

The International Health Division's Views on Nursing Practice, Policy and Education in British Malaya

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Between 1896 and 1966 the Colonial Nursing Association (CNA) recruited and sent 8,450 nurses to areas overseas with substantial British populations. The Association was run by volunteers, but quickly came to serve as an agency recruiting nurses for the Colonial Office and British overseas communities. The Association changed its name to the Overseas Nursing Association (ONA) in 1918, reflecting its work for areas which were not colonies.¹ The main purpose of my research undertaken at the Rockefeller Archive Center (RAC) was to gain an outside perspective of the British nurses' work overseas. The International Health Division (IHD), formerly the International Health Commission/Board of the Rockefeller Foundation (RF), actively surveyed and tried to cooperate with British colonial government health policy and practice.

British healthcare policy and practice in East and South East Asia is not as well researched as activities in the British Empire in Africa and South Asia.² However, British Malaya was by far the most common destination for British colonial nurses from the 1910s to the 1950s. During the 1930s Malaya had double the number of nurses of any other colony, with for example, in 1939, one-hundred and eighty-three colonial nurses working in Malaya compared to sixty in Nigeria and forty in Kenya. In 1930, the second most common destination was Shanghai, and Hong Kong also consistently received a large number.³

Due to the large collection of documents at the RAC on the IHD's activities in Asia,

the focus of this first research trip to the RAC was Malaya. Visits to various states of British Malaya were among the first surveys of the International Health Commission, which was established in 1913. Originating in 1915 and beyond, reports document surveys on medical education, public health and medical services, including public health demonstrations and sanitation, and levels of hookworm infection.⁴ The sources which were of most value for this research were files from the 1920s and 1930s on public health in the Straits Settlements of British Malaya. Folders and volumes record two British colonial nurses receiving RF fellowships to study public health in North America before sailing to the Straits Settlements; the work of the Straits Settlements Rural Sanitation Campaign; and the world trips undertaken by Dr. Victor Heiser, the Director for the Eastern part of the International Health Board/Division.⁵

The highlight of my research was Victor Heiser's diaries. Having worked as the Director of Health for the Philippine Islands, Heiser was recruited by the RF as the Director for the East in 1914, completing sixteen world trips between 1915 and 1934.⁶ Heiser's diaries are extraordinarily pedantic, candid, and frequently sarcastic, and they are detailed with personal comments about the people he met. They also reveal how hard Heiser worked in surveying countries and travelling across the globe.⁷ He was very well known, and was nicknamed the 'world's family doctor.' Heiser's *An American Doctor's Odyssey* was the sixth best-selling non-fiction book in 1936, selling more than half a million copies.⁸

The first thing that the RF did when considering whether to assist a country was to conduct a survey.⁹ Heiser undertook the medical education survey in Malaya in 1915. He was concerned that nursing was more racially controlled than medicine, with medical courses primarily attracting Malays, while nursing was limited to European and Eurasian applicants. The course proved to be inadequate and attracted only a few students, because it was so racially limited. Probationers were only occasionally appointed to positions normally

reserved for the British CNA nurses. Heiser worried much more about hospital assistants, nurses, pharmacists and dentists than he did about doctors. He also observed that the British nurses in Penang did not wash the patients or do dressings, leaving these tasks to locally trained staff.¹⁰

In 1925, the Straits Settlements government agreed to cooperate with the RF to work to eradicate hookworm in the colony, which became known as the Straits Settlements Rural Sanitation Campaign.¹¹ The RF doctor, Milford Barnes, doubted whether the English nurses could initiate activities of the caliber of the American County Health nurses. He also worried about how to convince the British to accept North American training for the British public health nurses who were to be sent to work on the Campaign. A.L. Hoops, the Principal Civil Medical Officer for Singapore, told Barnes that the British felt a ‘loss of prestige’ in accepting help from Americans. None the less, Barnes succeeded in convincing the colonial government and as a result British nurses were invited to New York as guests of the RF in order to learn more about North American public health nursing.¹²

In 1926, two British nurses, Annabella McNeill and Elizabeth Darville, were recruited by the ONA to lead public health nursing in the Straits Settlements.¹³ Darville had worked as a Health Visitor in England, but had no formal training in public health. McNeill had some public health training and maternity and children’s nursing experience as well.¹⁴ The RF provided them with three months experience in public health nursing in America. The British government paid their salaries, while the RF paid additional expenses, such as board and travel in the U.S., and the extra expenditure on travel incurred by travelling to Singapore via North America.¹⁵

The nurses began their training with three and a half weeks at the East Harlem Nursing and Health Demonstration in New York, attending a variety of clinics, demonstrations and lectures, some of which covered such topics as nutrition and record

keeping. However, Darville and McNeill did not believe this experience was immediately transferable to the Straits Settlements, so they were pleased to be posted to rural districts of Alabama for three and a half weeks for the next part of their trip. This included a visit to the Tuskegee Institute which was later to become infamous for its untreated syphilis study.¹⁶ Next Darville and McNeill travelled to Yale University, Connecticut, and Providence, Rhode Island, with two days in each place. Public health lectures at the Massachusetts Institute of Technology followed, and then, in Toronto they learned about chlorination of water and pasteurization of milk, and also visited schools and clinics.

Darville and McNeill believed that their visit to Alabama, their time with Miss Gardner, who ran a private visiting nursing association in Providence, and their tuition with Dr. Hastings on chlorination and pasteurization in Toronto, would be the most useful of their learning experiences when they arrived in the Straits Settlements. The nurses' correspondence reveals more than their training experiences. The nurses had a fabulous trip, visiting Niagara Falls and travelling through the Rockies. However, their letters talked about their fears of taking the ship to China and what will happen at Shanghai or Hong Kong because of political troubles.¹⁷

Once in the Straits Settlements, the Health Sisters undertook an enormous amount of work in the new District Health Centers. In 1927 there were a total of 13,024 home visits by the Health Sisters or nurses in the six district health centers, and 5,539 visits to the Health Centres. By this time, Darville and McNeill were joined by another public health nurse, and an unofficial health visitor, plus their Asian nurse assistants.¹⁸ The functions of the Health Centres were so much more than just hookworm eradication, although tables documenting diagnosis and treatment of the disease dominate the reports of the campaign.¹⁹ RF District Health Units like these had originated in the American South in the previous decade in order to combat hookworm and to educate people in public health and hygiene.²⁰

Victor Heiser was full of praise for McNeill and Darville. For example, in 1927, Heiser wrote to the Director of the Straits Settlements campaign concerning the two British nurses who had benefited greatly from their trip to the States, and stating how he had hoped that they would be an added stimulus for developing public health nursing.²¹ In 1931, Heiser was worried because C.J. Wilson was being considered for the position of heading a joint health service for the Straits Settlements and the Federated States of Malaya. Wilson was opposed to specialist public health nurses and efforts in infant welfare and hygiene.²² Heiser went on to note the importance of the nurse at the Health Center in Butterworth, as attendance at the clinic had reduced while the nurse was on holiday.²³ He gave special mention to Darville and McNeill in his summary of his trip around the Straits Settlements:

“Another Rockefeller Foundation investment that has produced profitable returns was in having Miss Darville and Miss O’Neill [sic] come to the United States for a brief study tour. Their example has interested others in health center work, and the apprentice system has already produced a considerable number of women, both native and foreign, who are doing acceptable public health nurse work.”²⁴

Nurses and doctors who had worked with the RF found working in Malaya difficult. Heiser wrote about a conversation with the RF doctor, Milford Barnes, in Singapore in 1925. The American doctors had not received a hearty welcome from the British. Heiser described their encounters with the British as a ‘veritable hell’ because they had not been introduced to the Colonial Club or social amenities.²⁵ They were classed socially among the lowest assistant surgeons, and Barnes even had problems gaining permission to practise medicine.²⁶ Heiser was sympathetic with Darville when she was significantly upset. Even though she was a British nurse, she had become disillusioned by British manners, preferring those of the Americans. Darville found working in the British Empire difficult, and it was not easy to convince local health officials of her ideas. She was also having troubles with ‘status’ and she was not able to ‘call’ on the British in England or Penang in the way she had on Heiser. Moreover, life had become unpleasant because of another nurse who was jealous of the fact

that Darville was working fewer hours than her as a public health nurse.²⁷ Darville told Heiser that she would have resigned if she had not received the ‘sympathy’ of the American Dr. Paul Russell, who worked for the RF on the Straits Settlements Rural Sanitation Campaign.²⁸

The Anglo-American experience in Malaya was different from other British colonies in that RF interference in nursing appears to have been earlier. Successful potential fellows were usually encouraged to apply by an RF official who had a goal for healthcare in the area in mind. Evidence shows that training of fellows in Nigeria, Barbados and India occurred during the Second World War, except for one nurse working in Fiji in 1938.²⁹ The RF was also involved in establishing training schools in India and Ceylon in the 1940s. The IHD waited for independence in the case of Ceylon, even though they had been approached for funding and assistance in the early 1940s.³⁰ In the mid-1920s, Chinese nationalism was growing among the immigrant population in Malaya, and perhaps the political tension in Asia between Japan and China attracted Americans to the area. Economically Malaya and Singapore were of interest too for resources and markets, and indeed, Heiser noted that, “America is reviled and slandered almost continuously in the press. This seems a strange thing to do to your best customer.”³¹

In 1938 the RF reported that it had influenced the relatively high status of public health nursing in the Far East, Continental Europe and Latin America through its work in nursing.³² Although Anne Marie Rafferty argues that nursing was low in prestige within the organization, public health nurses were valued, forming what the IHB called a ‘close bond of contact’ between the health staff and the people.³³ Nurses were considered the ‘foot soldiers’ of their profession. London was seen as a way into the English speaking world and the British Empire, so the RF employed American public health nurse Elisabeth Crowell to survey training schools in Europe from 1922 to 1923. Great Britain was also seen as the best at

training bedside nurses, and could provide fellows more cheaply. However, Crowell found British nursing uncoordinated and unorganised and was particularly annoyed with health visiting, which could be practised by ladies from a variety of backgrounds. She considered British public health nursing inferior to the U.S., Canada and France. Crowell thought British prejudices and traditions would be hard to break through.³⁴ By 1938, it was still believed that British public health nursing had failed to advance as it should have done. By this time, American nursing education was perceived to be the global leader in terms of university schools and public health nursing.³⁵

With nursing in Asia, Americans wanted to train British and Malayan nurses in what they perceived as superior American methods. Indeed, Rafferty argues that international cooperation failed in general, in nursing, due to these nationalist interests.³⁶ The RF assumed American dominance in expertise in public health. However, Liew Kai Khiun reveals that traveling dispensaries, which were to include doctors, nurses and vaccinators, had an early beginning in Perak, Malaya, in 1896.³⁷

Although the focus of this research trip was on Malaya, Heiser's impressions of the British healthcare system in Shanghai's International Settlement were usefully gleaned from his diaries. The elected Shanghai Municipal Council was independent of the British colonial system, and although the Council was led by British expatriates, it also had Japanese and American members.³⁸ As mentioned above, a surprisingly large group of nurses worked in Shanghai. Heiser and his colleague Norris were impressed by this healthcare work in the Settlement.³⁹ Heiser's surveys provide color to the story of healthcare in Shanghai. He was not impressed by the lack of cooperation between the Health Commissioners of the International and Native cities.⁴⁰ Heiser also reinforces the impression given in the Shanghai Municipal Council (SMC) reports that the Council used nurses as a means of surveillance of the population. The SMC spent a large proportion of its money on the police and had a

disproportionate number of nurses, including those active in health visitation at an early time.⁴¹ Heiser wrote, “The Department is a huge affair, with many divisions, but gives impression of attempting health by enforcement rather than by education.”⁴²

Although the original intention of my research trip was to examine RF surveys of British healthcare provision and practice in Malaya, and to gain an outsider’s view on colonial nursing, cooperation and conflict were found in the Anglo-American nursing policy and practice in the colony. I am very grateful to the RAC Grant-in-Aid program, which has enabled me to add this valuable research to my future publications on British colonial nursing. Special thanks go to the staff of the RAC for suggesting so many relevant folders for my research. In particular I would like to thank Robert Battaly, Thomas Rosenbaum, Charlotte Sturm and Beth Jaffe-Davis, and also Camilla Harris for her practical advice.

In order to develop this research into an article on Anglo-American public health nursing in British Malaya, and contributions to a co-authored monograph on the lives of British colonial nurses, there will be a number of avenues of further study. For example, to contextualise this Malayan story, the particular differences between American and British public health nurse training, policy and practice need to be delineated, especially in the imperial arena. More detailed analysis of records in The National Archives for the United Kingdom will also be undertaken to explore the relations between the RF, the UK Colonial Office and the colonial government of the Straits Settlements.

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The ideas and opinions expressed in this report are those of the author and are not intended to represent the Rockefeller Archive Center.

ENDNOTES:

¹ H.P. Dickson, *The Badge of Britannia: The history and reminiscences of the Queen Elizabeth's Overseas Nursing Service, 1886-1966*. Edinburgh, Scotland: The Pentland Press, 1990, p. 5 and p. 21; Overseas Nursing Association, *Annual Report*, 1966, Box 131, Overseas Nursing Association Collection, MSS British Empire s400 (ONA), The Bodleian Library of Commonwealth and African Studies at Rhodes House, Oxford.

² Exceptions include Lenore Manderson, *Sickness and the State: Health and Illness in Colonial Malaya, 1870-1940*. Massachusetts: Cambridge University Press, 1996; Phua Kai Hong, "The Development of Health Services in Malaya and Singapore, 1867-1960." Ph.D. dissertation, London School of Economics, 1987; Kai Khiun Liew, "Specifying fevers: positioning Malaya's health lobbies (1867-1941)." Ph.D. dissertation, University College London, 2007; Margaret Jones, "Tuberculosis, Housing and the Colonial State: Hong Kong, 1900-1950." *Modern Asian Studies* 37: 3 (2003), p. 653-682; Philippa Levine, *Prostitution, Race and Politics: Policing Venereal Disease in the British Empire*. New York and London: Routledge, 2003; Kerrie L. MacPherson, *A Wilderness of Marshes: The Origins of Public Health in Shanghai, 1843-1893*. Hong Kong: Oxford University Press, 1987.

³ ONA, *Annual Reports*, 1900-1965, RHL.

⁴ Victor G. Heiser, "Memorandum on Medical Education in Malaya, 1915," Folder 1, Box 1, Series 473A, Record Group (RG) 1.1, Rockefeller Foundation Archives, Rockefeller Archive Center, Sleepy Hollow, New York (hereafter designated RAC). See also John Farley, *To Cast Out Disease: The History of the International Health Division of the Rockefeller Foundation (1913-1951)*. England: Oxford University Press, 2004, p. 65-66.

⁵ In particular folders 3868-71, Box 304, Series 1.2, RG 5; Folder 2594, Box 210, Series 473H, RG 5.3; Folder 2595, Box 210, Series 473H, RG 5.3; Folder 315, Box 50, Series 2.473, RG 5; Victor Heiser, "Notes of the 1915 Trip," "Notes of the 1916 Trip, Vol. 1", "Notes of the 1916 Trip, Vol. 2", Series 2, RG 5; Victor Heiser Diaries, 1925-6, Folder 157; 1927-9, Folder 158; 1930-31, Folder 159, Box 50, RG 12.1, Rockefeller Foundation Archives, RAC.

⁶ "Victor George Heiser (1873-1972)", reprinted from *Year Book of the American Philosophical Society*, 1972, 194-97, in "Victor Heiser," RAC Biography File, Rockefeller Foundation Archives, RAC.

⁷ Victor Heiser, "Notes of the 1915 Trip," "Notes of the 1916 Trip, Vol. 1", "Notes of the 1916 Trip, Vol. 2", Series 2, RG 5; Victor Heiser Diaries, 1925-1926, Folder 157; 1927-9, Folder 158; 1930-31, Folder 159, Box 50, RG 12.1, Rockefeller Foundation Archives, RAC.

⁸ Victor Heiser, *An American Doctor's Odyssey*. New York: W.W. Norton and Co, 1936; "Victor George Heiser (1873-1972)." *Year Book of the American Philosophical Society*. www.librarything.com/topic/33115 accessed 26 January 2011.

⁹ See for example John Farley, *To Cast Out Disease: A History of the International Health Division of the Rockefeller Foundation (1913-1951)*. New York: Oxford University Press, 2004, p. 38 and p. 65-66.

¹⁰ Victor G. Heiser, "Memorandum on Medical Education in Malaya, 1915." Folder 1, Box 1, Series 473A, RG 1.1, Rockefeller Foundation Archives, RAC.

¹¹ Victor Heiser Diaries, 1925-6, January 2 1926, Folder 157, Box 50, RG 12.1, Rockefeller Foundation Archives, RAC.

¹² M.E. Barnes to Victor Heiser, May 18 1925, Folder 2971, Box 233, Series 1.2, RG 5, Rockefeller Foundation Archives, RAC.

¹³ J.E. Shuckburgh to Victor Heiser, January 4 1927, Folder 2869, Box 304, Series 1.2, RG 5, Rockefeller Foundation Archives, RAC.

¹⁴ Miss Beard to Miss Read, January 31 1927, Folder 3869, Box 304, Series 1.2, RG 5, Rockefeller Foundation Archives, RAC.

¹⁵ Victor Heiser to A.L. Hoops, February 5 1927; H.M. Gillette to the Under Secretary of State, Colonial Office, England, July 28 1927, Folder 3869, Box 304, Series 1.2, RG 5, Rockefeller Foundation Archives, RAC.

¹⁶ A.M. McNeill to Miss Read, March 6 1927; A.M. McNeill and E.W. Darville to Dr Vincent, April 7 1927, Folder 3869, Box 304, Series 1.2, RG 5, Rockefeller Foundation Archives, RAC.

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- ¹⁹ “Straits Settlements Rural Sanitation Campaign Reports”, 1927, Folder 2595, Box 210, Series 473H, RG 5.3, Rockefeller Foundation Archives, RAC.
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- ²¹ Victor Heiser to Paul Russell, July 1 1927, Folder 3871, Box 305, Series 1.2, RG 5, Rockefeller Foundation Archives, RAC.
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- ²³ *Ibid.*, February 28 1931.
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- ²⁵ Victor Heiser Diaries, 1925-1926, December 30 1925, Folder 157, Box 50, RG 12.1, Rockefeller Foundation Archives, RAC.
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- ²⁷ Victor Heiser Diaries, 1927-1929, January 25 1928, Folder 158, Box 50, RG 12.1, Rockefeller Foundation Archives, RAC.
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- ³³ *Rockefeller Foundation Annual Report*, 1921, p. 208, cited in Rafferty, “Internationalising Nursing Education,” p. 267.
- ³⁴ Rafferty, “Internationalising Nursing Education,” p. 270-272.
- ³⁵ *Ibid.*, p. 276-277.
- ³⁶ *Ibid.*, p. 277.
- ³⁷ Kai Khuin Liew, “Traveling dispensaries and rural health visits in British Malaya (1896-1960s).” *Wellcome History*, 30 (2005), p. 8.
- ³⁸ Robert Bickers, “Shanghailanders: The Formation and Identity of the British Settler Community in Shanghai, 1843-1937.” *Past and Present* 159 (1998), p. 165-168.
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