

The edge of expertise: Representing barefoot doctors in Cultural Revolution China

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‘Barefoot doctors’ were designed as an innovative task force during the Cultural Revolution (1966–1976) to provide health care to rural villages in China. Without formal training that would identify the group professionally, barefoot doctors were at once amateur medical practitioners and expert revolutionary actors in Communist Party propaganda. At stake in legitimating revolutionary medicine was allowing revolutionary spirit to supplement for minimal medical training. As a result, the symbolic power of representing barefoot doctors rested in showcasing their devotion to enhancing access to health care in rural China. These representations followed an intensifying militarization of civilians, embracing the barefoot doctor’s ability to survive any obstacle while also celebrating those who died in the process. This paper examines three public portrayals of barefoot doctors, arguing that conflicting idealizations of rural epistemology combined the opposing elements of self-cultivation and self-annihilation to unite the identity of an emerging group of amateur doctors and illustrate acceptable forms of medical and revolutionary expertise.

Fever burned through Li Yuehua.¹ She cried out in pain as burst of cold shot through her body. Suffering from chronic fatigue, Li vomited, lifted herself up and vomited again. Drenched in sweat, she struggled toward the hospital ward where her patient waited on the operation table. Only Li could perform the necessary surgery. Soon after the difficult procedure, Li contracted cerebral malaria and died. *People’s Daily*, the Chinese Communist Party’s (CCP) primary news organ, detailed the life and death of Li Yuehua.² Students studied her. Writers celebrated her. The same ‘revolutionary spirit’ that allowed Li to emancipate patients from disease in a hazardous landscape simultaneously trapped Li in a body afflicted with disease.

This paper compares public portrayals of ‘barefoot doctors,’ (*chijiao yisheng*) a task force of minimally trained medical practitioners designed to provide health care to

rural villages in China during the Cultural Revolution (1966–1976), arguing that conflicting idealizations of lay expertise sought to legitimate acceptable forms of rural epistemology.³ Though Li Yuehua was neither an official barefoot doctor nor a member of the Communist Party, the *Barefoot Doctors Magazine* reprinted her obituary in its 1972 inaugural issue to celebrate her as a model for inspiring a new era of health care. Years after Li Yuehua’s death, film adaptations of barefoot doctor novels highlighted the efforts of younger, more perfect revolutionaries. But while Li died, the onscreen heroes survived. In comparing these representations, barefoot doctors were entangled among conflicting imaginations in which members were at once empowered and weakened by their ‘revolutionary spirit.’

Drawing upon growing scholarship that traces the relationship between body, subjectivity and power in Chinese sources, this paper closely examines how multiple representations of rural epistemology intended to unite an emerging group of amateur doctors during an era of social chaos and political disorder.⁴ Integral to the spectacle of Communist Party emancipation was ideologically transforming the ‘bourgeois medicine’ of reactionary doctors into the ‘proletarian medicine’ of revolutionary doctors.⁵ Within the Communist Party, Canadian doctor Norman Bethune served as a model for this transformation. Bethune had designed medical equipment during wartime China in the 1930s, trained Chinese medical workers and performed surgery on the battlefield, where he

³ Although what was considered as ‘public’ in the Cultural Revolution often included private thoughts and opinions, ‘public’ in this paper involves the forms of media that the Communist Party repeatedly circulated to enforce and claim particular kinds of subjectivities.

⁴ See A. Zito and T.E. Barlow. *Body, Subject & Power in China* (Chicago: University of Chicago Press, 1994), A. Kleinman. *Deep China: The Moral Life of the Person* (Berkeley: University of California Press, 2011), S. Greenhalgh. *Just One Child: Science and Policy in Deng’s China* (Berkeley: University of California Press, 2008), R. Rogaski. *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China* (Berkeley: University of California Press, 2004), H. Shapiro. ‘The Puzzle of Spermatorrhoea in Republican China.’ *Positions* (Vol. 6) 1998, pp. 551–55; Yip, K. ‘Science, Medicine, and Public Health in 20th-Cent. China: Health and Society in China: Public Health Education for the Community, 1912–1937,’ *Social Science of Medicine* (Vol. 16) 1982, pp. 1197–1205; M. Hanson. *Speaking of Epidemics in Chinese Medicine: Disease and the Geographic imagination in Late Imperial China* (London: Routledge, 2011).

⁵ See C. Lynteris. *The Spirit of Selflessness in Maoist China: Socialist Medicine and the New Man*. Basingstoke, (Hampshire [England]: Palgrave Macmillan, 2013), p. 5.

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¹ Chinese naming conventions place the family name first.

² Anon., ‘The People’s Good Doctor Li Yuehua,’ *People’s Daily*, December 19, 1972, 2. Available online 29 August 2015

contracted an infection and died.⁶ Mao Zedong praised Bethune for his ‘spirit of selflessness,’ which set the stage for what anthropologist Christos Lynteris describes as the struggle between the ‘cultivation of the self’ and the ‘abolition of the self.’⁷ Though ‘cultivation of the self’ served as a vehicle for doctors to make claims on their knowledge practice for improving the state, it also had the potential to allow a kind of individualism. This individualism could only be resolved by the ‘abolition of the self,’ or relinquishing all claims of private property to the state.⁸ As narratives about self-sacrifice increasingly invoked references to Norman Bethune at the dawn of the Cultural Revolution, the image of rural barefoot doctors began to combine the opposing strands of cultivating oneself and abolishing oneself, where enhancing one’s medical and revolutionary expertise depended on one’s voluntary self-annihilation.⁹

In the mid 1960s, Mao’s pronounced fear of losing revolutionary vigor and ideological transformation in the Communist Party became central to launching the Cultural Revolution. Also known as The Great Proletarian Cultural Revolution, the movement called upon younger members to inherit and expand the socialist cause, denouncing political deviants who stood in the way of building an egalitarian and participatory society. As events unfolded over the course of a decade, the Cultural Revolution led to the orchestrated exposure and elimination of political rivals and obliterated Communist Party organization.¹⁰ Unique to this period was a combination of anarchy and dictatorship where popular rebellion was simultaneously facilitated and thwarted by coercive state action.¹¹ Participants at all levels were mutually mobilized, manipulated and constrained. Mass parades publically humiliated, abused, tortured and imprisoned hundreds of thousands of politicians, scientists,

intellectuals and civilians.¹² Students dragged teachers through the streets, acting in part with the watershed of political sentiment that paralyzed the Chinese political system.

Historians have directly addressed the multiple ways in which Chinese bodies became self-regulated and socially regulated in the 20th century, but instead of offering a large-scale narrative of biopolitics at work, this paper examines the nuanced representations of revolutionary bodies that both articulated and obscured conceptions of health and disease.¹³ Rather than dismissing extreme representations as Cultural Revolution propaganda, these constructions can be used to understand the conflicting nature of ‘revolutionary spirit’ that legitimated rural expertise.¹⁴ Audiences discussed, played with and parodied political propaganda that offered a vision of a Utopian society that combined revolutionary realism with revolutionary romanticism.¹⁵ Designed to satisfy a complex set of political demands, the material products of propaganda art became both an extension of and deviation from lived experiences of the Cultural Revolution.

Identifying expertise

Campaigns following the founding of the People’s Republic of China (PRC) in 1949 continued to invoke military ideology even when the country was no longer at war.¹⁶ To demand personal sacrifice and absolute dedication, cultivating loyal soldiers meant centering debates on those who were ‘red and expert.’¹⁷ When the expression first appeared in the 1950s, emphasis was placed on ‘red,’ or virtue, rather than ‘expert,’ or talent.¹⁸ While trying to rally medical luminaries during early public health campaigns, being red without being expert was a political taboo, but being expert without being red was a political threat.¹⁹ The idea

⁶ Several biographies of Norman Bethune include the following: T. Allan & S. Gordon. *The Scalpel, the Sword: The Story of Dr. Norman Bethune* (Toronto: Dundrun Press, 2009) and R. Stewart. *The Mind of Norman Bethune* (Markham: Fitzhenry and Whiteside, 2002).

⁷ In particular, Lynteris uses these two modes as examples of Michel Foucault’s notion of ‘technologies of self,’ which ‘permit individuals to effect by their own means or with the help of others a certain number of operations on their own bodies and souls, thoughts, conduct and way of being, so as to transform themselves in order to attain a certain state of happiness, purity, wisdom, perfection or immortality.’ See M. Foucault. ‘Technologies of the Self,’ in L.H. Martin, H. Gutman & P. H. Hutton (1988) *Technologies of the Self: A Seminar with Michel Foucault* (Amherst: The University of Massachusetts Press, 1988) p. 18.

⁸ The ‘cultivation of self’ in particular refers to Lui Shaoqi’s combination of Confucian and Neo-Confucian philosophies and modern values of agency and revolutionary will. When Liu Shaoqi turned into an enemy of the state, ‘self-cultivation’ came to be seen as an effort to privatize expertise. See Lynteris, ‘Abolishing the Self as Private Property,’ in *The Spirit of Selflessness in Maoist China* 2013).

⁹ For more on how propaganda art has grown entangled with construction of collective memories, see C. K. Lee, G. Yang. *Re-Envisioning the Chinese Revolution: The Politics and Poetics of Collective Memories in Reform China* (Washington, D.C.: Woodrow Wilson Center Press, 2007) and X. Zhong, W. Zheng and B. Di. (eds.) *Some of Us: Chinese Women Growing Up in the Mao Era* (Rutgers University Press New Brunswick, New Jersey, and London, 2001), J. Esherick, P. Pickowicz, A.G. Walder. *The Chinese Cultural Revolution as History* (Stanford, Calif: Stanford University Press, 2006); B. Mittler. ‘Popular Propaganda? Art and Culture in Revolutionary China.’ *Proceedings of the American Philosophical Society* (Vol. 152) 2008, pp. 466–489.

¹⁰ For a recent account of the social and political history of the Cultural Revolution, see R. MacFarquhar, M. Schoenhals. *Mao’s Last Revolution* (Cambridge, Mass: Belknap Press of Harvard University Press, 2006).

¹¹ Early 20th century reformers rendered public health measures essential to establishing a sovereign Chinese state.

¹² To better understand the entangled encounters between state and social actors, historians have increasingly addressed the human cost of the Cultural Revolution. See J. W. Esherick, P. G. Pickowicz, A. G. Walder (eds.) *The Chinese Cultural Revolution as History* (Stanford University Press, 2006).

¹³ Ruth Rogaski’s history of hygienic modernity, or *weisheng*, brings to the foreground the role of violence, war, imperialism and death that shaped the multiple ways in which Chinese bodies to become self-regulated and socially regulated. Similarly, when evaluating the private and public representations of barefoot doctors, this paper takes seriously the kind of revolutionary forces that shaped popular imaginations of public health and medical bodies. For more on biopolitics at work in China, see Ruth Rogaski, *Hygienic Modernity: Meanings of Health and Disease in Treaty-Port China* (Berkeley: University of California Press, 2004).

¹⁴ Given that the Cultural Revolution mobilized groups that previously had not been involved in Chinese politics, public representations of barefoot doctors also serve as an example for what Michael Warner described as ‘counterpublics,’ or groups that inhabit a socially subordinate status. See M. Warner. *Publics and Counterpublics* (New York: Zone Books, 2002).

¹⁵ Historian Barbara Mittler has described trained artists, amateur writers and experienced filmmakers collectively produced propaganda material that included reams of wall posters, handbills, newspapers, pamphlets and movies. B. Mittler. ‘Popular Propaganda? Art and Culture in Revolutionary China.’ *Proceedings of the American Philosophical Society* (Vol. 152) 2008, p. 469.

¹⁶ Mao’s military strategy had been tied to methods of mass mobilization, which Robert Taber has shown in his classic study. See R. Taber. *The War of the Flea: A Study of Guerrilla Warfare Theory and Practice* (Herts: Paladin, 1972).

¹⁷ To participate in a social construction, one did not have to be a supporter of the socialist revolution to be included among ‘the people.’ See R. MacFarquhar, *The Origins of the Cultural Revolution, Volume 1: Contradictions Among the People, 1956–1957* (New York: Columbia University Press, 1974), p. 34.

¹⁸ R. D. Baum. “Red and Expert”: The Politico-Ideological Foundations of China’s Great Leap Forward.’ *Asian Survey* (Vol. 4) 1964, p. 1053.

¹⁹ See D. M. Lampton. ‘Public Health and Politics in China’s Past Two Decades,’ *Health Services Reports*, (Vol. 87) 1972, p. 682.

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