Writing the colonial medicine in Taiwanese context: A preliminary overview of the colonial medicine studies in Taiwan* (Abstract) Liu Shiyung** Visiting researcher (2003/3~2004/3) Yokohama National University, Economics Department Assistant Research Fellow Institute of Taiwan History, Academia Sinica

The rise of colonial medicine was for the need of the Great Expansion after the 18th century. Despite many elements of colonial medicine are still practiced today, the term "colonial medicine" eventually faded when colonialism became a notorious memory. However, the studies of colonial medicine never disappeared. From technological viewpoint to ideological analysis, the studies of colonial medicine in western scholarship always reveal what happened in the past and, sometimes the contemporary tension in medical practice. The works of Philip Curtin and David Arnold reflected the two paradigms in the spectrum of the studies of colonial medicine in the West. To Curtin, colonial medicine meant the medical improvement in the colonies while Arnold paid more attention to social reactions and political issues. Although Japan was late to win the membership of this "colonialist club," her colonial medicine was complex enough to include all major features. Therefore, the studies of colonial medicine in contemporary Taiwan would show the similarity as the westerners did, but it certainly has the unique bounded by social atmosphere in contemporary Taiwan. The author was not dare to set a conclusion on the studies of colonial medicine in Taiwan, but likes to offer a preliminary overview to some important studies. Generally speaking, this paper aims to shown the historiographical features in the colonial medicine studies in Taiwan and leave the floor for further more cautious analysis.

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The beginning of colonial medicine study: the establishment of "scientific discourse"

The medical development in Taiwan under the Japanese rules not only emphasized the importance of modern science, but also set the standard to describe the colonial medicine. Considering the frequent citation and the importance, no one would deny that the works of Maruyama Yoshito and Oda Toshir? were influential.

Their works implied that training Taiwanese doctors to be the tool of empire and the agent of Japanese colonialism. The first two books talking about the Taiwanese medical history were written by Japanese doctors with great interesting in history and revealed their political attitudes. One of them called the medical modernization in colonial Taiwan an "unfinished medical expedition", while the other contributed the colonial medicine as "Japanese colonial achievements left in Taiwan." Obviously, colonization was their major concern to discuss the medical progress in Taiwan. Both authors implied that the medical history of Taiwan was in fact a part of globally scientific progress and a legacy of Japanese colonization. In their writings, the authors actually set a scientific paradigm in writing Taiwanese medical history to veil the issues of localization.

Taiwanese doctors succeeded the scientific paradigm set by previous books when the KMT took over Taiwan after 1945, and Chinese nationalism eventually became a viewpoint in writing medical history. For example, Du Congming's Zhongxi yixue shilue (A Brief History of Chinese-Western Medicine) gave a brief description of medical development in Taiwan from the sixteenth to the early twentieth century. Despite his narrative was an impressive synthesis of scientific accounts of medical research and institutional progress, Du, as the book title showed, attempted to treat Chinese medicine and Western medicine equally. In addition to Du himself, studying Chinese medicine, especially in pharmacology, was important to be "useful" while Taiwan entering a "de-colonial" era. To a Taiwanese doctor like Du Congming before the 1980s, Chinese nationalism was used to reflect his self-identity and eliminated the colonial influences that barred medical progress in colonial decades.

Medical historian Li Tengyue had a similar attitude like Du. Li's work was written as

the third volume of Taiwansheng tongzhigao (The Draft Gazettes of Taiwan), whose authors had to chronicle the organized and institutionalized efforts that were made to improve Taiwanese health over the colonial period. Although the terms zhimin (colonization) and diguozhuyi (imperialism) made clear Li's nationalist self-identify to the Japanese colonialism, the book as a whole still stuck on scientific paradigm that the Japanese inserted in colonial period. Both Du's and Li's works revealed the writing style happened before the 1960s that de-colonialization meant to recover Chinese-identity in Taiwan while the authors kept the scientific narrative.

Generally speaking, the writers of colonial medicine before the 1980s continuously kept the "scientific discourse" as the cores issue in their studies. The 'scientific discourse" was actually built on the hypothesis why the Japanese should rule Taiwan and borrowed by the people like Maruyama and Oda as the legacy of Japanese colonialism. The only thing happened in writing Taiwanese medical past after 1945 was the author inserted Chinese nationalism between the words and started to criticize the brutal sides of the colonialism. Such writing style remained nearly three decades. The radical changes in political and social condition in the late 1980s eventually effected medical historians' attitude to explain the colonial medicine in Taiwan. Entering the 1990s, two major viewpoints: the tool of empire and social subalternism dominated the historiography to interpret Taiwanese colonial medicine.

Colonial medicine study after the 1990s.

After the dramatic transition in political and social condition in the late 1980s, Taiwanese study became an important research field. Among all the topics, colonial medicine was one of the rising fields in the Taiwanese study. The angle to study Taiwanese colonial medicine was very different from the works before the 1908s. The young generation in the 1990s was not satisfied in repeating scientific events but eager to explain the medical development within colonial context. In addition, the tension in medical practice pushed Taiwanese doctors to search the answers from the colonial past. Both situations framed some historiographic features of the study of colonial medicine in Taiwan after the 1990s.

1. The tool of empire vs. social subalternism.

Fueled by the medical sociology and anthropology and responded to political changes, a group of graduate students began to study Taiwanese medical history under the context of local society and colonial state. The master's thesis Riben zhiminzhuyi xia

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Taiwan weisheng zhengcezhi yanjiu (The Study of Public Health Policy in Taiwan under Japanese Colonialism) by Xie

Zhenrong in 1989 was the first book of this type. According to Xie's argument, eisei shokumin (hygienic colonization in Japanese), or "medical expedition" previously called, was in fact the colonial exploitation coating with medical reasons. Recently, Xie's thesis has come in for a good deal of criticism. His arguments occasionally contradict each other. One might expect Chen Junkai, a graduate student of history, to avoid these problems. His master's thesis Rizhishiqi Taiwan yisheng shehuidiweizhi yanjiu (The Study of Taiwanese Doctors' Social Status in the Japanese Period) was published in 1992 and became well-known in related field of colonial study. Chen was the first one who separated the doctor as an independent and professional social group. In his book, Taiwanese doctor was portrayed as colonial elite and had Taiwanese heart. To me, his viewpoint was very like the social subalternism. Chen thus asked how Taiwanese doctors gained respect from the Taiwanese and the Japanese. Also, Chen attempted to argue that the rising status of Taiwanese doctors was a consequence of Japanese medical policy in colonial times, but the results in nationalism and independence were far beyond Japanese expectations. Beside Chen Junkai's works, people may also expect Fann Yanqiu, a young productive historian actually linked the new research angles in the 1980s and later doctor's writing of Taiwanese medical history in the 1990s. Fann first finished her master study on medical history Rijuqianqi Taiwan zhi gonggongweisheng: yi fangyi weizhongxin zhiyanjiu (1895-1920) (Public Health Policy during the Early Period of Japanese Occupation: A Study Focusing on Epidemic Prevention) and later Ph.D. dissertation Riban dikouzhuyi xia zhimingdi Taiwan de renzhong weisheng (1895-1945) (Racial Hygiene under the Development of Japanese Imperialism (1895-1945)). By combining study of an increasingly authoritative scientific discourse with the social subalternism of governmental interventionism, Fann demonstrated the compromise that Japanese policy was fashioned in response to the needs of colonization and Taiwanese local conditions. In her Ph.D. dissertation, Fann extended the argument that racial discrimination would be politically set behind many medical works during the colonial period. She successful revealed the local response, especially the Taiwanese doctors' attitude to Japanese colonialism by providing a bunch of social images about being a Taiwanese within scientific and colonial discourse. Fann's argument that medicine as a tool of "social control" that helped the Japanese rules, and Taiwanese population was the beneficiary of Japanese medical reform, while they might be suffered from coercive colonial rules.

By reviewing several mater and doctoral works beside of previous two, it obviously

showed that the study of Taiwanese colonial medicine needs more disciplines and multiple angles. Some graduate students picked up famous doctors or essential infrastructure to be their research topics. Their efforts worth application but still need more work to reach the original goals they usually wrote in the introduction. One problem in these theses was that the authors totally accepted the "scientific discourse" and tried to link it to the image of "brutal colonization". They hardly reached the compromised as Fann did, and were rarely dare to exclude the "scientific evidences" from their discussion. The other problem for these theses was the author usually took doctors' words for granted.

However, Taiwanese doctor was trained by Japanese colonizers and enjoyed socio-economic privilege in local society since the colonel period. Taiwanese doctors actually had multiple identities as a sociologist, Lo Ming-cheng's provided several hints for us to think of this question. In her book Doctors within Borders: Profession, Ethnicity, and Modernity in Colonial Taiwan, Lo interviewed many Taiwanese doctors and puzzled the self-identity between historical experience and contemporary tension among the interviewees. Lo concluded that the Japanese scientific colonialism might caused the 'hybrid identities' among Taiwanese doctors, and the socio-political changes continuously strengthened such 'hybrid identities' that lead to their anti-colonial mobilization, demobilization, and assimilation. Lo's efforts inspire us to re-think the historical writing done by the contemporary doctors and their anxiety in practice. In addition, since many researchers had no training in medicine, we certainly need to reveal the characteristic in doctor's historical writings. It is especially important when many researches after the 1990s relied on doctor's memoirs, historical interpretation, and even professional advises for making their arguments.

2. The whiggish progressivism in doctor's historical writings.

Beside of historians, medical professional never lost their interest of writing Taiwanese colonial medicine. They provided much information about technological innovation, epidemic history, and showed their concerns on local society and political transition. It is also obvious that the study of colonial medicine done by Taiwanese medical professionals very insisted on "scientific accuracy" and replied the "whiggish progressivism" in their historiography. In the medical realm, the whiggish historiography rested on a pair of assumptions. First, past actions that do not conform to present concepts of normality must be pathological. Second, past ideologies that fail to match present scientific constructions of reality are sure indicators of ignorance, malice, or both. To follow the whiggish hypotheses, many medical historians (here I meant the medical professionals) preferred to write "institutional history" and included their viewpoint of colonial medicine. Certainly, their writings on the history of medical institute would portray medical history as the progressive of medical technology. For the study of colonial medicine in Taiwan, it would reply the medical improvement in colonial period. For people like Guo Wenhua, might feel uncomfortable about this situation. He suggested that the trend of writing institutional history only meant to legitimize the contemporary changes of certain medical institute. Therefore the writing of the colonial past of that institute would merely indicate the progress in medical knowledge and technology. Influencing by scientific discourse and doctor's whiggish progressivism, several historical master theses also had topics on hospital or leprosy asylum. As we may expect, the discussion of these theses were usually tangled with the scientific evidences from the medical authorities and the expectation to explore the brutal colonialism. Within these mater works, the authors were difficult to discuss the colonial features in medical terms or from statistical numbers. It was in fact inevitable if they did not consider the trend of whiggish progressivism within their medical materials.

Receiving impacts from political transition in the late 1980s, some Taiwanese doctors were obviously not satisfied by scientific progressivism and wanted to extend their concerns to social and political fields. To these doctors, the colonial medicine was interested in exploring the meaning that modern medicine has done for Taiwanese society before 1945. They usually avoided to challenge scientific evidences and turned to explore how medicine was a form of authority empowered and victimized by governmentality. To the supporters of this viewpoint, the tension between doctor and patient is no longer a common issue in medicine and commonly seen in the whole world, but an unique problem caused by a wrong external state or, at least, problematic governmentality. Colonial medicine then was as much a system of colonial administration, a tool of state formation or legitimization (including colonial government), as a generator of meaning and cultural order. With this definition, a study of Taiwanese colonial medicine would be expected to reveal doctors' devotion to political reform, social movement and anti-Japanese resistance before 1945.

The motivation for Taiwanese medical professionals to study colonial medicine, however, in the sense derives from the political changes after the 1980s and an ethos of " being a Taiwanese". Many have remarked how the writing the colonial history in Taiwan reveals more about the writers and their anxiety than about history; that is the changing self-conception of medical historians that is revealed in historical reportage and not necessarily an ever-more accurate view of past. In the "old wine in a new bottle" interpretation, what each medical historian contributes was not new historiography but often merely new language.

Concluding remarks

As I said in the first paragraph, this paper did not mean to provide a conclusion of contemporary study of colonial medicine in Taiwan, but wished to open the floor for more excellent discussion. However, after reviewing these works, I like to reveal personal concerns on this new field. First, by taking a fashionable classification, contemporary works on Taiwanese colonial medicine only touched the "external linkage" of colonial medicine to colonial politics and social frameworks, but had not yet looked into the "internal connection" within medicine itself. Most of the discussions were made to reveal the relationship between medical development and political reasons or social demands. To me, the study of Taiwanese colonial medicine in current stage was more like the study of medicine under colonial rules, rather than the discussion of colonial influence in shaping medicine. Secondarily, the changing historiography of writing colonial medicine in Taiwan also meant the interruption of Japanese influence on telling medical history. In Oda's book, personal and academic connections were a very important scenario to weave medical past. That was the Japanese influence in writing medical history that I found in many pre-war writings. Such writing style was in fact last in Japan after 1945, and we can still found it among the memoirs of former medical graduates and teachers in Taihoku Imperial University. To me, the academic genealogy was still important for us to understand Taiwanese colonial medicine since Japanese influence was strong before 1945. The replacement of academic genealogy by western concepts such as "tool of empire", "social subalternism", or "whiggish progressivism", might help us to reveal the similarity of Japanese colonial medicine and other western counterparts. However, we could probably explore the unique features of Taiwanese colonial medicine by thinking in Japanese ways.

PS. I apologize for not providing a full paper in English, and also feel terrible sorry about the possible typos and grammatical errors in the abstract.