

Analysis of the Patriotic Health Movement in China: A Study on the Crude Health Movement.

Chonghe Shan

School of History, University of York, York, YO1 9TL, UK

ABSTRACT

Due to multifaceted pressures encountered in developing countries, there exists significant resistance towards implementing public medical activities, particularly due to the contradictions arising from limited educational attainment. This paper commences by examining the patriotic health movement in China during the 1950s as a means of identifying solutions to these challenges. It initially reviews the difficulties faced by the Chinese government during the patriotic health campaign and explores potential remedies, subsequently assessing their applicability in contemporary times. An analysis of public health responses in various developing nations over recent years reveals that many seemingly rudimentary approaches remain highly effective today.

KEYWORDS

Public Health; Medical Aid; Patriotic Health Movement; New China.

1. INTRODUCTION

This study examines the "patriotic health movement" implemented in China from 1950 to 1970, addresses three common challenges faced by developing nations, namely the low educational attainment among the masses, deeply ingrained religious or cultural resistance, and fiscal constraints on governments. It analyzes the Chinese government's strategies to tackle these issues and incorporates relevant subsequent public health cases to assess their current effectiveness.

2. ORGANIZATION OF THE TEXT

Since the 20th century, European countries have made significant advancements in public health initiatives through the assimilation of lessons learned from World War. However, many newly independent Third World nations after World War II have yet to be exposed to this knowledge. Their population not only lacks scientific education compared to Westerners but also retains primitive beliefs and relies on witchcraft instead of modern medicine. Consequently, addressing healthcare challenges in these countries remains a prominent task for the World Health Organization (WHO) in the 21st century.

Poverty is a contributing factor, but economic assistance alone cannot address all challenges. Let's consider the difficulties encountered in Haiti. According to the World Health Organization (WHO), over \$6 billion has been allocated for leprosy treatment in Haiti[1], surpassing the investments made by many developed nations; however, the vaccination rate remains below 50%. This can be attributed to a significant population of Voodoo adherents in Haiti who hold reservations towards vaccinations and instead engage in unconventional rituals when they fall ill. Despite WHO's efforts to provide an ample supply of medical needles, local individuals driven by profit motives often resort to needle-

sharing practices and subsequently resell surplus needles, leading to an alarming HIV infection rate among those aged 18-25 years old exceeding 10% in Haiti. Furthermore, during the devastating earthquake that struck Haiti in 2010, medical teams dispatched by WHO faced regular looting from locals who then sold stolen medical supplies on the black market within the United States[2]. These formidable obstacles severely impede WHO's ability to carry out its mission effectively. It can be argued that without first improving public attitudes towards public health, donated funds and resources will merely vanish into an abyss with only temporary relief achieved while leaving room for subsequent infections. Therefore, leveraging mass media platforms to promote healthcare initiatives within impoverished countries sometimes holds greater significance than solely relying on sending medical experts.

The significance of information in health activities has been acknowledged by the public, and the United Nations has employed various approaches to reach underserved areas. Nevertheless, several challenges persist objectively, such as medical personnel lacking rural work experience and deeply ingrained backward thinking among local communities. Following the HIV/AIDS outbreak in Uganda, WHO endeavored to collaborate with the local government for promoting sex education. Initially planned for community engagement, this initiative faced obstacles due to insufficient strength of local community organizations in disseminating information effectively. Despite efforts made to localize a multitude of posters and videos used for health promotion, the level of understanding regarding these concepts remains inadequate at the local level[3]. These propaganda strategies that were successful during World War II encountered repeated setbacks. In the 1980s, H. Kanaaneh and J. Hubley advocated for developing health activities in developing countries through "appropriate technology" distinct from Europe's approach – one that extends beyond absolute reliance on professional and scientific medicine but incorporates specialized means[4][5].

China is a case study in this regard. At the beginning of the 20th century, Chinese people had a poor sense of hygiene. "Urinating in feces, spitting mucus, throwing fruit peels at random, piling up dirty in the house" is a description of health conditions[6]. More than 80 percent of the population is illiterate, and 500 million poor farmers are spread over 9.6 million square kilometers[7]. To make matters worse, due to thousands of years of tradition in China, there are many anti-scientific customs that are not consistent with modern medicine. In order to solve this problem, the New Chinese government launched the so-called "patriotic health campaign" in the 20 years from 1950 to 1970, and achieved remarkable results. It may not apply to all countries, but it is an example worth analyzing. This paper argues that the Chinese government has chosen a rather speculative approach, tying health issues to political, livelihood, cultural and other factors, and promoting public awareness of public health through appropriate mass media.

China serves as a compelling case study in this context. At the onset of the 20th century, Chinese society exhibited poor hygiene practices, characterized by behaviors such as defecating and urinating indiscriminately, spitting mucus openly, discarding fruit peels haphazardly, and allowing dirt to accumulate within households. Furthermore, over 80 percent of the population was illiterate while approximately 500 million impoverished farmers were scattered across an expansive landmass spanning 9.6 million square kilometers. Compounding these challenges were deeply ingrained anti-scientific customs rooted in thousands of years of tradition that contradicted modern medical knowledge. To address this issue comprehensively, the New Chinese government initiated a transformative "patriotic health campaign" between 1950 and 1970 which yielded remarkable outcomes. While not universally applicable, it stands as an exemplary model worthy of analysis. This paper contends that the Chinese government adopted a pragmatic approach by intertwining health concerns with political dynamics, livelihoods, cultural factors, and other pertinent aspects while leveraging appropriate mass media channels to enhance public awareness on matters pertaining to public health.

2.1. The Crude Health Policy

In the 1950s, the majority of Chinese population exhibited a profound lack of awareness regarding hygiene practices, let alone comprehending their significance. The task of establishing this concept from scratch poses a complex challenge, exacerbated by the fact that inadequate sanitation continues to claim lives on a daily basis. Consequently, the Chinese government resorted to employing an uncomplicated yet direct approach by discarding all superfluous explanations and imposing strict control over individuals' behavior.

A common practice is to consume boiled water. As the birthplace of tea culture, drinking boiled water itself holds significant social significance in China. Furthermore, in 1932, there was a cholera outbreak in China where Dr. Wu Liande identified chaotic water usage as the primary cause for its spread. Due to the absence of a running water system, residents upstream often disposed of their household waste into rivers, exposing those downstream to infection risks. Following his recommendation, Shanghai established numerous affordable boiled water shops which resulted in reducing the patient mortality rate from 30% to 7.4%. This initiative instilled a nationwide habit of consuming boiled water[8].

In order to address the issue of widespread parasite infestation during that period, the initiative to promote boiled water was once again prioritized. Unlike previous efforts limited to major cities like Shanghai and Guangzhou, this campaign extended throughout China. The government mandated the establishment of boiling water facilities in all factories, military camps, and farms while imposing restrictions on daily drinking water and most domestic sources, thereby necessitating reliance on these designated boiling water rooms[9]. A portable thermos flask emerged as an iconic symbol of that era, with people gradually adapting to queuing up at specific times for a serving of hot boiled water.

At the same time, the government has continued its propaganda efforts unabated. The propaganda department is well aware of its target audience's limited literacy and lack of scientific and artistic knowledge, or even basic reading skills. It employs an extremely simplistic approach to disseminate information. In numerous villages, white walls have been adorned with striking red characters proclaiming "Boil water before drinking" in order to capture attention. To facilitate comprehension for those unfamiliar with written language, simple depictions of kettles or flames are added alongside the text[10]. This method of propagating messages by forsaking artistic elements and emphasizing key points through stark contrasting characters proves highly effective. A similar technique was employed by the UK during World War II when they utilized a multitude of posters featuring concise text, yellow backgrounds, and large black lettering to raise awareness about German germ warfare methods[11].

In terms of curbing the transmission of blood-borne infectious diseases, the Government has introduced the slogan "eradicating the four nuisances". The four pests encompass flies, mosquitoes, bedbugs, and mice. To ensure effective implementation of this policy, the propaganda department has disseminated a multitude of posters across all urban and rural areas. These posters feature a standardized format with prominent Chinese characters "eliminate the four evils" accompanied by illustrations depicting each respective animal[12]. This repetitive yet purposeful propaganda effectively instilled in Chinese citizens a clear understanding of their responsibilities.

In terms of technical guidance, radio broadcasting emerged as an effective means of communication. In the era predating televisions and even radios, in order to ensure widespread dissemination of information, villages would install multiple loudspeakers on elevated terrain resembling concert speakers. Emitting a distinct sound, these devices were metaphorically referred to as the "big horn" by villagers[13]. When prompt action was required, village leaders would deliver concise speeches through the loudspeakers to instruct all residents regarding necessary tools, designated locations, and daily tasks. Such grassroots activist groups prove more efficacious than governmental or

organizational appeals since individuals are inherently inclined towards obtaining information from and acting upon requests made by familiar acquaintances rather than strangers[14].

This type of mobilization call, based on a specific number of individuals, yields remarkable outcomes. In 1952 alone, 44 million rats and 2 million pounds of mosquitoes were eradicated[15]. Throughout the 1950s, millions of tons of residual waste were removed and 4.9 million public toilets were constructed nationwide[16]. Most participants in this process lacked comprehension regarding the purpose or the ability to discern right from wrong. Organizers believed that excessive information would only lead to confusion. Public health campaigns can be described as mechanized or militarized in this model, where the government issues orders, relevant departments disseminate propaganda, and people subsequently comply. Surprisingly, this pragmatic approach proves highly effective with remarkable results.

2.2. The Violent Bondage of Health Concepts

The successful implementation of these crude policies is attributed to several favorable factors, including the high level of trust in the new government, the enhanced organizational capacity of socialism, and the structural dynamics within rural communities in China. However, there is also a distinctive aspect to this public health campaign that intertwines with patriotism and other deeply-rooted concerns, which may seem far-fetched but proves highly effective. While few individuals are penalized solely for poor hygiene practices, if the notion that neglecting personal hygiene equates to sacrilege or treason gains acceptance, it will undoubtedly trigger an overwhelming surge of "hygienism." This movement was aptly named as the "Patriotic Health Campaign."

The name originates from the 1950 Korean War, which was perceived in Chinese propaganda as a threat posed by the United States to China and was referred to as "resisting the United States and aiding North Korea." In addition to deploying troops for warfare, the government has employed various tools of public opinion warfare, including allegations of germ warfare originating from the United States. Intelligence gathered from the Chinese military suggests that there is a possibility of biological weapons being utilized by the United States along its border with North Korea. While this information cannot be definitively verified, it did instigate a series of subsequent actions[17]. The official media recognized this as an excellent opportunity to promote public health. The People's Daily took initiative in reporting on it first, publishing an editorial in 1950 that firmly aimed at "eradicating without hesitation the toxic flame of germ warfare originating from the United States"[18]. The article asserted that a significant number of pathogen-carrying insects were deliberately released by the United States at their border with China-North Korea, condemning such acts of germ warfare and drawing comparisons to Japan's nuclear strike – causing fear and anger among citizens, particularly those residing near borders.

The article then asserted the necessity of vaccinations and pest eradication as crucial measures to counteract the American plot. As per the report, "Eliminating a fly" is tantamount to "eliminating an American spy." Only by prioritizing personal hygiene can we effectively combat America's germ warfare. The report adeptly evoked strong emotions among the populace and provided clear guidelines for conduct, compelling individuals driven by national sentiment or concern for their own safety to actively engage in health-related activities. In a Shanghai factory in 1951, when questioned about their daily extermination efforts, workers may not have comprehended the concept of bacteria or viruses but simply responded: "To eradicate Americans[19]."

Revised sentence: The mass media persisted in promoting this campaign, and even after the Korean War had ended, numerous reports continued to claim that the threat of bacteria remained and would persist for a prolonged period. One typical poster depicted doctors and soldiers standing together to defend China from germ warfare, perpetuating the idea that hygiene equates with patriotism. In line with these media efforts, the government responded promptly by implementing incentive measures. Individuals who excelled in hygiene activities were not only recognized with certain material rewards

but also received much praise. This greatly stimulated enthusiasm, leading people to compete with each other to see who was more hygienic and creating the expected "hygienist mania."

In addition to national defense, the pursuit of a better quality of life can also serve as a motivating factor for individuals. Following the conclusion of both the Second World War and the Civil War, it is undeniable that Chinese citizens yearned for prosperity and happiness while despising the exploitation and oppression prevalent in the old society. Consequently, after the establishment of New China, significant advancements were made throughout the People's Republic of China, with public health emerging as an emblematic representation of progress. A 1951 article published in People's Daily argued that unsanitary conditions during pre-revolutionary times symbolized mistreatment towards impoverished individuals; thus, new China aimed to rectify this situation. Therefore, prioritizing healthcare was considered an integral part of building socialism. The more emphasis placed on health issues, the stronger one's political consciousness and revolutionary fervor became. This notion greatly appealed to socialist-minded individuals at that time. Xu Bing, then vice mayor of Beijing stated: "We should perceive this sanitation campaign as a means to mobilize masses and construct our nation." Conversely, neglecting health matters could be deemed counterrevolutionary-a radical stance that nonetheless compelled some staunch conservatives to accept change[20].

In addition to newspapers, other forms of media were employed during this period. An exemplary instance is the 1951 drama "LongXu Ditch" by writer Lao She. The play depicts the harsh lives of ordinary people residing near the foul-smelling ditch in Longxu Valley, Beijing in 1948, adopting a relatively documentary style. The gutters themselves assume significant roles within the narrative[21]; for instance, women being forced into them when subjected to bullying and dirty water seeping into houses during rainfall. Ultimately, as China achieves liberation in the play's conclusion, its putrid waterways are cleansed. The story draws inspiration from the sewer reform of 1950, with the filthy drains symbolizing an outdated society while environmental sanitation represents a new era. Simultaneously realistic and eulogistic, this play undoubtedly instilled enthusiasm among audiences for public health initiatives.

In addition to harnessing patriotism, the government is also dedicated to dismantling these irrational traditions in order to disrupt age-old customs. Take for instance the reinterpretation of traditional festivals. The Spring Festival, which holds paramount importance in China, symbolizes bidding farewell to the old and welcoming the new. While people typically engage in cleaning activities during this time, there are also certain outdated customs such as the belief that garbage should not be disposed of on this day as it signifies discarding good luck. In 1958, Beijing took a pioneering step by launching a campaign urging residents to conduct more thorough cleaning alongside an official directive from the government mandating centralized garbage collection[22]. This initiative garnered significant praise from media outlets and subsequently led other cities to follow suit, thereby establishing a tradition of springtime sweeping during the festival. Similarly, through media propaganda and deconstruction efforts, the Dragon Boat Festival originally intended for warding off evil spirits was transformed into an occasion centered around combating disease-carrying mosquitoes. Consequently, festival activities shifted their focus from blessings to disinfection rituals involving herbs and mosquito eradication methods. Modernizing traditional concepts may pose challenges; however, these examples demonstrate that it is indeed possible when one possesses familiarity with local culture and ecology. For countries and regions predominantly influenced by religion and belief systems, this approach proves more effective than nationalism or patriotic sentiments.

2.3. A Crude but Workable Health System

By 1965, significant progress had been made in the patriotic sanitation movement, leading to increased health awareness among ordinary people. Consequently, the government initiated plans for establishing modern public health facilities. However, China still grappled with poverty issues,

making it impractical to implement a comprehensive healthcare and welfare system. To address this challenge, a profession known as "barefoot doctors" emerged[23]. These individuals were not professional doctors but rather medical volunteers who lacked dedicated office spaces and stable incomes; many of them were local farmers. They willingly acquired basic medical knowledge and often worked barefoot in the fields. When necessary, they would don white coats to treat patients-hence their name "barefoot doctors." While they possessed some healthcare expertise and could manage common ailments and assist with childbirths, more complex diseases were beyond their capabilities. Their primary mission was to reduce infant mortality rates and eradicate prevalent infectious diseases[24].

The training of barefoot doctors was expedited through brief instruction from professional physicians or by relying solely on a comprehensive reference book called the Barefoot Doctor's Manual-an encyclopedic guide that employed illustrations and simple language to facilitate understanding among less-educated individuals regarding basic treatment procedures for common illnesses such as fever and diarrhea[25]. This manual also included practical first aid measures along with concise information on pharmacology and pathology for those interested in further learning opportunities within the medical field. The popularity of this versatile book extended beyond just barefoot doctors-it became widely embraced by various audiences-and its initial edition published in 1969 boasted an impressive print run of 1.18 million copies[26].

The competence level of barefoot doctors is considerably low, with most falling short in comparison to present-day healthcare professionals. However, they are still capable of addressing basic injuries, thereby saving a significant number of lives. In underdeveloped regions, there exists a natural aversion towards medical practitioners among many individuals. Barefoot doctors serve as an effective solution to this issue due to their local origins, which fosters trust and enhances their understanding of patients' needs. As these actions yield positive outcomes, acceptance towards modern medicine increases[27].

2.4. Disadvantages, Risks and Responses

Objectively speaking, this campaign lacks scientific basis and its origin is highly peculiar. At the time, the United States already possessed advanced bacteriological weapons deployed in certain battlefields, rendering it unnecessary to resort to such an inefficient method of attack as insect airdrops. Moreover, ordinary pneumonia vaccines were incapable of providing defense against bacteriological weapons. Furthermore, the campaign lacks effective professional guidance and from a scientific perspective, large-scale eradication of organisms should be entrusted to professional biologists who employ chemical or biological control methods. Mere extermination by humans not only proves ineffective but also risks ecological destruction. In reality, distinguishing between pests is challenging for the average person. During the process of rat extermination using poison baiting techniques, numerous cats, birds, and even children perished. Due to insufficient knowledge about biology, many individuals mistakenly regarded sparrows as harmful birds and culled them extensively which led to an increase in pest populations. It was only after the central government recognized this issue that improvements were made through repeated campaigns. Motivated by incentives and driven by patriotism, many people acted excessively fanatical. Some actively ventured into wild areas with the aim of eliminating pests on a large scale but inadvertently increased their risk of infection. There even emerged fierce competition for positions as health pacesetters[28].

These problems exist objectively, the inhumane aspect of which should be duly acknowledged; however, its positive benefits cannot be disregarded. By 1970, a significant proportion of the Chinese population had acquired a commendable level of modern medical literacy, possessed fundamental knowledge regarding disease prevention and treatment, and were no longer apprehensive towards certain medical procedures such as surgery and vaccination. The average life expectancy in China witnessed a remarkable increase from 35 years in 1950 to 66 years in 1980. During this period, there

was a substantial decline in infant mortality rate from 20 percent to 4.7 percent while parasitic diseases were effectively controlled across approximately 86 percent of districts. The incidence rates of typhoid fever, typhus, and relapsing fever all experienced an approximate reduction by about 90%, alongside an impressive surge in the number of clinics by a factor of approximately 52.7. These statistics undeniably indicate considerable success achieved through China's enduring public health campaign spanning over two decades[29].

This perception is not unique to China. Prioritizing life-saving measures through coercion is a common practice among governments in many developing countries. A case in point is the extensive polio vaccination campaign initiated by the Indian government towards the end of the 20th century. Due to limited education levels prevalent in India's vast rural areas, numerous parents harbor skepticism towards vaccines and refuse immunization for their children. In response to this challenge, the Indian government has implemented various measures including compulsory vaccination, selective dissemination of vaccine-related information, and even employing deceptive tactics in certain regions to enhance vaccine coverage. While these measures have somewhat pushed the boundaries of conventional medical ethics, they have yielded remarkable achievements in public health objectives. In 2014, India was declared polio-free by the World Health Organization (WHO), marking a significant milestone in global public health advancements[30]. Furthermore, ethical controversies arose from mass culling of rabid stray dogs in Nigeria during 2012 and enforced quarantine protocols during West Africa's Ebola outbreak in 2015; however, these actions resulted in substantial outcomes.

It is important to note that while implementing emergency measures can effectively control the spread of diseases and mitigate public health crises in the short term, they also present a range of risks and challenges. These risks include a credibility crisis for the government, potential long-term impacts on the healthcare system, and possible community resistance. For instance, during the 2014-2016 Ebola outbreak in West Africa, mandatory quarantines imposed by the government resulted in backlash from some communities who refused to cooperate[31]. This loss of credibility may also lead to future public reluctance to comply with other public health measures. In Pakistan, certain communities resisted vaccination programs due to religious reasons, and coercive actions taken by the government further intensified this resistance, deteriorating relationships between communities and authorities while exacerbating social conflicts[32].

In China's patriotic health campaign, these aforementioned risks and challenges are given significant attention by the government. They actively mobilize community resources, particularly local opinion leaders when implementing public health interventions aimed at eliminating pests. These influential figures possess high levels of trust within their respective communities which aids health agencies in effectively communicating messages and reassuring residents. By fostering transparent communication and engaging in participatory dialogue, a trustworthy relationship between governments and communities can be established. The deconstruction of cultural festivals such as Dragon Boat Festival or Spring Festival helps alleviate potential issues arising from cultural sensitivities.

3. CONCLUSION

From the 1950s to the 1970s, China achieved notable success in public health endeavors by strategically leveraging appropriate mass media channels. The crux of this achievement lies in the propagandists' comprehensive understanding of their target audience, enabling them to plan initiatives from a Chinese perspective and employ easily embraced forms of mass media for effective transmission and comprehension of key messages. In instances where conditions were particularly adverse, they prioritized lifestyle modifications; when medical professionals were scarce, they imparted simple self-healing techniques; and when faced with cultural conflicts, they endeavored to foster mutual understanding by utilizing local culture as a medium.

It is worth noting that the smooth implementation of this health campaign in China was attributed to several factors: the high level of public support for the Chinese government at that time, the trust and reverence towards leaders like Mao, and the strong organizational capacity of socialism. These factors facilitated the effective penetration of propaganda machinery into numerous underdeveloped regions and ensured successful execution. Additionally, the Cold War environment made it easier to incite public sentiment. However, it should be acknowledged that these conditions are not universally applicable nor do they currently apply to China.

Nevertheless, in certain developing countries with existing poor sanitation conditions, such approaches can be employed to mitigate dire situations. While educating people is a lengthy process, daily fatalities continue to rise. The primary objective of medical activities should prioritize saving lives above all else; therefore, if temporary measures involving coercion and deception can achieve this goal, medical personnel should not adhere too rigidly.

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