
This ambitious book is a critical history of China’s Maoist model of health care, with focus placed on two of its most prominent examples, that is, the anti-schistosomiasis campaign and the ‘barefoot doctor’ programme. Zhou Xun, who has previously published on the history of the Great Chinese Famine caused by the Great Leap Forward (1957–60), skillfully interweaves medical and political histories of the People’s Republic China in this new work, which provides readers with a meticulous account of how revolutionary zeal and contradictory political demands shaped the health policy of China under Mao Zedong’s reign.

According to Zhou, it was military and economic desiderata that rendered schistosomiasis a public health priority for the Chinese Communist Party (CCP). The party was alerted to the seriousness of the disease for the first time during its war against the Nationalist government led by Chiang Kai-shek. Many soldiers of the People’s Liberation Army suffered from the diseases during its preparations to cross the Yangtze River. Following the founding of the People’s Republic of China, the new regime became aware of the economic cost of the disease as it was prevalent in major agricultural production areas. *The People’s Health* highlights the important roles played by physicians and scientists trained in the United States or Western Europe as well as those from Chinese medical colleges founded by missionaries or the Rockefeller Foundation in the early stages of the anti-schistosomiasis campaign. They emphasised night soil (human feces) treatment and the killing of snails, the vector of the disease. Each method, however, had its own limitations and presented its own challenges. The book details, for example, how villagers resisted the collection of night soil for disinfection purposes because it was widely used as fertilizer, a precious resource when chemical fertilizer was not available. In addition, the chemical pesticides employed against snails were expensive and often difficult to procure; and the catching and killing of snails seemed to have little impact on incidence. Moreover, the campaign was hampered by a shortage of trained personnel. Local health workers were selected according to their class background rather than their education, and many lacked the necessary medical knowledge and skills.

China launched the first Five-Year Plan for the development of the national economy in 1955, and in the same year, the CCP also resolved to make the eradication of schistosomiasis within 7 years a policy goal. Leadership was in particular eager to prove the superiority of socialism by stamping out the disease, an accomplishment which ‘Western Imperialists’ had emphatically failed to realise in Egypt. Zhou identifies two significant changes after eradication had become a state policy: first, party officials replaced the technocrats in leading the campaign, and second, traditional Chinese medicine was included into the arsenal of treatment measures. The difficulties and problems encountered in the early stages of the campaign, however, were not solved, and according to Zhou, only worsened. Facing competing demands for manpower, such as scaling up industrial and agricultural production, officials often chose to cut corners regarding disease prevention measures or even ignored them completely.

Then came the Great Leap Forward Campaign. *The People’s Health* describes in painful detail the terrible damages done by the zealous political movement on disease prevention work. Some counties attempted unconventional methods of vector control such as using industrial waste water as a form of molluscicide, resulting in irreparable ecological damage. Another method incorporated land reclamation as a means of destroying the snail’s habitat in an attempt to simultaneously boost agricultural production. But many of those who participated in the work as well as those who later farmed the newly reclaimed lands were infected due to a lack of protective clothing or equipment. Further worsening the situation, the falsification of official reports was a common practice. The policy ultimately destroyed wetlands and contributed to both flooding and soil salinisation, thereby being eventually abandoned. The famine that followed the failure that was the Great Leap Forward widely and extensively harmed rural health care throughout China. Mortality rates and morbidity soared, and starving refugees who were attempting to find respite in cities further spread schistosomiasis. The book’s narrative also implies
that for all the CCP’s failures in improving the health of the people, they attempted to redress the matter with intensified propaganda. It provides the reader with incisive analysis of the propaganda efforts.

The last two chapters of the book abruptly shifts to the history of barefoot doctors. I wish the author would have remained focussed on the anti-schistosomiasis campaign. The author, however, has an axe to grind. The *People’s Health* not only provides the reader with a gloomier account of the barefoot doctor programme and what it achieved, but also disputes the received view of its impact on international health. Although there were a number of barefoot doctors who were dedicated to their work and won the admiration of their communities, Zhou claims that many got their job through party patronage and were less than competent regarding medical care. The most serious consequence was the abuse of antibiotics that were beginning to be mass produced in China and viewed as a panacea by some barefoot doctors. The barefoot doctor programme encouraged the World Health Organization to pursue the goal of ‘health for all’, as well as inspiring the Alma-Ata Declaration. *The People’s Health* claims that the international health experts who visited China were misled by visiting highly selected sites and carefully choreographed propaganda. The inspiration spurred on by China’s rural health care system for global health initiatives can thus be regarded as history’s irony.

On the whole, *The People’s Health* is a work based on solid, meticulous research and contains a great wealth of detail. The names of the numerous military units and political committees listed in the book, however, can sometimes bog down readers who are not familiar with the history of the People’s Republic of China. It is very rewarding, however, for those who makes the efforts to go through it. *The People’s Health* is undoubtedly a tour de force as a historiographical revision of health care in Mao’s China.

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Since the First World War, food and nutrition have attracted increasing global attention. To the growing scholarship endeavouring to further people’s knowledge of this global phenomenon, Josep L. Barona’s latest book is a timely contribution. This first full-length English-language monograph on Japanese nutrition science in the early twentieth century, *Nutritional Policies and International Diplomacy* highlights the activities of Japanese nutrition scientist Tadasu Saiki and the Imperial State Institute of Nutrition (also known as the Imperial Government Institute for Nutrition). Among existing English-language scholarship on the general history of nutrition, only a few have discussed nutrition studies conducted in Japan, with a particular focus on the investigation into beriberi.¹ Historians like Nathan Hopson and Sunho Ko have recently completed more specific studies of Japan’s nutrition studies.² Barona’s new book is another welcomed interdisciplinary examination of nutrition science that engages with the history of public health, food studies, diplomacy and science and cultural studies.

Barona’s analysis draws upon the historiography of modern Japan and his own specialty of public health. The first four synthetic chapters examine the internationalisation of Japanese nutrition science
