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<th>Health and Hygiene in Chinese East Asia</th>
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Controlling role of public goods provision. Finally, she notes that these centres have changed the game. New attitudes have evolved and more business people in China are seeing adoption of climate protection measures as a “business opportunity.”

This study is a must for anyone interested in climate change policy on the ground in China. The author has done a good job at marrying political economic concerns with a description of how CDM centres function in China. It must be said that the text might have been restructured in a way to reduce repetition and there is a technical fault: the graphs must have originally been done in colour as they are often difficult to decipher in the book’s black and white form. Despite these minor problems, the reader comes away with an enhanced knowledge of the problems of local CDM implementation in China and the theoretical considerations that can lead to an improvement of this important process for the future.

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Health and Hygiene in Chinese East Asia: Policies and Publics in the Long Twentieth Century
Edited by Angela Ki Che Leung and Charlotte Furth
vii + 337 pp. £16.99

In Health and Hygiene in Chinese East Asia, contributors explore how disease has been understood, managed and treated in Chinese regions across East Asia: from Hong Kong to Taiwan, the Yangtze River Delta and Manchuria. While the focus is primarily on the 20th century, the book’s scope extends from concerns with disease and cleanliness in the pre-modern period to Qing reforms, hygiene in 19th-century treaty ports, and the crises induced by a 21st-century emerging infection. In the words of Charlotte Furth, co-editor of the volume with Angela Ki Che Leung, the book sets out to map “global genealogies of scientific practices in interaction with highly local situations” (p. 2).

“Disease,” as the historian of medicine Charles E. Rosenberg noted, is an “elusive entity” which, in some sense “does not exist until we have agreed that it does, by perceiving, naming, and responding to it” (Explaining Epidemics and other Studies in the History of Medicine, Cambridge University Press, 1992, 305). An important theme – encapsulated in the title of the book’s opening section “Tradition and Transition” – is persistence and change over time: the extent, in other words, to which the meanings ascribed to “disease” as an object of anxiety, study and treatment have transmuted through history. The first two essays by Leung and Yu Xinzhong provide critical trans-historical perspectives on evolving terminologies and conceptualizations of disease, health and hygiene that complicate prevalent assumptions about the rise of “hygienic modernity” and the occlusion of “traditional” practices. Instead of emphasizing rupture, they suggest that inherited knowledge, habits and structures of social and political agency fed into and transformed modern public health. Nevertheless, in his account of the scientific construction of the plague in 1910–11, Sean Hsiang-lin Lei argues that the plague prompted a “conceptual breakthrough” (p. 75) with a corresponding re-orientation of the state’s role in managing health.

Other essays, including the one by Marta E. Hanson on severe acute respiratory syndrome (SARS), probe the ways in which disease has been alternately framed by “Western” and “Chinese” traditions. A number of contributors, including Ruth Rogaski in an essay on the plague in Manchuria, are concerned with the different
meanings assigned to public health activities in Chinese and Japanese contexts. In so doing, the essays track complex, reciprocal and often contested processes of translation and mistranslation between East and West and within East Asia, often in settings of informal or formal empire. In an afterword to the collection, Warwick Anderson underscores this preoccupation, reflecting on the extent to which it may be possible to trace an alternative and more accommodating “genealogy” of medicine and public health that reconfigures the relationship between Chinese classical medicine, “colonial” or “semi-colonial” medicine, and “post-colonial” biomedicine.

The other two sections of the book (“Colonial Health and Hygiene” and “Campaigns for Epidemic Control”) deal with public health interventions – including marsh drainage, sanitary ordinances and vaccination campaigns – and with responses to malaria (Lin Yi-ping and Liu Shiyung), schistosomiasis (Li Yushang), pneumonic plague and SARS (Tseng Yen-fen and Wu Chia-Ling). Within this broad and flexible organization, many of the essays are concerned with how, to what ends, and with what consequences, an elite put “scientific” knowledge and practices to work.

Contributors investigate the ways in which modern, Western-driven technologies were variously applied, contested, rejected or modified on the ground in specific situations. While Shang-Jen Li traces evolving colonial British medical views on Chinese dietary habits and health, Wu Chia-Ling – in one of three essays devoted to Taiwan – considers the colonial birthing system and the opposition of lay midwives to Japanese efforts to impose experts in “scientific motherhood” (p. 171). There is an interest, here, in re-contextualizing medicine and health in relation to shifting gravities of power, culture and science in order to demonstrate the entanglement of interests and the varying scales of interaction: local, regional, national and transnational.

This is an important critical history of public health in East Asia, which adds substantially to the existing literature, extending and qualifying previous work by Ruth Rogaski, Gail Hershatter and others. The book breaks new ground in demonstrating the diversity and complexities of the interactions between scientific practices and contextual factors in local situations. In different ways, each of the contributors shows how the environment of specific locales and the situated knowledge that these produced were embedded in more expansive regional and extra-regional relations or matrices of power. In so doing, the book moves away from an exclusively state-centred focus to furnish novel historical perspectives on “public health” that highlight continuities with earlier sanitary and pre-modern approaches, without seeking to constrain diverse histories within a reductive and “overarching narrative of imperialism” (p. 2). While the book will certainly appeal to historians of modern China and East Asia, it will be required reading for those with interests in comparative histories of medicine, health, science and technology.

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Sociology and Anthropology in Twentieth-Century China: Between Universalism and Indigenism
Edited by ARIF DIRLIK, with GUANNAN LI and HSIAO-PEI YEN
Hong Kong: The Chinese University Press, 2012
xi + 371 pp. $52.00

This book arises from a series of workshops examining the formation of academic disciplines in 20th-century China. There exists among the scholarly community an