

To Benefit the Needs of the Chinese People: Roger Sherman Greene's Scientific, Medical and Educational Mission in China (1914-1935)

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From 2009 to 2011, I participated in the Peking Union Medical College's (PUMC) history, file protection and research project funded by the China Medical Board (CMB). A survey of old PUMC (1906 -1951) English files was available, and during the process of reading these valuable historical materials, I found many issues that should be studied regarding the benefits the Rockefeller Foundation (RF) and the CMB had provided the Chinese.

Fortunately, from March to June 2012, I was at the Rockefeller Archive Center (RAC) as a Scholar-in-Residence. During this period, I found many files that related to our college, but are missing in the PUMC Archives. The PUMC and RAC collections have their own characteristics, yet complement each other. Hopefully in the future, the union of these historical records can be achieved through a Sino-U.S. joint directory, so that U.S. scholars will not have to cross the ocean to fully examine the history of Sino-U.S. scientific, educational, and cultural exchanges.

To do some basic work on this project, I selected Roger Sherman Greene, one of the leading figures in the developmental history of the PUMC, as the starting point of my research. General histories of the PUMC have mentioned his role in Sino-U.S. relations, however, his role in the management of the China Peking Medical Foundation and the PUMC during 1915-1935, and in the development of modern Chinese medicine have not yet been case studies.

This paper addresses the following issues:

- 1) What are the main elements of RF and CMB policies that helped transplant western science and philanthropy into China?
- 2) How did Greene implement these policies?
- 3) What impact did Greene's activities, as an agent of the RF and CMB, have?
- 4) Did the Chinese accept that U.S. assistance would benefit the needs of Chinese society?
- 5) Did Greene accomplish his mission to transfer western medicine and scientific methods to China through the establishment of the PUMC and the training of a group of intellectuals?

Beginning in 1914 Greene engaged in medical education and related organizational activities in China. This coincided with the Republic of China introducing a new system of medical education. The work he later carried out in medical education and public health activities was groundbreaking, and he can be regarded as one of the founders of modern Chinese medicine. Greene's activities in China reflect the mission entrusted in him by the Rockefeller family and the RF. He later became an important official of the CMB, which became an independent well-funded foundation that committed a huge capital investment in the development of Chinese medicine.

The implementation of new systems of medical education and medical services in China was a difficult task, which required remarkable abilities and personal qualities. Greene's suitability for this mission, is worthy of study. Warren I. Cohen's book on Greene analyzed his role in Sino-US relations. Cohen described Greene as follows:

Roger Greene is thoughtful, responsible, constructive, far-seeing, he was an able man, outstanding as a consular official, as a medical administrator, and as a lobbyist. There were, however, aspects of his personality and character that created problems for him. His contemporaries often respected him but they did not always like him. They found him austere, cold, unapproachable ... Perhaps Greene's most attractive characteristic was his loyalty to his subordinates, his willingness to fight their battles with his own superiors, in both the Department of State and the Rockefeller Foundation.¹

John B. Grant, a PUMC associate professor and an International Health Division (IHD) representative in China, worked for many years with Greene and regarded him as a “knight in shining armor. Who always came to your protection whether you knew it or not.” Greene’s extraordinary leadership abilities allowed the successful execution of his mission with the China Medical Foundation and the PUMC. His activities over twenty years in public health and medical education garnered him considerable social status in China.

In order to understand Greene’s medical/educational mission in China, the RF’s basic strategy, which determined his role and responsibilities in China, and a number of important historical events, including the following two examples, must be noted.

The RF’s leaders believed that the Chinese situation offered a fine opportunity for an American endowment to create a jointly controlled Chinese—American institution which would have better standing and fuller official recognition than any other new and purely American enterprise could gain; one that could, easily become the leading university in China.

RF officials made this judgment based on information provided by foreigners in China who had contact with high officers in the Chinese government. At a lunch on October 1913, A. J. Bowen, president of the University of Nanking, told Greene that Dr. C.D. Tenney had interactions with Yuan Shi Kai, and other influential Chinese. Consequently, Tenney attended the 1914 RF medical meeting and spoke on the social conditions in China. Tenney’s speech influenced the decision-making of the RF. John D. Rockefeller, Jr. (JDR Jr) asked him whether the Chinese government would support the RF’s project to establish an educational institution in China, Tenney answered, “they have made grants to the full limit of their ability in educational matters in the past, and they would do all they could, I am sure, but the assistance of the Foundation would enable them to take really effective measures in regard to establishing a

central university.”

This RF meeting discussed future activities in China and set out the basic principles needed to obtain the support of the Chinese government. JDR Jr thought that the great changes which were taking place in China were opportunities which never existed before and which, perhaps, the RF should consider. He saw “A great opportunity, a great need ... a responsibility in this particular country,” a new program that would “benefit the needs of China.” The concept “to meet the needs of China” served as the philosophical foundation of Greene’s activities in China.

Equally important were Charles W. Eliot's remarks at the meeting. These thoughts were later presented to Chinese students at the PUMC. Liu Ruiheng, a leading figure in China, was very impressed by Eliot’s speech:

I have never seen such a need anywhere in the world ... There had never been a moment in the whole history of China when there had been such chance for introducing western ideals and particularly for western methods of education to get an entrance into China on a large scale.²

Eliot paid much attention in bringing western culture into the minds of Chinese students. “Every year a considerable group of these Chinese students returns to China, and can carry to China whatever good seed has taken root in their minds.”³

The RF wanted to create not only a new system of scientific medicine in China, but also a new system of ideas and spirit, that is, an entirely different culture. The elites from the U.S. managed to make great changes in China. They provided funds, knowledge and skills that the Chinese needed.

In 1914 and 1915, the RF undertook two Chinese medical missions. Both were major events in the history of modern Chinese medicine and had considerable impact on modern Chinese history. The first Chinese mission by U.S. medical educators needed experts and diplomatic personnel versed in Chinese affairs. Greene was tapped by the RF to do the work. He

in turn recommended that his brother, Roger Greene, join the 1914 medical commission. In a letter to Judson, JDR JR. asked if Roger Greene should become a member of commission. Judson assured Junior that Roger Greene would be a valuable member of the RF staff, whether posted in China or elsewhere.

From north to south, the mission conducted a comprehensive survey of Chinese medicine. The written reports recommended that the RF invest large sums of money in the PUMC and to also develop medical education in Shanghai and other parts of China. Greene participated in this mission and also later when PUMC construction started. Greene, the Rockefeller family and the RF had a special relationship that determined the limits of his mission. Greene had a good knowledge of the political and social institutions in China as well as a plan that would change and benefit the Chinese people. His activities are documented by his reports and correspondence with RF leaders and CMB trustees in the U.S.

In the CMB's early days, JDR JR. had high regard for Roger Greene, as noted in a letter to Wallace Buttrick. "It is interesting that Mr. Greene's mind has been working along the same line as yours and my own."⁴ Therefore Greene was invited to carry out the CMB program. He was the right man for the mission. His abilities, devotion, and rare intelligence were obvious in his administration of the PUMC.

Discussion arose whether the CMB should pay the entire cost of further developing a missionary hospital in China, and, if doing so, would it have a negative impact on the general beneficence of church and missionary societies? The CMB board felt that it should move with great care and much deliberation during this formative period. In a letter about the CMB's objective, JDR JR. wrote that it is

to assist Missionary Societies to strengthen their medical schools and hospitals by providing equipment and other facilities, and by making annual grants, as may be found

expedient, for the support of physicians and nurses, selected by the respective Missionary Boards, subject only to the foundation's approval of the professional qualifications of the appointees.⁵

Although, in a RF board resolution from March 22, 1915, JDR Jr. stated that the RF considered “the need of scientific medicine in China and how best the Foundation might assist in meeting the need,” and “this work of the Foundation will be limited to medical service.”

However, from the 1910s to 1920s, the process of creating a new basis for medical care and medical education in China was not just a problem of medicine or education, but a broader societal issue. Therefore RF and CMB activities in the establishment and development of the PUMC are not just related to medicine or public health. At the same time JDR Jr. claimed that the work was conducted under “the desire of earnest Christians to communicate the spirit of Jesus to the Chinese and to the whole world we share to the full.”⁶

In fact, the RF was overly optimistic, since China's political development was unpredictable. After Yuan Shikai's death, various political forces competed in Peking and caused frequent changes of government and constant fighting. Good relations needed to be established between the China Medical Foundation, the Chinese central government and local forces, i.e., the warlords of the Five Dynasties, if construction of the PUMC was to succeed.

During the period of the Northern Government, Greene maintained good relations with the Central Government, which had been losing ground to the Kuomintang (KMT) forces with which Greene did not have much contact. The RF had a solid reputation in China, in particular as it related to the Mobil Oil Company. From a material point of view, the RF's activities in China created concern for the KMT. Some important party figures wanted to get support from the Rockefeller family, for example, after the failure of the Huang Xing in the second revolution.

On December 23, 1914, JDR Jr. received a letter from Hwang Hsing in which he

expressed his expectation of help and guidance from the U.S. In his letter he disclosed the corruption of the Yuan Shi Kai government and tried to persuade JDR Jr. to not tolerate it. He also told JDR Jr. that he was determined to visit the U.S. and to learn “all I could of your good and benign Government and institutions, from which I hope someday to be able to derive great benefit for my fatherland.”⁷

However, since the KMT did not have power in the Central Government, Greene did not pay much attention to Hwang Hsing’s activities. On January 14, 1915, Roger Greene wrote his brother Jerome about the background of Hwang Hsing. Roger did not think much of Hwang and told Jerome that “Any statement signed by him [Hwang] therefore should be received with caution.”⁸

In 1915 as the CMB began construction of the PUMC, Greene worked mainly with the Central Government, but also enjoyed good relations with the Northern Government. Greene had contact with the Hubei Consul General, the Wuchang Uprising and also paid attention to prominent local figures, mainly from Britain and the U.S. and maintained close contact, especially with Xiong Xiling, Hume and others in the Southern areas.

For example, in 1919, Greene visited Hunan province, and in an interview with Xiong xi ling, he stated that:

we should urge the need of the high standards in organizing medical education in China and also the need of private support of the best medical schools until the Government should be convinced by the efficient work of practitioners of western medicine that scientific medical education was necessary and that it could justly demand large government support.⁹

Greene’s contacts with governmental political bigwigs provided much help in the construction and development of the PUMC. The 1921 dedication of the PUMC saw the Northern Government provide high verbal courtesy, with little substantive content.

The early political environment of the PUMC is often misconceived by Westerners. External pressures from unequal treaties, China's warlord governments, the KMT government's revolution of internal repression, all belie the impression that the PUMC existed in a relaxed environment.

Many items required attention in the administration of the college: new institutional methods were required in order to retain high scientific standards; the public function of the college needed to be introduced to the general public, prominent Chinese officials and also to foreign residents in China; policy-making and implementation had to cope with political threats from warlords, rebellions, the northern march of the KMT, and the Sino-Japanese war; lastly, the establishment of departmental disciplines, and the administrative relations between department heads had to be considered.

The CMB was still under the control of the local government in January 1916 when Greene planned to open the Peking office, for which he needed police permission. In the application/report he submitted to the Peking police, Greene touted JDR Jr. as an American philanthropist, and that the purpose of the CMB was to do medical work throughout China, but mainly to assist medical schools and hospitals. "All our undertakings are of a purely educational and charitable character, and there is no idea whatever of mercenary gain. All our activities are confined to medical matters. We are not interested in political and commercial affairs." At the time Greene also asked for assistance and protection from the local police.¹⁰ The reply from the Peking police included instructions from the Ministry of Interior

The American Minister introduced Mr. Greene to me at my office, and I had a conversation with him. His intents and purposes are known to me. Mr. Rockefeller, who is a wealthy merchant of the United States, is contributing ungrudgingly enormous sums for the purpose of developing philanthropic work in China. His enthusiasm in doing well is really difficult to emulate, and we deeply appreciate it.

Greene managed to do well at the PUMC and established friendly and good relations with the local Chinese government and thereby ensured a good working environment for the PUMC.

RAC documents show that the situation in Peking was very precarious, with the PUMC encountering a variety of unfavorable factors; including difficulty in obtaining bodies for teaching and research; tight supplies due to warlords and war; many medical lawsuits and even the kidnapping of foreign doctors.

The Nanjing National Government also subjected the PUMC to constraints. Greene realized the success of his mission rested largely on positive U.S.-Chinese governmental relations as well as his relationships with Chinese officers. In a letter to Wallace Buttrick, Greene stated,

I feel strongly that the work in which I am now engaged is a most important one, not only in itself, but on account of its probable effect in helping to establish the future relations of the United States and China on a firm and friendly basis. Not only will the work which we have undertaken be likely to predispose the Chinese people to a friendly attitude towards the United States, but in my opinion whatever tends to make the Chinese people happier and more prosperous at home, will lessen the acuteness of the difficult situation caused by the contact of our two very different civilizations and different standards of living.

Interestingly, he also illustrated the benefits the U.S. would receive:

If the level of prosperity in China can be made to approximate that in western countries, there will be little tendency on the part of a large number of people to emigrate from China to the west, and we shall have only a comparatively small movement of merchants, students and travelers for pleasure, with a very few isolated individuals, who really wish to establish themselves permanently in the United States. Once this condition is reached or approximated, the danger of friction over the immigration question will be greatly reduced, and one of the greatest sources of danger to the peace of the Pacific basin will be removed.

It seems he thought that by helping a country with an enormous population of poor people, that philanthropy would benefit the poor and thereby decrease their threat to the rich.¹¹

Greene, in both public talks and private conversations with colleagues, supported the

Chinese Government's sovereignty of action, and expressed dissatisfaction with Japanese aggression in China. Even after his return to the U.S. he continued to use the hospital as a vehicle to get help to China.

During the construction of the new medical education and public health systems, Greene relied not only on the financial strength of the RF, but also on American medical researchers and personnel, as well as Chinese politicians and friends, who were rising talents with backgrounds in American education. He used his influence in the U.S. and in China, to build a PUMC staff as an influential social group, and relied on this group to promote the medical activities of the China Medical Foundation and the PUMC.

Greene's role in the construction of the PUMC was highly praised by George Vincent in a letter to JDR Jr.,

The more I see of him and of his relation to the community and our work, the more I am impressed by his value. He is a gentleman, intelligent, tactful, high-minded; he understands the East, and as one of his friends said to me, has the 'oriental mind'. It is clear that he has the confidence of people who count in all the circles of missionary work, diplomacy, and commerce. I am convinced that we are singularly fortunate in having him as the resident director of the China Medical Board.¹²

From the beginning of his work, Greene sought to raise the level of talent, not only through American doctors with a common educational background, but also by increasing the Chinese staff. For example, when he was a consul in Harbin he had a Chinese secretary, Archibald P. Chien.

After Greene started his work at the PUMC, he wrote a letter to his former subordinate A. P. Chien, who worked in the American Consulate in Harbin, China, and asked for his services in the Peking office. Greene planned to do "some extensive medical work in China, mainly through assistance to various missionary and other organizations that are already engaged in the work." Chien accepted the offer and became Greene's Chinese secretary. In this capacity he wrote many

reports on the Chinese political situation which aided Greene and the CMB during the ensuing years.

At the PUMC Greene helped develop three distinct departments: a Department of Public Health, a Department of Anthropology and a School of Nursing. Their establishment, choice of leaders and specific operations were influenced by Greene's efforts. During PUMC's so-called golden years (1921-1931), Greene enjoyed his most influential period. His responsibilities included:

1. Control of funds entrusted to him for various purposes throughout China.
2. Supervision of the current workings of the Peking Union Medical College.
3. Supervision of the construction of the new buildings at the college.
4. Development of Mission hospitals.

At the same time, Greene, as a former diplomat and established American resident in China, was also involved into many philanthropic activities. As a representative of the Red Cross he helped Hsiung His-ling carry out relief work for thousands of refugees in Tientsin.

Greene knew that he could not accomplish his mission alone and therefore asked for help from Henry Houghton. He wrote to Buttrick stating:

I felt that the China Medical Board has already adopted such large plans and made such considerable appropriations for the medical work in China that the important thing now is to see that these plans are wisely carried out and the funds efficiently administrated. I feel that I am not able alone to carry this responsibility.¹³

Consequently, Greene assembled a group of assistants familiar with native Chinese cultural groups, a main adviser being Rui heng Liu of the PUMC.

On February, 1916, Rui heng Liu, then a doctor at the Shanghai Red Cross Hospital, gave a speech, "Shall we leave it all to the Rockefeller Foundation?" at a meeting of the National Medical Association of China. In part he said,

Just what the exact future plans of the Rockefeller Foundation will be, has not as yet been made known, but we do know that an enormous sum of money is to be spent for the

establishment of first class medical schools, research laboratories and hospitals in several parts of China, and that they are aiming immediately at a raising of the present standard of medical education in China, and ultimately to make China a safer place for us, the Chinese, to live in. We cannot help admiring the magnanimous generosity of Mr. Rockefeller, and naturally every Chinese should feel thankful to him, and do the best he can to help along the work of the Foundation ... We, the Chinese, certainly wish that we could get all the credit for the medical reform of China, but as this is impossible we are thankful that the Rockefeller Foundation is starting this campaign for us, what we ought to do now is not to wait and see what they can accomplish, but to get busy now and see what we can accomplish ourselves so that ultimately a part of the credit, at least, will be ours.

In his speech he appealed to the government and the wealthy people in China to spend money on the promotion of medical education.

Greene paid much attention to what Rui heng Lui had said. "This is the kind of reaction we want to produce by our work ... Dr. Liu is perhaps one of the most serious young Chinese doctors trained abroad, though he perhaps lacks some of the social gifts that are so conspicuous in others, perhaps to the detriment of their professional side."¹⁴

The RF's International Health Board (IHB) and the CMB were both involved with public health institutions in China. The IHB's activities in China are worth an in-depth and comprehensive study, but that topic is beyond the scope of this paper. IHB public health activities in China preceded those of the CMB. The working relationship between these two institutions was a concern of Greene.

In August of 1918, Greene discussed with Wallace Buttrick the CMB's role in public health education. Buttrick believed that the CMB and the IHB were two subsidiary organizations of the RF, with the CMB focusing on medical education in China; and the IHB entirely devoted to public health matters. Greene thought that

The Chinese do not yet realize the importance of either public health measures or modern medical practice, and therefore in our opinion it is highly desirable to educate them in these matters as a foundation for future work by the doctors turned out by our schools, and for effective public health administration, either by the government alone or by our

International Health Board.

Greene, an experienced China expert, believed that the Chinese people in general, and most officials, did not have any concept of public health work. Unless they were educated to understand the value of western medicine, western medical practitioners would not be given a fair chance. In this regard, the CMB could do valuable preparatory work for the IHB.¹⁵

Later, John B. Grant began successful activities with the Department of Public Health and Peiping health units. Greene provided much help and used his political influence to urge the local Peking local government, to provide manpower and financial support. Also, when internal group conflict occurred at the PUMC, such as a quarrel between important staff members, Greene helped resolve the problem.

Greene's activities in medical education, research and teaching made possible the disciplines of public health and medical science in China. In fact, the PUMC later became, in virtually all disciplines, the center of modern medical science in China.

Among the PUMC administration, Greene was the most prestigious leader. Henry S. Houghton, John B. Grant, Rui heng Lui all benefited from his guidance and help, as did the PUMC's Chinese directors and staffs, its foreign employees and its graduates. Chinese political and intellectual elites consider Greene one of the leading figures in the history of Chinese medicine.

The golden years (1921-1931) of the PUMC were reached during Greene's term. By 1935 Greene had completed his mission and the PUMC had attained its glorious apex. Most of the PUMC's major contributions to the development of Chinese medicine had been accomplished during this period and Greene's personal career and his medical education mission in China was successful, much to the benefit of the Chinese people and modern scientific thought in China.

Greene's time in China witnessed the rapid development modern Chinese medicine through the introduction of westernized medical science, treatment and education. My study of Greene looks at the motivating forces of this development through a study of the PUMC. Its campaigns, led by PUMC staff and its graduates, were supported by the RF, the CMB, as well as by elites in the Chinese intellectual class and the enlightened government officials of the Republic of China. This multi-level cooperation is one of the forces that motivated the development of modern Chinese medicine in the twentieth century. From 1915 through 1935, Roger Greene was the leader of the campaign and the organizer of the community. He possessed the qualities, abilities and features necessary to play such an important role in the history of modern Chinese medicine. He was the right man in the right time in the right place.

The Rockefeller involvement was based on the findings of the 1914 RF Commission to China, of which Greene was an important member. Later, as an executive of the CMB and PUMC, Greene cultivated friendly relations with the Chinese government. Leading citizens and warlords cooperated with him as created a community of staff and graduates at the PUMC. Their cooperation allowed great achievements in the development of medical education and public health. Due to a divergence with the CMB and RF trustees, Greene resigned in 1935. Nonetheless, the work he had accomplished in over twenty years laid the foundation for modern Chinese scientific medicine and medical education.

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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 Warren I. Cohen, *The Chinese Connection*. New York: Columbia University Press, 1978, p 274.
- ² China Conference of the Rockefeller Foundation 1914, Rockefeller Foundation Archives (RFA), Record Group (RG) 2, Series 2, Box 11, Folder 91.
- ³ RFA, RG 4, Box 1, Folder 5.
- ⁴ JDR Jr. to Wallace Buttrick, June 20, 1916, RFA, RG 4, Box 1, Folder 9.
- ⁵ Rockefeller Foundation, Annual Report 1915, page 246.
- ⁶ Buttrick to L.W. Barnard, April 13, 1917, RFA, RG 4, Series 1.1, Box 2, Folder 10.
- ⁷ RFA, RG 4, Box 1, Folder 1.
- ⁸ RFA, RG 4, Box 1, Folder 2.
- ⁹ Peking Union Archive, Greene's diary, 1919.
- ¹⁰ Greene to Buttrick, RFA, RG 4, Box 1, Folder 9.
- ¹¹ Greene to Buttrick, April 11, 1917, RFA, RG 4, Series 1.1, Box 2, Folder 18.
- ¹² Vincent to JDR Jr., July 17, 1919, RFA, RG 2, Series 3.1, Box 12, Folder 109.
- ¹³ Greene to Buttrick, December 11, 1917, RFA, RG 4, Series 1.1, Box 2, Folder 19.
- ¹⁴ Greene to Buttrick, February 28, 1916, RFA, RG 4, Series 1.1, Box 7, Folder 88.
- ¹⁵ Greene to Buttrick, August 22, 1918, RFA, RG 4, Series 1.1, Box 8, Folder 91.