquestionable competence in Western medicine ensured them a permanent and prominent public role, as "Science" was becoming a new religion in the modernization project of the country. In other words, both types of women doctors experienced partial marginalization in the nation-building process, but not complete exclusion.

The most ambitious of the three, Zhang Zhujun, wanted to be part of the collective "we" in both the public realm and the new national identity project. In many ways, she was successful. Her medical training easily prepared the ground for her entry into the public arena. Her active role in the national identity project was, however, obtained at a price. Her acceptance by other elite men in the revolutionary cause was perhaps possible only after she had deliberately denied many facets of her "natural" identity including class, gender, and religion. Her charisma, like that of Qiu Jin, was derived from her identity ambiguities, especially her gender ambiguity, which in those times symbolized an ultimate transgression of traditional norms — a much-
applauded gesture in a revolutionary period. Both effectively ceased being women in order to become citizens, a step implied in Arendt’s theory.\(^9\)

Zhang’s strategy was, however, not to be tolerated indefinitely in the new nation. Soon after the 1911 Revolution, certain feminist behavior came under severe criticism: “[These women were] strange and eccentric, they were neither Western nor Chinese, neither male nor female, neither monk nor nun.”\(^1\) Ambiguities were increasingly criticized. Zhang’s retreat after 1912 might mean simply that the period of permissiveness was over. Indeed, the struggle for equal political rights for women entered another frustrating stage after the establishment of the Republic regime.\(^2\)

The experiences of these three categories of women doctors, all competent in their own ways, enthusiastic about national or public affairs in this critical period of Chinese modern history, showed the limits of women’s options in the great project of nation-building. However, the experiences of these women doctors also showed certain peculiarities of Chinese nationalism. The basic male character of nationalism in Europe, it has been suggested, was likely to be conditioned by the prevailing bourgeois family ethos, generating the division between public and private spheres, where men dominated the former and women were driven back to the latter, considered as inferior to the former. This development ensured the predominantly masculine character of the European nation-state.\(^3\) China, on the other hand, was not dominated at the turn of the century by any class comparable to the bourgeois. Its nationalist agenda was largely conditioned by the humiliation brought by Western imperialism. The Chinese project was at base an attempt to modernize the country on the Western model in order to resist the West. Western science, and other Western areas of learning, in this context enjoyed a particularly important role in the nationalist agenda. The pressing need for the introduction of “Science” in China dissolved many resistant boundaries, including gender and class, when it came to its apprenticeship and application, making a formal division of the public and private spheres on the Western model unsuitable. From that time on, as a consequence, the public sphere in China was never quite “entirely masculine,” and the “public patriarchy”, as described by Walby, was less overpowering.\(^4\)

Militarism, another attribute in many nationalist projects considered typically “masculine,” was another problematic feature in the Chinese case. As “civility” had been the dominant masculine characteristic since at least the Song dynasty (960–1279),\(^5\) there had not been any marked cultivation of physical viliity for men in the elite culture. In fact, when American missionary educators introduced physical exercise into their curriculum in China at the turn of the century, it was as an overt criticism of Chinese elites’ attitudes as effeminate. Chinese male students began consciously to link manhood and physical prowess only in the 1920s.\(^6\) In a way, these American missionaries were trying to “masculinize” China on their own terms. The increasing call for “militarization” for both men and women in this period was, in fact, a novel feature.

The “masculinity” of the Chinese nationalist project should therefore be looked for elsewhere. A place to look at should be China’s constructed past. If it holds true that “nationalism has typically sprung from masculinized memory,” a more intriguing question is whether Chinese nationalism in this period was also derived from “masculinized hope.” In other words, whether the nationalist agenda and language was largely irrelevant to women’s concerns and aspirations, including those of the most achieved public women. The full answer to this question is beyond the scope of this small survey, but judging from the limited choices available to the women doctors under study, we are inclined to suggest that the answer is yes.
Chapter 5

3. Nira Yuval-Davis, Gender and Nation, p. 60.
4. Late Qing reformers like Kang Youwei, Liang Qichao, and Tan Sitong were some of the first to promote medicine as a necessary tool for racial strengthening. Ralph C. Roizier, Traditional Medicine in Modern China: Science, Nationalism, and the Tensions of Cultural Change (hereafter Traditional Medicine in Modern China) (Cambridge, MA: Harvard University Press, 1968), Chapter 3.
6. One major way in which women participated in ethnic and national processes was “as biological reproducers.” See “Introduction” by Yuval-Davis and Anthias, in N. Yuval-Davis and F. Anthias, eds., Woman-Nation-State (MacMillan Press, 1989), p. 7. The term “Mother of Citizens” (guomin mu 民母) was often used in late Qing nationalist discourses; see note 6 below.
8. On the construction of the notion of “citizen” (guomin 民國) in this period, see Chapter 4 in this volume; also Hao Chang, Liang Chi-ch’ao and Intellectual Transition in China 1890–1907 (Cambridge, MA: Harvard University Press, 1971), pp. 149–219.


21. According to another source, it was in Suzhou in 1891 that the first women’s medical college was established. See Wang Weifan, *Jidujiao yiyao shiye*, p. 46.
women’s history) (中囯婦女史論文集) (hereafter Funiu shi lumen ji) (Taipei: Shangwu yinshuguan, 1988, pp. 551–75), includes Ida Kahn, Mary Stone, Jin Yunmei as women actively contributing to the nationalist revolution.


36. CMUJ, 15/3, p. 217.


39. See Li and Zhang, Funiu shi lumen ji, p. 564; see also Shengzhou ribao, 8 December, p. 11, quoted in Funiu yundong lishi ziliao, pp. 520–1.

40. One such example is her paper in the 19/6 (1950) issue of CMMJ on “self-supporting medical missionary work.” Describing the behavior of her Chinese patients: “they did not stop with calling in the quacks but had the idiots brought in as well” (p. 22); she suggested in this paper charging greater sums from certain patients, “I firmly believe that when we charge a better sum they are much more apt to allow us to follow the case through, for what is worth beginning is worth keeping up” (p. 225).


48. Leung, “Women practicing medicine in Pre-modern China.”


50. Liang Qichao, Yinhishi quanj, p. 2a.


52. See Li and Zhang, Nüquen yundong shiliao, pp. 1046, 1114–6, 1154, 1168, 1289, 1292–3, 1297, 1299, 1301–1310.


54. 杨威女士 (芳威), quoted by Liu Jucui, Funiu yundong shi, pp. 91.

55. Patricia Hill, The World Their Household, p. 35.

56. By 1919, both northern and southern American Methodist boards had more than twice as many women as men in the China field, and the Congregational American Board of Commissioners for Foreign Missions could boast of nearly as many single women as married and single men together. See Hunter, American Women Missionaries in Turn-of-the-Century China, p. 13.


60. In 1877, the Presbyterian missionary Charles Mills of Dengzhou summed up the special case for missionary women doctors abroad: “Now personally I confess to some old fashioned prejudices against everything which unsexes women. If I were at home I would never employ a lady physician. And the very designation is repulsive to me. But giving the ladies medical training to work on mission ground strikes me as different.” See Sara Tucker, “Opportunities for women: The development of professional women’s medicine at Canton, China, 1879–1901,” Women’s Studies International Forum 13:4 (1990), p. 361.


64. Emily Honig, “Deng Yuzhi,” p. 129.


66. Tu Kuixian (屈克先), “Qingdai nü zhongyi Zeng Yi jì qí Yixue pían’’ jiánji” (A brief presentation of the Qing woman doctor Zeng Yi and her work.” On

81. There is much confusion about her medical education. Feng Ziyou recorded that she was educated in the Hackett Medical College for women and graduated in 1900. As the college was established later, this is clearly incorrect. Other sources said that she had 13 years of medical training in the Beijing Hospital in Canton. As none of the medical institutions in China provided such a long period of medical training, this information is also doubtful. See Feng Ziyou (風自由), "Nü yishi Zhang Zhujuan" (The lady doctor Zhang Zhujun) in Gening yishi (Miscellaneous events about the Revolution) (革命逸史) (Shanghai: Shangwu yinshuguan, third edition, 1947), p. 41; Ma, Junwu (馬君武), "Nüshi Zhang Zhujuan zhuan" (Biography of Madam Zhang Zhujuan) (女士張秋君傳), in Mo Shixiang, ed., Ma Junwu ji 1900–1919 (Works by Ma Junwu) (arts; Huazhong shifan daxue chubanshe, 1991), p. 1; Shuntian zhibao, 16 November 1905, quoted in Li and Zhang, p. 1379.


89. Apparently, most of Zhang's educational and medical enterprises in Canton before 1904 were generously financed by Xu; Feng Ziyou, "Nü yishi Zhang Zhujun," pp. 41–2; Lu Danlin (陸丹林), "Guangdong nü zhishi Zhang Zhujun yishi," p. 167.

90. Her male friends included such Cantonese celebrities as Hu Hanmin (胡漢民), Cheng Ziyi (程子儀), Zhu Tongru (朱適儒), all of whom were involved in the 1911 Revolution in various ways.


92. Her public talk in Shanghai in 1904 was typical, "I could not help crying for our women whose dependent nature is persistent ... if we want to save the nation, we have to start with education; if we want to start with education, we have to start with women ..." quoted in Li and Zhang, Nüqian yundong shilitao, pp. 1383–4.

93. Lu Danlin (陸丹林), "Guangdong nü zhishi Zhang Zhujun yishi," p. 166. She covered in particular Huang Xing, disguised as a volunteer, and his concubine Xu Peixuan, as a nurse. Fun yundong lishi ziliao, pp. 529–30.

94. She was reported to have recruited 69 men and 54 women members. The
women included 14 doctors and 40 nurses, many of whom were students or graduates of the Medical College that she and Li organized. On 24 October, she took with her to Wuhan 21 of these women and 20 men. On 20 December of the same year, she wrote an article openly condemning the imperial forces and supporting the revolutionary army. See Shengzhou ribao, 11 November and 20 December, quoted in Funi yundong lishi ziliao, pp. 526–7. The news of the departure of the Red Cross volunteers was published daily in October in 1911 in the newspaper Minlibao (People’s Independence Daily) (民立報) (see 18–30 October).

95. Feng Ziyu, “Nü yishi Zhang Zhujun,” p. 44.


101. Liu Jucai, Funi yundong shi, pp. 360–78. The struggle for women’s rights of political participation and equal legal rights, led by the Association for Women’s Political Participation (女子參政同盟會) under Tang Qunying (唐群英), encountered strong resistance from the Republican government in its first year. The Association was dissolved in November 1913.

102. Smith, Nationalism and Modernism, p. 209.


104. By sapping the power of the military aristocracy, and consolidating the imperial Civil Examination, the Song state was responsible for the long-lasting dominance of literati culture. See Liu Zijian (刘子健), “Lue lun Song dai wuguan quan zai tongzhii jieyi zhong dijue” (略論宋代武官群在統治階級中的地位) (On the position of military officials in the Song ruling class), in Liang Song shi yanjiu hui bian (Collected essays in Song history) (南宋史研究彙編) (Taipei: Liangjing chuban shiyue gongsi, 1987), pp. 173–84, p. 183.


106. Smith, Nationalism and Modernism, p. 208.