CHAPTER SEVEN

YAN’AN’S HEALTH SERVICES UNDER MAO ZEDONG’S LEADERSHIP, 1937–1945

The Chinese masses need everything—
food, clothing, housing, education, medical help
—Agnes Smedley, September 1937.¹

Poverty is one of the most pronounced causes of disease…. This is a dark side of present-day hygienic culture
—Andrija Stampar, M.D.²

Rescue the dying and heal the wounded,
Practice revolutionary humanitarianism
—Mao Zedong³

The health challenges in northwest China were among the most arduous anywhere in the country. At the time when the Long Marchers arrived, Yan’an was in a region beset by communicable diseases, high maternal child mortality rates, and famine.⁴ Although the Nationalist government had set up nominal departments of health in Xi’an and other northwestern provincial cities, in rural areas public health was nonexistent. Even in good times it would have been much harder to initiate modern standards of hygiene and sanitation in the arid and impoverished northwest than in other areas of China.

Revival of the United Front at the end of 1936 provided a brief respite for the Communist forces. Once the War of Resistance broke out, the Japanese military focused as much on destruction of Communism as had the Nationalist government, and it was far better armed. In South Shaanxi a Nationalist army blockaded Yan’an and from 1940 on prevented passage

---

¹ Smedley (1938), 21.
² Dr. Stampar was a pioneer in the development of rural healthcare and social medicine in post World War One Croatia. He visited China several times in the 1930s as a League of Nations healthcare consultant.
³ For an inscription in Mao’s hand, see Yanan Baiqiuuen guoji heping yiyuan (1986), photo 1.
⁴ Lillian M. Li (2007) provides a definitive account of this subject.
of much needed medical supplies. Yet because of the strategic vision of Mao and his leaders, their familiarity with guerrilla warfare, their attraction of patriotic youth, and international aid from idealistic foreigners, the Communists managed not only to survive but to develop highly motivated teams of health workers.

There has been much political and military analysis by scholars on the Yan’an period. The war led to visits to Yan’an by a number of American journalists, military and diplomatic personnel, several of whom published accounts of their observations. In addition, significant support came from international health workers, among whom Drs. Norman Bethune (Baiqiuen), Ma Haide, D. S. Kotnis (Kedihua), Hans Mueller, the Soviet physician Dr. Orlov (阿洛夫) and the Korean Dr. Bang Wooyong (방우용) have received special recognition. Two books by Agnes Smedley provide eyewitness accounts of military healthcare in action in both the Eighth Route and New Fourth armies.

None of these accounts deal with the overall business of healthcare and life saving in northwest and north China during the period under review. Chinese scholars are now studying this pivotal era, during which Communist healthcare workers had to rescue soldiers fighting the Japanese military, serve an impoverished civilian population, and lead the struggle against feudal superstition. This chapter describes how military and civilian health workers addressed these tasks, by drawing on a combination of leadership, training, patriotism, party discipline and international aid. ‘Saving lives’ provided a rallying cry around which both leaders and followers could unite to advance the Chinese Communist revolution.

**Confronting Famine and Disease**

Northwest China was a land of arid but mineral rich soil, whose people for years had been battered by famine and communicable disease. During the great north China drought of 1920–1921 500,000 people were estimated to have died while nearly 20 million were believed to be destitute. Local people survived off poplar buds, corncobs, sawdust, gaoliang (高粱 sorghum) husks, elm-tree bark and sweet potato vines. Sale of women and children flourished. Relief was more accessible than during the great famine of 1876–1879 but did not address underlying problems.\(^5\)

---

\(^5\) Mallory (1926), 2–3, 30. See also Peking United International Famine Relief Committee (1922). This report deals mainly with famine in West Chihli. As the product of a