East Asian Science, Technology and Society: An International Journal (2017) 11:617–620
DOI 10.1215/18752160-3684747

Miriam Gross, *Farewell to the God of Plague: Chairman Mao's Campaign to Deworm China*

Oakland: University of California, 2016. 357 pp. $70.00.

Mary Augusta Brazelton

Villagers picking up snails with chopsticks, unruly wards where patients drank and gambled, temples repurposed as hospitals: these are the details, borne of meticulous archival research, that make Miriam Gross's work *Farewell to the God of Plague* not only a substantial contribution to modern Chinese history but also a genuine pleasure to read. This groundbreaking history of antischistosomiasis campaigns in the People's Republic of China from the 1950s to the 1970s is a must-read for students of governance and mass campaigns during the Maoist period, as well as anyone interested in the history of public health in China and other rural settings. Schistosomiasis, or snail fever, a parasitic disease carried by snails, was a major problem for public health in rural China during the twentieth century.

Gross's refreshingly lucid writing presents a comprehensive and accessible account of the campaigns. Gross draws upon extensive and meticulous archival research to show that the Maoist health model, which became enshrined in Western discourses of global health in the later twentieth century, was very different from the set of practices that actually made antischistosomiasis campaigns successful. Snail fever was *not* eradicated in 1958, as is commonly believed, and prevention work—far from the spectacular success that government and popular accounts suggest it was—actually largely failed. The crucial moment in controlling the disease in China, Gross reveals, was the onset of the Cultural Revolution, when mass movements resulted in the successful large-scale extermination of snails and an effective treatment campaign healed millions of schistosomiasis patients.

This book demonstrates the crucial importance of local archives to modern Chinese history. Gross consulted a broad range of materials on the municipal, provincial, and county levels, and one of the many strengths of her work is the great scope and scale of the research involved. She uses evidence from three case studies: Shanghai, the national headquarters of the campaign and the center of pharmaceutical and chemical manufacturing; Qingpu county in Jiangsu, a suburban environment that was most severely

M. A. Brazelton
Department of the History and Philosophy of Science, University of Cambridge, UK
e-mail: mab94@cam.ac.uk

affected by schistosomiasis and that became a national test site for the campaign; and rural Yujiang county in Jiangxi province, a national model site for the campaign that actually had a relatively low incidence of snail fever. The book thus considers anti-schistosomiasis work in a range of settings, although all three sites are exceptional in different ways.

Gross begins her study with part 1, a narrative of the high politics of the campaign, focusing on the transformation of schistosomiasis from a neglected rural disease to a top priority of Maoist health work. The prominent role that Mao Zedong himself plays in this narrative is reflected in the book's title. Gross contends that during revolutionary periods campaign participation amounted to espousing Maoist thought and that after 1956 the campaign enjoyed the consistent support of top Party leadership, writing at one point that after early failures, "Chairman Mao decided to keep trying" (240). In part 2, "The Campaign Nobody Wanted," Gross examines structural and economic obstacles and resistance to antischistosomiasis campaigns. Often, leaders and local officials undermined the movements by withholding resources and personnel, although the leaders of model areas like Yujiang supported the campaign because it provided a way for them to gain political capital.

The empirical core of the book rests in part 3 and its focus on the campaign itself, with discussions of antischistosomiasis education, prevention, and treatment between 1956 and 1976. Gross reveals that most of the Party's efforts to educate rural people about snail fever using popular entertainment, texts, lectures, demonstrations, and exhibits failed because they used totally incomprehensible language and concepts. "Education failed to convey even the fundamental idea that pathogens caused disease," Gross writes (88). While rural people did not understand scientific concepts and theories, they willingly adopted a "scientific state of mind" that valued innovative and rational approaches to problems (107). However, this approach did not translate to a successful campaign, and reports "indirectly indicated" that many rural people did not understand basic concepts of disease decades into the campaign (113). In Gross's telling, it was not until the 1960s, when Party literacy efforts resulted in a core group of rural health workers, that public education about microorganisms and schistosomiasis began to succeed.

It was not just education that initially proved futile. Gross comes to the striking conclusion that schistosomiasis prevention was a spectacular failure. Popular resistance impeded projects like killing snails and building latrines for reasons that changed over time. Between 1949 and 1956, people refused to participate in anti-schistosomiasis work because the campaign challenged their views of human relationships to nature; whereas between 1956 and 1976, people resisted not because the campaign disrupted their personal habits, but because it intruded on efforts related to food production. Gross argues that when people eventually did start participating in large numbers during the 1960s, it was not because they understood that their work would help prevent incidence of snail fever or because they thought that they could control nature through their efforts. Rather, she suggests, it was primarily due to revolutionary fervor, mandatory job assignments, and social pressure. In making her case, Gross excels at drawing distinctions between each of her study sites. For instance, she explains that in the course of early sanitation work during the 1950s, feng shui did not matter so much to the placement of public toilets in Shanghai, but it was an

issue of great importance in rural Jiangxi and resulted in substantial resistance to preventive work there.

Although the preventive work of killing snails was a significant part of the campaign, Gross argues that it was treatment, not prevention, which made antischistosomiasis efforts successful. Moreover, success happened not in the 1950s, when many rural people resisted testing and treatment, but rather in the early years of the Cultural Revolution, between 1966 and 1971. During these years, treatment adopted improved technical methods and was made free of charge; the identification of the campaigns with Maoist thought led many to embrace them anew with revolutionary spirit; and new groups, notably newly educated rural youth and sent-down urban doctors, made treatment in the countryside more effective. Throughout this period, refusing medical attention was not always an option for rural patients with snail fever; coercive treatment marginalized patients' own understandings of health, disease, and etiology as the Party took control of rural bodies and made them into a population "whose daily labor power could be calculated and maximized" (177). Nonetheless, over time treatment levels in the population went up and disease incidence dropped.

Gross ends the book with two chapters on the nonmedical benefits of antischistosomiasis campaigns. She argues that health campaigns provided a means for the Communist Party to consolidate its power over China's rural population. Medical movements contributed to other Party efforts to attack traditional culture—for instance, the reframing of religious holidays as snail fever work days—and to develop grassroots activists in the countryside. The campaigns also gave the government control over night soil, a move that had significant economic benefits for the state and which, in Shanghai, resulted in a "small-scale street war over shit" between governmental sanitation personnel and former household feces collectors (197).

By invoking science, Gross argues, the Party sought to demonstrate its legitimacy. In what she calls "scientific consolidation," the process of collecting and reporting data made cadres part of a machinery to get and keep power. It also made them key actors in a new, Maoist science that focused on field investigation to solve pragmatic problems and employed scientific management methods that required the development of comprehensive data systems. Contrary to most arguments about the Maoist period, Gross suggests that in revolutionary eras, bottom-level cadres strengthened their technical skills just as professional bureaucracies and scientific establishments were attacked, reflecting Mao's consistent endorsement of grassroots science.

Gross's discussion of Maoist science gets at a key question for researchers of this period. Throughout the book, Gross evaluates the degree to which antischistosomiasis work was scientific. For instance, Gross argues that the drastic reduction of snail fever during and after the Cultural Revolution was due to "excellent, scientifically based treatment work" (116). And she attributes successful campaigns to locals' "ability to put science first and treat all infected people" (169). Where and how did the lines between the scientific and nonscientific blur, and when? Gross identifies the use of data to develop basic experiments in the 1960s as "a manipulation of observed reality that had been inconceivable before" (217). In this respect, consideration of experimental research on other diseases and subjects in Chinese science, medicine, and public health before 1949 may be helpful, although the scope, personnel, and location of such research activities certainly changed greatly over time.

This book forces us to rethink commonly held assumptions about the role of science and medicine in the Cultural Revolution. Instead of the chaos that most scholars have assumed, Gross suggests that the campaign succeeded largely due to treatment efforts at the ideological height of the revolutionary movement. Sending urban doctors down to the countryside helped spread expertise in Western medicine to areas hit hard by snail fever, and Gross argues that this was a key factor in ensuring the eventual success of the campaigns. She adds a comprehensive overview of antischistosomiasis efforts to the work of historians like Fang Xiaoping (2012), who studied medicine in the Cultural Revolution by examining the impact of barefoot doctor programs in one part of Hangzhou prefecture. Gross further suggests that revolutionary zeal was not a hollow display of political correctness, but rather provided a means to exert social pressure that increased schistosomiasis treatment levels. This study therefore provides a fascinating and useful counterpoint to the recent assertions of Frank Dikötter (2010) that Mao was an unequivocally black-hearted dictator—especially since Gross stresses Mao's personal involvement in efforts to control schistosomiasis.

Given the beautifully rich archival source base and serious engagement with Chinese historiography, it is unfortunate that there are no Chinese characters in the book. A debate is currently ongoing between many publishers and authors about the merits and economics of using characters in monographs; in this case, it would have made the book more useful to academic audiences. Gross's brilliant work undoubtedly opens up a new set of questions for future scholarship. What differentiated a model county or a test site from a more "ordinary" county? How did the history of antischistosomiasis work in the People's Republic compare to public health programming in Taiwan during the same period? Gross mentions particular efforts to reform the sanitary habits of fisher folk; was this a reference to the Dan people, and if so, how much did ethnicity matter to the administration of the campaigns? In raising new questions and making critical and original arguments about health, governance, and science in the People's Republic, *Farewell to the God of Plague* signals an important contribution to modern Chinese history—one that is wonderfully written and researched.

References

Dikötter, Frank (2010). *Mao's Great Famine: The History of China's Most Devastating Catastrophe, 1958–1962*. London: Bloomsbury.

Fang, Xiaoping (2012). *Barefoot Doctors and Western Medicine in China*. Rochester, NY: University of Rochester Press.

Mary Augusta Brazelton is a University Lecturer in the Department of History and Philosophy of Science at the University of Cambridge. Her research interests are broadly concerned with the history of science and medicine in modern East Asia. Her current project examines the history of mass immunization in twentieth-century China.