

# IN GUERRILLA CHINA



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# IN GUERRILLA CHINA

## REPORT OF CHINA DEFENCE LEAGUE

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MME. SUN YAT-SEN, *Chairman*  
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Chungking, China

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## C O N T E N T S

Madame Sun Yat-sen. <i>Letter to Friends Abroad</i> . . . . .	5
In Memoriam: <i>Dr. Dwarakanath Kotnis</i> . . . . .	8
Medical Service for China's Guerrillas <i>International Peace Hospitals</i> . . . . .	9
Medical Training Behind Japanese Lines . . . . .	26
Without Western Medicines . . . . .	30
Famine Need Not Mean Death . . . . .	34
A New and Productive Life <i>Refugee Relief and Resettlement</i> . . . . .	40
Guerrilla Industrial Cooperatives in the Northwest Border Regions . . . . .	46
Canton International Medical Service Corps . . . . .	53
Children of the Border Regions . . . . .	56
From Hongkong to Chungking <i>Report of Central Committee, China Defence League</i> . . . . .	64

# CHINA DEFENCE LEAGUE

*Chairman:* MME. SUN YAT-SEN

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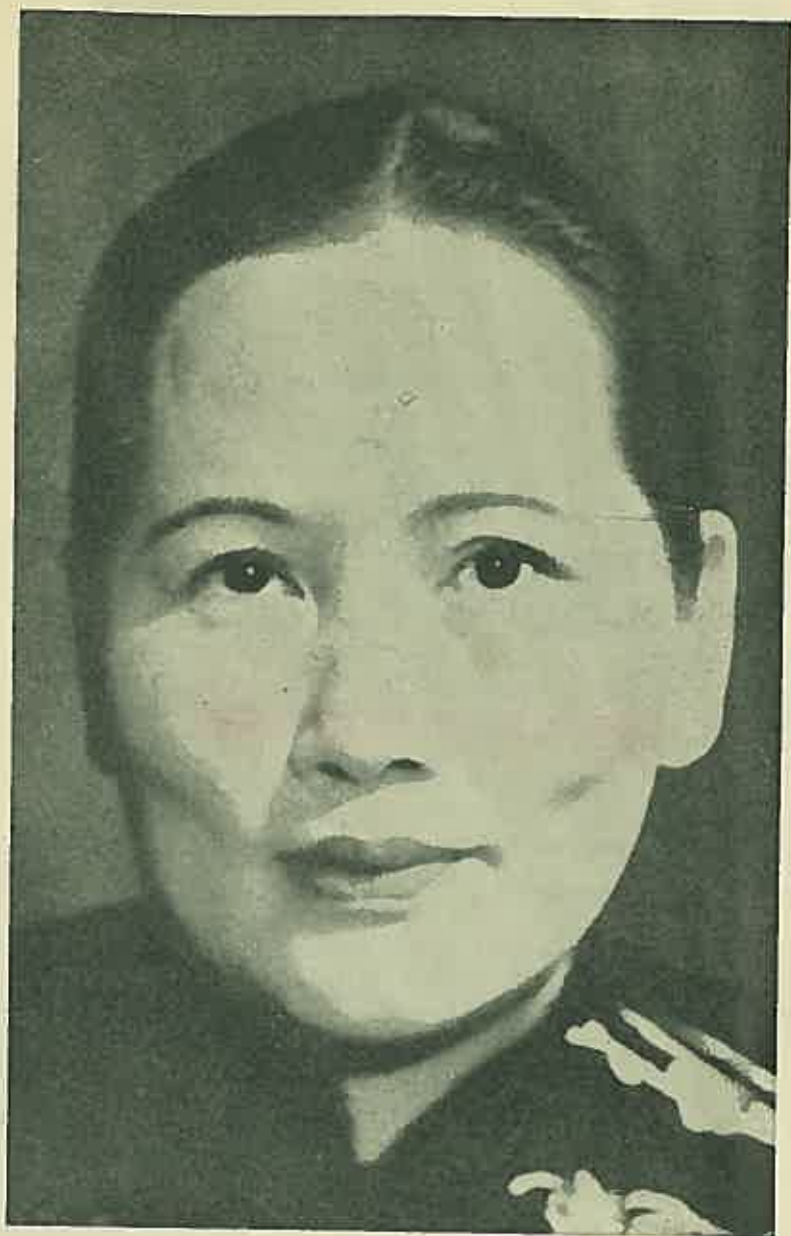
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## PURPOSE

The China Defence League was organized shortly after the outbreak of the Sino-Japanese War to give aid where the needs were greatest and to help projects not receiving assistance from other sources. With the growth of foreign sympathy and support for China, the League gradually withdrew from many of the projects it originally assisted. Its principal support is now given to medical projects, cooperative drug production, children's work, and refugee famine relief in the Border Regions—programmes receiving no outside aid other than that provided by the League. Because of the significant role played by the guerrillas in China's struggle, and because of the effective way in which the funds contributed through the League have been spent, the programs have proved more than worthy of the support given.

The China Defence League is pledged to its original purpose, and dedicated to the support of any sector of the Chinese people working towards liberation through victory over Fascism. Aiding China's fight today, the League builds for China's reconstruction tomorrow.





MME. SUN YAT-SEN

## LETTER TO FRIENDS ABROAD

Chungking, China  
September, 1943

Dear friends,

This is the third time that I have addressed you in introducing a general report of the China Defence League. I thank you for aid you have already given and appeal for your continued support of the Chinese people in their struggle.

The first time, five years ago, I asked you to help China because she was "one of the battlefields on which the great struggle of the peoples of the world against Fascist aggression and darkness has already taken the shape of open war." I then added that it was "because the Chinese people, like those of Spain, refuse to be conquered, that even the capitulation of Munich has not enabled the Fascist wave to engulf the world."

Neither you nor I could have known at that time that the people of Spain would go down fighting gloriously in the face of not only the overwhelming attacks by the enemies of all mankind, but also the incredible blindness of the Western democracies. We could not foresee that the nightmare of a Fascist victory would all but materialize, that because the world could not unite to prevent this war it would be forced to fight it on the enemy's terms, that terribly late—but not too late—the anti-Axis powers would come together and finally achieve the turning of the tide.

Today in sight of military defeat of the Fascist powers, it is more necessary than ever before that we should preserve and strengthen the unity won at such cost, that we safeguard and extend democracy, and that all peoples work together untiringly for the common interest of the common man everywhere.

The armies of China on the anti-Japanese fronts and the people's forces that, by struggle and the practice of democracy, have welded isolated guerrilla centres into strong anti-Japanese bases in the enemy's rear, still stand as the vanguard of the war against Fascism in the Far East. Now they no longer stand alone—they are fighting side by side with millions of soldiers of all nations. That is good. That is what they always believed would happen.

The best of our fighters do not expect to rest on past efforts. All they ask is that the battle be fought with maximum effect on



the whole global front. They want no exemption for themselves just because they have fought longer. They disagree sharply with those of our countrymen who think that now others can be left to win our war. They feel that our responsibility to our partners is also our responsibility to ourselves—that we are entitled to claim aid only if we use it, and all our strength, to fight harder than before.

Only in this way can China's soil be freed. Only by our own efforts can we build China as part of the new world.

Most of this report is taken up with a description of what has been done in the guerrilla areas to save our wounded and put them back into the ranks, to fight disease and hunger, to prevent allies of the enemy from undermining the struggle. Why do we stress the Border Regions? Are we advancing their claims beyond those of other parts of China and other Chinese armies? No, we are not. We stress the guerrilla areas because, although they are engaging and have engaged almost half of the Japanese forces in China, it is three years since they have received any government aid in ammunition, money, or medical supplies.

The forces that have bitten deepest into the Japanese Fascist lines in China are subjected to a "non-intervention" policy even more drastic and cruel than the "non-intervention" policy against Spain. An internal political blockade denies our guerrilla fighters doctors, surgical instruments and drugs—even those sent by friends abroad.

We do not ask preferential treatment for these forces. We ask for equality of treatment. We ask that an end be put to the practice, and to the acquiescence of others in the practice, of drawing an imaginary line through China on one side of which a soldier, wounded in the fight against Japan, is assumed to be entitled to have his wounds healed and on the other side is not.

The China Defence League is concerned entirely with relief, but with relief for a purpose. In its own field, and in its own field alone, it wants to help win the war against Fascism. When the great issue was not yet joined throughout the world, it fought against the conception of "neutral" relief and maintained that aid should go first to the fighters against aggression, who by their struggles were barring the way of those whose victory would cause such a tidal wave of suffering that not all the relief efforts in the world could cope with it. Today it stands for relief that will help the great final efforts for victory and ensure that the unity of anti-Fascist forces is maintained, that no new split be allowed to arise

to jeopardize what has been won and expose the world to new and devastating wars, both civil and international.

The China Defence League does not, and has never stood for "non-intervention." It stands for the right and obligation of all peoples to help popular struggles for freedom, and to cry a halt to those who wittingly or unwittingly open the gates to aggression and regression. It stands for the spirit that brought Dr. Norman Bethune to China, to fight and die in defense of people everywhere on the Chinese battlefield against Japanese imperialism.

Our first slogan was, "Help the Chinese people to help themselves." Today it is still the same. Help the Chinese people to help themselves—and you. Without unity in China, and in the whole anti-Fascist camp, there can be no victory. Without democracy there can be no unity. Without the people's initiative, based on understanding of the problems we all face, there can be no democracy. In the field of Chinese relief, as positive democratic action, this means the principle of equal and proportionate aid to all those who fight the Japanese invaders. Every dollar given, every voice raised towards this aim is a blow not only at suffering but at the things that have caused it and which, if we do not destroy them, will inevitably bring new seas of blood and tears in their train. There is no truer humanitarianism than this.

So we say today what we said five years ago. Relief—but relief against Fascism. Relief—but relief for democracy. Only in this way can you help the people of China—and yourselves.

With greetings,

*Sung Ching Ciang*

MME SUN YAT-SEN



DR. DWARKANATH KOTNIS

## IN MEMORIAM

**T**HIS report is dedicated to the memory of Dr. Dwarkanath Kotnis, member of the Indian National Congress Medical Mission to China. He died in December, 1942, after two years of devoted service on the guerrilla fronts. As in the case of hundreds of sick and wounded fighters for China's freedom, death came as a direct consequence of the internal blockade and the fatal lack of drugs. Hsiao San, a noted Chinese poet, wrote these words in his memory:

I am not particularly fond of writing about death; but the death of this man has special meaning. It is a proof — a proof that internationalism is not just a name but a thing of flesh and blood.

Dr. Kotnis worked under the most difficult conditions at one of our anti-Japanese fighting bases. Under the banner of internationalism and the struggle against the enemies of mankind, he fought until his last breath.

Dr. Kotnis died at his post. We shall remember him and miss him always.

\* \* \*

Dr. Kotnis lies buried beside Dr. Norman Bethune at the foot of the mountain range that divides West Hopei and North Shansi. Symbolically near, stands the Heroes' Memorial bearing the names of more than 25,000 fighters who sacrificed their lives for the liberation of China.

Canadian, Indian and Chinese, these determined fighters for the right of all peoples to shape their own lives lie buried in earth that has been twice reconquered from Fascism. Around them, on every side, men and women work to build and prepare themselves for further struggle in the cause for which they gave their lives.

## MEDICAL SERVICE FOR CHINA'S GUERRILLAS

### The International Peace Hospitals

**T**HE most extraordinary hospitals in the world are the International Peace Hospitals in China's Northwest Border Regions.

These hospitals, established and maintained mainly by funds from the United States, Canada, and England, are located at strategic points in the so-called "Border Regions." Contingent to and behind enemy lines, these regions comprise approximately 600,000 square miles of territory recaptured from the Japanese by Chinese guerrillas in some of the bitterest campaigns of the war. Although the Japanese control the principal cities and communication lines, the vast stretches of countryside lying between the captured points are firmly held and defended by guerrillas. Under their leadership, some 52,000,000 Chinese living in the Border Regions are organized for total mass resistance and participate in local democratic governments of their own making. For nearly seven years, armed almost entirely with material taken from the enemy, they have immobilized more than 60 percent of the total number of Japanese troops in China and accounted for 40 percent of the enemy's casualties.



BOMBPROOF BASE HOSPITAL FOR GUERRILLA SICK AND WOUNDED



The International Peace Hospitals serve both civilians and soldiers. Although there are but four hospitals with a total of only 4,000 beds, they touch far greater numbers of the population than their capacity would indicate. Serving as bases, the hospitals are centres from which long lines of casualty clearing stations, field hospitals, and mobile surgical units radiate out to the fighting fronts. This network system is especially adaptable to guerrilla warfare and to the lack of facilities and personnel typical of the regions. Also connected with the hospitals are medical training schools, outpatient departments, and two drug factories. Added significance is given to the medical work through these attached services. In each outpatient department, for instance, an average of 200 "walking cases" suffering minor injuries and ailments are cared for daily, and through these clinics pioneer work in public health and epidemic prevention is being carried out.

### **Guerrilla Mobile Units**

Through the mobile surgical units that operate out of each of the four hospitals, guerrilla wounded receive treatment shortly after being injured. Dr. B. K. Basu, member of the Indian National Congress Medical Mission to China, describes the work of the units during recent heavy fighting.

"When the enemy approaches the hospital area, a number of medical workers move forward in units organized on the pattern introduced by Dr. Norman Bethune. Each unit has a personnel of 27 including a surgeon, two assistants, one pharmacist, four nurses, and 15 guards and stretcher-bearers. Instruments and drugs are loaded on a pack-mule. The members themselves walk, carrying personal effects in packs on their own backs. Arriving at a point designated by the military commander, the unit enlists the aid of the local volunteer Peasants' Committee which provides two well-lighted and ventilated rooms. A long table is found or improvised for operations, and the peasants also provide a stove for sterilization. During active warfare, operating points are established not more than three miles behind the firing line. This is according to a rule laid down by Dr. Bethune who based all his work on the principle that losses increase in direct proportion to the length of time before medical attention is given.

"Transportation of wounded from the front to the mobile unit and from there to the base hospital is done by the peasants, who have a permanent volunteer organization for this purpose. Wounded are carried in relays, and those sent back to base hos-





"DOCTORS GO TO THE WOUNDED"

pitals, a day's march or more away, are always accompanied by a trained nurse. Women's organizations along the line of march provide food and drink for both wounded and bearers."

During the height of the campaigns in which Dr. Basu worked with mobile units, from 200 to 300 patients a day passed through the hands of each chief surgeon working in the field. Actually these units are geared to handle only one regiment under active conditions, but facilities and personnel are so scarce that each unit has been called upon to serve as many as three regiments at a time.

#### In Caves and Huts

The hospitals themselves are unlike any Western institutions because of the peculiar conditions existing in the Northwest and the scarcity of supplies and equipment. For example, there are the crude cave wards of Bethune Memorial Peace Hospital, dug deep into the loess cliffs that overlook the bomb-shattered city of Yanan in Northern Shensi. Although it has only 400 beds and is the smallest of the four International Peace Hospitals, it is an extremely important unit of the network. The best facilities and personnel are concentrated at this centre where much of the

corrective treatment and complicated surgery on old casualties gathered from all fronts is done. Furthermore, with the Yen'an Medical University situated nearby, it serves as a reservoir for qualified medical workers urgently needed in all guerrilla bases.

Bethune International Peace Hospital in West Hopei and the Southeast Shansi International Peace Hospital, on the other hand, are housed in scattered brick and mud peasant huts converted into wards, each with its retinue of ox-carts and mule-teams standing ready for instant evacuation in case of enemy attack. These two hospitals, located in areas of constant guerilla warfare behind enemy lines, are organized for maximum mobility.

Prof. William Band of Yenching University, who escaped from Peiping after Pearl Harbor and for a period lived and taught in the guerrilla regions, visited Bethune International Peace Hospital in 1942. He wrote: "In all units we were amazed at the ingenuity with which the crudest facilities were effectively employed. Beds were doors from ruined houses, supported on bricks and covered with straw. Drugs, where possible, were in powdered form and kept in canvas pockets on the wall. Bottles were kept in folding boxes so designed as to be ready for mounting on mule back as soon as the lid was closed. Everything was designed for instant departure and rapid mobility."



VOLUNTEER PEASANT CORPS SERVES AS AMBULANCE UNIT

## Guerrilla Doctors

The staffs of these remarkable hospitals are no less unusual than the institutions which they serve.

When Dr. Bethune first came to the Border Region in 1938, he was the only foreign doctor in the entire guerrilla territories, and the only fully qualified physician serving an area of more than 13,000,000 population. Since then, in the tradition of international aid which he symbolized so well, other doctors have come from all over the world as well as from various parts of China to this most active of fronts.

Guerrilla doctors work 16 hours a day and more, enjoy no material comforts and get no material rewards. Dressed in the padded blue cotton garments of the peasants, they live in caves or huts, and eat soldiers' rations of millet, rice, and a few fresh vegetables and fruits. Because medical supplies have not been allowed into the Border Region for more than three years (except for a small amount sent in June, 1943) doctors of the International Peace Hospitals have to rely upon their own ingenuity and the meagre resources at hand. To care for the thousands of sick and wounded, locally produced Chinese medicines are used in place of Western drugs. Operations are done without anesthetics, while bambo pincers, wooden retractors, and scalpels made from parts of Japanese planes shot down in battle have been fashioned by the doctors themselves to replace broken or missing instruments.

There are only two X-ray machines in the entire area. One of these, serving the Bethune International Peace Hospital in West Hopei, is kept 20 miles from the central hospital unit for safety against enemy attack. For the other, belonging to the Bethune Memorial Peace Hospital in Yen-an, there is no film, its supply having been exhausted early in 1942.

Before Pearl Harbor, materials were purchased with the aid of foreign friends in such Japanese-held cities as Tientsin and Peiping, then smuggled through the enemy lines into the Border Regions. One of the last of such expeditions was waylaid by the Japanese and eight lives were lost in bringing the shipment through. After December 7, however, the Japanese army requisitioned all medicines and equipment in the occupied areas. Until the internal blockade can be lifted, the International Peace Hospitals are dependent upon the small stocks of medicines that can be captured by guerrillas on the battlefield.

In spite of all these handicaps, the International Peace Hos-



pitals, working under the 18th Group Army Medical Service, continue to grow and expand with the guerrilla armies they assist. Dr. B. K. Basu wrote the following impressions after a visit to the Southeast Shansi branch during 1942:

"The outstanding fact one observes is the relationship between doctors and their patients. The medical staffs regard the wounded and sick as heroic comrades who by their courage and fighting skill are advancing the cause of national liberation. In my travels over all guerrilla fronts, I never saw or heard of a single wounded or sick man who was neglected or overlooked. Every human being devoted to the country's cause, whether high officer or rank and file fighter, is regarded as equally precious. If one civilian is shod and dressed, it means that every fighter in the million strong army is shod and dressed first. Moreover, the sick and wounded come first where better food, clothing and comforts are concerned. There are many cases of medical personnel lending their own overcoats and blankets to patients when bedding was insufficient or lacking altogether."

#### **General Health Conditions**

Malnutrition is general in these regions, and is recognized as the chief predisposing cause of diseases suffered by both soldiers and civilians and the slow recovery from even minor ailments and



**FIELD HOSPITAL IN A CONVERTED TEMPLE**

injuries. Such diseases as malaria, typhoid, typhus, relapsing fever, influenza, intestinal parasitic diseases, and dysentery are prevalent, but have been brought under partial control by extensive public health education and by the hospitals' drives for epidemic prevention. Malaria continues to be the great scourge of the country and in some military campaigns has claimed as many victims as enemy bullets. Since the imposition of the internal blockade three years ago there has been no quinine to combat this devastating illness nor the essentials required for fighting diseases.

### **The Hospitals**

Each of the four International Peace Hospitals has its interesting history. Several years ago the branch at Yen-an was reorganized as a model for the other hospitals, and it is therefore described in greater detail below. All four hospitals, however, have played a part in the pioneer struggle of bringing medical care to the fighting people of the Border Regions whose determination and sacrifice have prevented the enemy from consolidating its power in these strategic areas.

#### **Bethune Memorial International Peace Hospital**

*Location:* Liu Wan Chia Kou, near Yen-an, in the Shensi-Kansu-Ninghsia Border Region.

*Number of Beds:* 400.

*History and Description:* The hospital was first established in 1938 with 180 beds housed entirely in caves but was reorganized in January, 1940, as the rear base of the International Peace Hospital network and was named in memory of Dr. Norman Bethune. The smallest of the four hospitals, it is nevertheless an extremely important unit of the network. The highest training standards are maintained at Yen-an, and qualified workers are sent out from here to all guerrilla fronts. In addition, all complicated surgical cases and old casualties from hospitals behind the Japanese lines are sent to this unit for corrective treatment. The hospital carries on extensive public health education to lead people from superstition and reliance on antiquated, harmful medical customs to an understanding of the benefits of modern sanitation and medical science. Exhibits, dramatic skits, lectures, posters, and pamphlets are all used to promote healthy education of every kind.

The hospital is organized into three sections:

1. Main medical and surgical section with 250 beds.



2. Convalescent home with 100 beds.
3. Outpatient. Department with six clinics, and an emergency ward of 50 beds.

*Main Medical and Surgical Section:* Complications from old wounds and acute or difficult cases beyond the capacities of other medical institutions are treated here. The most common surgical cases, after ankylosis and complications from old injuries, are appendicitis, intestinal obstructions, surgical tuberculosis, osteomyelitis, and tumors. Medical cases consist mainly of respiratory, kidney, heart, and blood diseases.

*Convalescent Home:* The caves in which the entire hospital was originally housed now serve as a convalescent home where patients from the overworked medical and surgical sections are sent for observation and recovery. Senior physicians and surgeons from the main hospital visit the home regularly and are on call for any emergencies that arise. The resident staff of the home consists of six "doctors" whose training though incomplete by Western standards has been fortified by long years of practical experience. Their duties include nursing care, observation, and the administration of routine treatment as prescribed by qualified doctors from the main hospital.

*Outpatient Department:* The Outpatient Department is located outside the city in the University district of Yen-an. Its buildings consist of one-story stone barracks, and 40 caves and mud huts. Separate wards are maintained for eye, ear, nose and throat cases, for obstetrical and gynecological patients, and for emergency cases. Yen-an residents seeking admission to the main hospital for treatment are first examined in the outpatient department.

In general, the function of this department is much more than its name implies. It is a small hospital in itself, a training centre for internes from the neighboring Yen-an Medical University, and a dynamo of health work in the city and its surroundings—especially among the 15,000 students of the various cultural institutions of Yen-an. An example of the Outpatient Department's flexibility of function is the fact that during a typhoid epidemic which threatened to assume dangerous dimensions in 1941, the OPD staff mobilized squads of volunteers to convert all the city's latrines to deep, safe trenches, to clean up breeding places of flies, and to flyproof all kitchens in the settlement. Formerly an invariable summer disease in Yen-an, typhoid has now been controlled so that its occurrence is rare.



OUTPATIENT CLINIC: BREAST ABSCESS DRESSING



OBSTETRICAL WARD: CAESAREAN IN PROGRESS

The Outpatient Department has a total staff of 93 members, and is organized into six clinics as follows:

1. Medical, Venereal, and Skin Clinic: This clinic treats an average of 120 persons daily. The chief medical complaints are tuberculosis, bronchitis, and gastro-intestinal troubles. Skin and venereal diseases are difficult to treat because of the lack of drugs, but various substitutes have been devised. Vaseline was badly needed for making ointments and after experimentation some was obtained from locally refined oil. It was also found that mutton fat could be substituted as an ointment base.

2. Surgical, and Eye, Ear, Nose and Throat Clinic: Approximately 100 patients are treated daily and an average of two operations is performed. Because the eye, ear, nose and throat work has suffered from the lack of specialized instruments, all kinds of substitutes have been pressed into use. For example, one of the doctors owned a small pair of long-shafted scissors which he used for trimming his moustache. One day the head of the clinic spied them and since then they have been used for nose and throat operations. The Border Region heavy industry workshop made tonsillectomy instruments from drawings supplied by the surgeons. These were useful for only one or two operations because the local steel is too soft and there are no facilities for plating. In spite of these obstacles, however, successful surgery was accomplished during 1942 and 1943, which included operations inside the eyeball, cataract, irredectomy, enucleation, and trephining.

3. Gynecological Clinic: The most numerous cases are those suffering from leucorrhoea which is common in the Boarder Regions—especially among young girls. The chief of the clinic has studied these cases over long periods and considers them a result of malnutrition as well as primitive hygiene habits.

4. Obstetrical Clinic: Several deliveries are handled here daily, and Caesareans have been performed both in the obstetrical ward of the clinic and at the main hospital. Outstanding work is also being carried on among the local peasant women who are gradually being weaned from the practice of engaging old-style midwives.

5. Post Natal, Maternity, and Well Baby Clinic: Working closely with the Obstetrical Clinic, this clinic also does excellent work among the peasant mothers in the region. After returning home, mothers delivered in the hospital are visited by clinic staff members for a stipulated period of time.





CHILD CARE CLINIC: HEALTH FOR GUERRILLA WAR BABIES

6. Emergency Clinic: Doctors in charge of the various Out-patient Department clinics are on call for servicing this department, and 12 internes from Yenan Medical University are constantly attached to it. Cases of all kinds are handled.

*Staff:* The superintendent of the entire hospital is Dr. Lu Chichung, graduate of the China War Ministry's Military Medical College. He is also in charge of the surgical division of the Main Medical and Surgical Section. The medical division is headed by Dr. Huang Su-chin, graduate and former staff member of Peiping Union Medical College. The administrative head of the Out-patient Department is Dr. Chu Lien, a woman physician with long experience in private practice in North China. The clinics under her direction are headed by the following:

1. Dr. Ma Hai-teh, an American physician who has taken a Chinese name: Medical, Venereal and Skin Clinic.
2. Dr. Li Ting-tze, surgeon, also on the staff of the main hospital: Eye, Ear, Nose and Throat Clinic.
3. Dr. Bick Tiao-wen, a Chinese whose family lived in Malaya for generations and who served as a medical officer in the Spanish Republican Army: Gynecological Clinic.

4. Dr. H. Lee, trained in Shanghai and with much experience in clinical work: Obstetrical Clinic.
5. Dr. Eva Sandberg Hsiao, a Swedish pediatrician: Post Natal, Maternity and Well Baby Clinic.

Other senior staff members of the main hospital include:

Dr. Tang Chuang, general surgeon trained at Hunan Medical College.

Dr. Ma Lu, trained at Shanghai Medical College and now acting chief of gynecology obstetrics.

Dr. K. Fang, a Korean internist.

Dr. I. Orlov, general surgeon trained in the U.S.S.R.

Graduates of Yen-an Medical University serve as medical assistants in the hospital and the nurses on the staff are trained by the University or by the Chinese Red Cross Medical Corps. In all, there is a total of 300 staff members, including laboratory workers, dispensers, ward boys, administrative workers, and servants.

*Major Problems and Needs:* It can be readily seen that the scope of treatment is severely limited by the shortage of medical instruments, equipment and drugs, a direct result of the blockade.

1. Anesthetics are so scarce that they can be used only in major operations.
2. For almost two years there has been only one spinal puncture needle in the whole Shensi-Kansu-Ningshia Border Area. This was kept in the hospital and had to be lent out until additional needles were sent in with the recent China Defence League shipment.
3. Specialized instruments are lacking for eye, ear, nose and throat work, and there is a shortage of surgical instruments for general work. There are no facilities for manufacturing replacements.
4. Because the supply of X-ray plates was exhausted a year ago, the one X-ray machine in the area can be used only for screening. Soon fluoroscopic examinations will also be impossible as there is no replacement for the one X-ray tube now being used.
5. Some electrical apparatus for physical therapy in the hospital has been made locally by the 18th Group Army's Communication Department but is far from adequate.
6. There is a clinical laboratory with one microscope and



some reagents, and thus ordinary blood, urine, sputum, and stool examinations can be made. There is, however, no equipment for Wasserman and Kahn tests, or for blood chemistry.

### **Bethune International Peace Hospital**

*Location:* West Hopei, in a village 30 miles west of the Pei-ping-Hankow Railway in the Shansi-Chahar Hopei Border Region.

*Number of Beds:* 1,500.

*History and Description:* This was the first of the hospitals to be founded by Dr. Bethune. Its original location was in Wutaishan but it was forced to move its present site during a concerted Japanese mopping-up campaign in 1940. The hospital is compelled to shift several times a year during regular enemy campaigns but returns to its base when the Japanese are driven back. Since the hospital has been at its present location, advancing enemy columns have forced it to move eight times; and since it was first founded it has moved more than 20 times. Evacuations are so thoroughly organized that the entire hospital with its equipment and patients can be moved to mountain strongholds on a half-hour's notice. Bearers, litters, and mules are kept in readiness at all times and the local peasants' volunteer transport association is ever on the alert. Although there have been numerous casualties among staff members, the hospital boasts that in all five years of front-line existence not a single patient has ever been abandoned to the enemy.

The hospital is organized around a large central unit with 200 beds and two operating theatres to which all major surgical and complicated medical cases are sent. Minor injuries and ailments are treated in attached smaller units.

Since there are hot sulphur springs scattered throughout the Shansi-Chahar-Hopei Border Region, patients with skin diseases are referred to this hospital for treatment from all other bases.

During 1941, more than 450 general operations and over 800 eye operations too difficult for the other branch units to handle were performed at the central base. An outpatient department in which an average of 100 patients with minor ailments and injuries are treated daily is run by the hospital staff members. Mobile units are used extensively in this hospital as it is close to one of the most active fronts.

*Staff:* The present director of the Bethune International Peace Hospital is Dr. Tuang Hsi-peng, a graduate of Tokyo Imperial University and former professor of diagnostics of Hopei

College. He is the successor of Dr. Dwarkanath Kotnis. Assisting Dr. Tuang as senior members of the staff are 15 other qualified doctors, all of whom combine teaching at the nearby Bethune Medical College with their hospital duties. There is one foreign member on the staff—Dr. M. Frey, a Vienna-trained anti-Fascist, who escaped into the guerrilla regions from Japanese-held Tientsin.

*Major Needs and Problems:* Intensive Japanese military campaigns against the guerrillas in this area have placed a tremendous burden of civilian and soldier care upon the hospital. The burden has had to be faced with an insufficient number of doctors and acute shortages in all types of hospital supplies. Among the more pressing needs are the following:

1. Damaged instruments have not been replaced for over three years.
2. The one portable X-ray unit in this region is kept 20 miles from the hospital's central unit for safety against enemy attack.
3. All wash basins are broken, and so earthen vessels or gasoline tins are used. There is no autoclave or sterilizer of any kind; instead a crude stove, customarily used in steaming Chinese bread, is used.



SCIENCE VS. SUPERSTITION

4. Supplies of Western drugs were completely exhausted long ago, and the Chinese medicines produced by the local drug factory have only limited efficacy. Routine radical treatment of malaria, dysentery, relapsing fever, typhus and kal-azar—all prevalent—cannot be given.
5. Surgical drugs and appliances of the most urgent and widespread use cannot be manufactured locally because of the lack of materials and equipment.
6. Such important items as quinine and even iodine are completely unobtainable.

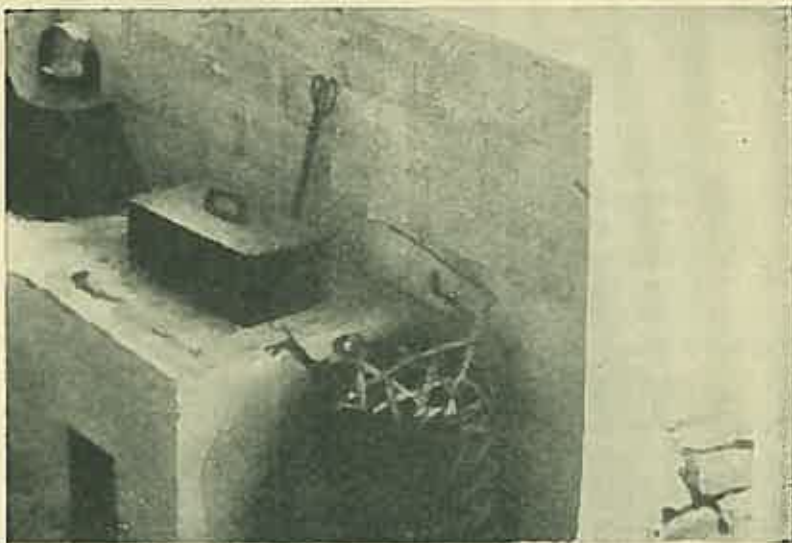
#### **Southeast Shansi International Peace Hospital**

*Location:* Scattered through several villages near Liaohsien, Southeast Shansi.

*Number of Beds:* 1,000.

*History and Description:* With the assistance of Dr. Richard Brown, a Canadian missionary-surgeon, the Southeast Shansi branch was established in 1939. Originally located in brick buildings in Liaohsien, the entire hospital was destroyed, when only a few weeks old, by Japanese who captured the town. Liaohsien was later retaken by Chinese guerrillas and the hospital was re-established in scattered units, its beds housed in brick and mud huts in a number of neighboring villages. These converted huts, like the smaller units of the West Hopei branch, are furnished with k'angs, the heated beds typical of the region. Mattresses are made of straw, and bedding is simple in the extreme. Because of its proximity to Japanese garrison zones, the beds in this hospital are never empty, the few mobile medical and surgical units seldom rest, and the Outpatient Department is continually overflowing with civilians and soldiers. As in each of the International Peace Hospitals the government-imposed blockade has caused much unnecessary hardship and suffering. Although here, as in other guerrilla bases, all possible efforts have been made to manufacture supplies from the raw materials at hand, they are of the most primitive character and largely confined to dressings, rice alcohol and Chinese herb medicines.

*Staff:* The staff of this hospital is necessarily large because of the many scattered units. The 876 members include various types of medical personnel, servants, orderlies and transport corps. The director of the main hospital is a former Japanese army surgeon who was taken captive in 1940, and who volunteered his



PRIMITIVE EQUIPMENT — RESULT OF A THREE YEAR BLOCKADE

services to aid the sick and wounded. Superintendent of all units is Dr. Niu Chun-sheng, graduate of Harbin Medical College. One unit is headed by Dr. Hans Mueller, a German anti-Fascist, who took his degree at Zurich and has worked in the guerrilla regions since 1939.

*Major Needs and Problems:*

1. Although carefully rationed and used only in the most urgent cases, all supplies of Western drugs were exhausted more than a year ago. The locally produced Chinese medicines are useful to only a limited degree.
2. Treatment of the very large number of gunshot wounds brought into the hospital must be accomplished without either anesthetics or X-ray, both completely lacking. Wounds are extremely ugly because of the Japanese use of dum-dum bullets which flatten out in transit and smash bone to fragments when they hit.
3. Surgical instruments are inadequate and the few on hand should be repaired, replated or replaced.
4. Antiseptics are urgently needed as they cannot be manufactured from local raw materials.



### North Kiangsu International Peace Hospital

The fourth branch of the International Peace Hospitals is located in Northern Kiangsu, but since the outbreak of the Pacific War no direct reports have been received from it. It is known that several Chinese and foreign doctors who fled Shanghai late in 1941 are now working with this 1,000-bed branch of the International Peace Hospital network.



SENIOR STAFF — BETHUNE INTERNATIONAL PEACE HOSPITAL

## MEDICAL TRAINING BEHIND JAPANESE LINES

### Bethune Medical College, West Hopei

"The mastery of technique in the Medical Service is the learning and using of the technique of healing our wounded comrades who have fought for us, and for whom we—in return—must fight. And the enemy we fight is death, disease and deformity. . . .

"We must learn good technique because good technique in medicine and surgery means more quickly cured patients, less pain, less discomfort, less death, less disease, and less deformity. And all these things are our job. . . . Are we doing it as well as we might?

"It is the duty of a doctor, nurse and orderly to make our patients happy, to help them in their fight back to health and strength. You must consider each one as your own brother or father, for he is in truth more than either—he is your comrade, and must come first in all things. If you do not consider him above yourself in all things there is no place for you in the Medical Service. In fact there is no place for you in the Eighth Route Army at all."

NORMAN BETHUNE, *Speech at the opening of the International Peace Hospital, August 15, 1938.*

**T**HESE words of Dr. Bethune are a key to the aims of the medical college that now bears his name. From the very beginning Dr. Bethune recognized the importance of training personnel. Not one good doctor but many, not a few trained nurses but thousands, were needed. Throughout the crowded months of his work in North China, Dr. Bethune made time, after hours devoted to surgery and during extensive trips to the front, to teach groups of students, to work out detailed curricula, and to write two complete texts on battle surgery and the organization of medical services adapted to guerrilla conditions.

In the five years that have passed since he organized the first group of 18 students there has gradually developed the Bethune Medical College with close to a thousand now in training. The College was inaugurated in 1940, and the original International Peace Hospital itself has become the training center for graduates who have completed an intensive three-year course.

Professor William Band visited the school and wrote the following impressions:

"There are about a thousand students, 35 percent of whom are girls. The students are drawn largely from the local peasant population and given intensely practical training. . . . At the beginning the urgent need for nurses in the field prompted the College to graduate its first class with only eight months' training. The second class was given one and a half years, and the present class will have received three full years of training before it is sent out. Military surgeons, pharmacists, and nurses are now being trained. . . . Already 700 medical workers have been sent out from the College to army units throughout the border districts. There is hardly a valley that does not have its medical officers. To be sure, they are often little more than nurses, but they know how to care for wounds, they know the standard treatments for the most common maladies . . . and they can recognize when a thing is too serious for them, requiring hospitalization farther back. There are now branch military hospitals in every sub-division of the Shansi-Hopei-Chahar Border Region with at least one qualified doctor in charge who either has outside training or is from the Bethune Medical College. In addition the Central Hopei and Pinghsi (West of Peiping) guerrilla areas now have their own training schools."

These last mentioned schools consist of short term medical training courses being given in areas recently recaptured from the Japanese. They are regarded purely as an emergency measure until adequate training facilities can be established or the personnel shortage sufficiently eased. Graduates of these courses who show proficiency in their work are sent to the International Peace Hospital Schools and other centres for further training. In addition, doctors who have worked in hospitals or in administrative positions for long periods are given one year refresher courses. Such courses are also given at the front. These classes have proved to be an excellent means of improving the technical level of doctors in the field.

All tuition for Bethune College is free and students are given food, clothing, sleeping quarters, books, and pocket money allowances. Graduates must serve a period of internship before going into regiment or battalion medical corps or serving in district civilian health offices. The majority go into front-line work, and even as students do practical battlefield duty. Several students worked with mobile medical units that operated at the front during the Hundred Regiments Campaign in 1940.

*Staff:* The president of the Bethune Medical College is Dr. Chang I-Chen, who with the assistance of Dr. Frey, Dr. Kotnis



ANATOMY LECTURE, GUERRILLA STYLE

up to his death, and 15 other International Peace Hospital staff physicians, serves as the faculty. The staff has recently established a Medical Advisory Board. Its function is to give advice on technical matters to various health departments and individual doctors, to carry on research in local problems, and to publish a journal to educate medical workers throughout the Shansi-Chahar-Hopei Border Region.

*General Condition:* The college is using crudely drawn anatomical charts made by a wounded soldier whose hidden talents were discovered in the hospital's occupational therapy workshop. The main difficulties faced by the school are lack of educational facilities such as up-to-date medical texts, current periodicals, laboratory materials, and an adequately equipped hospital for practical training.

#### **Southeast Shansi Branch of Yen-an Medical University**

Well trained personnel reinforcements for the medical staff of the International Peace Hospital and field and public health hospitals throughout the region are available from among gradu-



ates of the Southeast Shansi Branch of the Yen-an Medical University. The branch was established four years ago, and like the University, has the highest standards of all schools in the guerrilla regions. Doctors fully qualified by international standards are graduated, as well as nurses and military surgeons. A full five-year course of theoretical and practical training is given. Recent reports indicate that there are about 100 students now in training. All International Peace Hospital doctors teach at the school and students do their internship at the hospital.



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## WITHOUT WESTERN MEDICINES: DRUG PRODUCTION AND TRAINING

### **Eighteenth Group Army Drug Manufactory**

....*Location*: Shensi-Kansu-Ninghsia Border Region.

*History and Description*: The factory was established early in the Sino-Japanese war to ensure a sufficient supply of drugs to the forces fighting in the rear of the enemy. It was founded at a time when importation of drugs from abroad was still not too difficult, and the Border Regions were accessible. But even then it was recognized that much could be saved by the importation of bulk drugs which could be divided into doses, pressed into tablets on the spot, and packaged. Moreover, staff workers began immediately to investigate local resources with a view to finding complete substitutes for some imports.

This foresight has brought its own rewards. The imposition of the heartless internal blockade in 1940, and the very great difficulty of import from abroad after Pearl Harbor did not find the Army entirely unprepared. Although certain items of the very first necessity, such as anesthetics, antiseptics and the sulfa drugs were entirely cut off, the manufacture of such staples as gauze, sterile cotton, bandages, medical alcohol, sodium bicarbonate, sodium nitrate, several sulphur compounds, calcium carbonate, and a number of Chinese drugs of proved efficacy had already been developed. In addition, the making of smallpox vaccine was started in 1941, though production was hampered through lack of proper grinding apparatus. The vaccine turned out is effective but crude, causing a violent primary reaction. Unfortunately, other vaccines cannot be produced because of a lack of culture media. Another difficulty is that locally manufactured glass cannot stand sterilization heat, making it necessary to preserve old injection ampoules which are cleaned and refilled.

The factory is housed in stone buildings. It is equipped with primitive, locally made machinery that includes sterilizers, driers, tablet-pressing machines and chemical apparatus.

Therapeutic products are either compounded or entirely manufactured at the plant. They have included, in the Western medicine section, the following: camphonasin, novocain, morphine chloride, strychnine chloride, ergotin, cacotylate, Mutterhorn, calcium chloride, glucose, calcium-glucose, ephedrine chloride,



EPIDEMIC PREVENTION — AN IMPORTANT MILITARY OBJECTIVE

sodium glycerophosphate and tryptaflavin for injection, iron-arsenic, quinine, scopoline, sodamint, mercury chloride, salmlax and other tablets, and several types of tinctures. More than 20 compounds are manufactured in the Department of Chinese Medicine.

Production during the half year of 1942, amounted to 70,000 individual packets of essential medicines for field use; 8,700 pounds of powders and tablets; 6,600 ampoules for injection; 2,100 pounds of tinctures; 500 pounds of fine cotton; 1,400 pounds of fine gauze; and 3,000 pounds of sanitary products such as tooth-powder and soap. The factory correlates its training and research program with that of the School of Pharmacy of the China Medical University housed in adjacent buildings. In this way students are able to combine practical work and theoretical study.

A laboratory connected with the factory engages in research into the concentration and dosage of Chinese drugs and the discovery and reduction of local raw materials. Attempts are being made to grow digitalis and other medicinal plants in experimental gardens connected with the laboratory.

The Drug Manufactory is the model for units scattered through all the main guerrilla bases behind the enemy lines. Similar institutions exist in Southeast Shansi, Northeast Shansi, West Shansi, West Hopei, Central Hopei, and North Kiangsu. In most cases they are attached to regional medical administrations established by their respective civil and military medical agencies.

*Staff:* The director of the Drug Manufactory is Dr. Li Weichin who was trained in the Central Government's War Medical College. The chief pharmacologist is Lung Chi-yin, trained at the College of Pharmacy at Peiping; the chief chemist is C. Lee, who got his M.Sc. from a university in Shanghai. There is a staff of 167 which includes administrative workers, technicians, apprentices and general workers.

*Training:* The pharmacy course conducted by the Drug Manufactory takes one and a half years to complete. More than 50 students are now in training, one-third of whom are women. Following graduation, there is a six months' period of probationary work in hospital dispensaries. Graduates then receive independent appointments. A majority are assigned to base hospitals and medical units at or near the front; a few remain at the factory as technicians or research assistants.

During training, all students are supplied with free tuition, lodging, food, and clothes. A small cash allowance which is increased in accordance with price rises is given. In the summer of 1943, this allowance amounted to about C. \$40 or US \$2 per month.

### **Yenan Drug Cooperative**

*Location:* Yenan, Shensi.

*History and Description:* This factory was established in 1939. Like the 18th Group Army Drug Manufactory, it is equipped with primitive hand machinery much of which was made locally. It is housed in stone buildings. Loess caves are used as quarters for the staff. Although it was established five years ago as a Unit of the Chinese Industrial Cooperatives' National Network, the Yenan depot has received no support from the central organization for over three years. The main work of the cooperative is the manufacture of dressings, medicinal soaps and Chinese medicines.





HUNGER

## FAMINE NEED NOT MEAN DEATH

"A report that in spite of all relief 40,000 persons die of starvation daily in Honan province was received in New York this week from the Rev. Mr. Russell B. Nelson of the Augustana Lutheran Synod.

"In a recent letter, Bishop Megan, SVD, Catholic Bishop of the Sinsiang Vicariate, reported to the American Advisory Committee that . . . famine would not have been serious if the countryside had not been drained of the wheat crop in the form of taxes.

"He added that this demand was so serious that some Hsien (districts) offered the whole wheat crop to the provincial government on condition that all other taxes be cancelled. This offer was refused, and many counties found themselves without sufficient crop to pay the land tax in kind. In many instances, the peasants sold land, homes and oxen to meet the government requirements. The government finally reduced the tax from 6,000,000 sacks to 4,000,000."

SHANGHAI EVENING POST AND MERCURY  
*American Edition, New York, June 4, 1943*

"My notes tell me that I am reporting only what I saw or verified; yet even to me it seems unreal; dogs eating human bodies by the roads, peasants seeking dead human flesh under the cover of darkness, endless deserted villages, beggars swarming at every village gate, babies abandoned to cry and die on every highway. Nothing can transmit the horror of the entire great famine in Honan province . . . Most terrible of all is the knowledge that a famine might have been averted. . . ."

T. H. WHITE in *TIME Magazine*  
*March 22, 1943*

**T**Hese stories tell only of conditions in the unoccupied districts of Honan Province but the famine was not confined to these districts nor to the one province which has given the disaster its name. The full extent of the catastrophe, geographically and in loss of life, will not be determined until the end of the war, but refugees from Japanese-occupied regions report that the famine areas stretch thousands of miles—all the way from Honan to Shantung and the coast. They say that conditions are worse than any in living memory.

In the guerrilla regions alone has the famine been combatted in the only way such a catastrophe can be fought—democratically,

by the people themselves. Only in these regions has it been shown that while crop failure inevitably means undernourishment and privation, there is no reason why it should spell death for millions.

Here is a report on how the people of the guerrilla areas fought hunger—and won!

### Conditions in the Guerrilla Districts

Honan province has a total of 110 hsien (districts). Of these all but eight are affected by the famine with the gravest conditions centering in Middle and Northern Honan along the Yellow River and the Lunghai railway. During 1942, in the province as a whole, only 30 percent of the summer wheat and 20 percent of the fall wheat was harvested, but in two districts for instance, less than one percent of the normal crop was gathered.

Of Honan's 110 districts, 10 are completely occupied—and 71 entirely unoccupied—by the enemy. The remaining 29 districts fall into the category of guerrilla areas. In these, the Japanese sometimes hold the district seats, but the countryside is firmly held by Chinese guerrillas who exercise civil control through a central administration known as the Hopei-Shansi-Honan-Shantung Border Government. Units of the 18th Group Army form the core of guerrilla resistance in these districts, which are among the most seriously affected by the famine.

Aid is being given to Honan's unoccupied districts through existing relief organizations but the guerrilla regions were unassisted until June, 1943, when—in response to an appeal by Mme Sun Yat-sen—the sum of US\$50,000 was donated for guerrilla famine relief by the China Aid Council of United China Relief, New York.

In the guerrilla regions, the causes of existing famine conditions were manifold. Among the natural causes during 1942 were great spring storms and a summer drought followed by swarms of locusts and severe hail storms. The man-made causes were the great Japanese mopping-up campaigns that began in April, 1941, and have continued with increased intensity. During these drives, the Japanese leveled hundreds of villages, killing tens of thousands of Chinese farmers and leaving large sections devastated, with few inhabitants and no food reserves or other essentials necessary for rehabilitation. People began flooding the roads in search of food and work. This shift of population within the guerrilla-held districts themselves threatened to weaken resist-



TOO LITTLE AND TOO LATE

ance to the enemy by creating a vacuum into which the Japanese could easily make a drive. Furthermore, additional thousands of refugees began pouring into the districts from the surrounding enemy-held and unoccupied areas, imposing even greater burdens on the war-impooverished, hunger-stricken guerrilla sections of Honan.

Despite their own critical condition, the guerrilla authorities and people welcomed all refugees and took immediate steps to relieve the situation. The solution lay in accomplishing two things:

1. Stabilizing the population and making it productive.
2. Discouraging famine sufferers from going over into enemy-held territory in a desperate search for food and work.

#### **Guerrilla Famine Relief Measures**

Relief teams were immediately organized by the Shansi-Hopei-Shantung-Honan Border Government, and sent out to inspect conditions throughout the guerrilla districts. Refugee shelters, food kitchens and employment registries were set up. In places adjacent to empty-held districts, reception centres were



established to prevent despairing refugees from going over to the enemy, thus providing them with manpower.

All civil and military organizations were mobilized to assist in giving immediate relief. Wheat and money appropriations were made by the guerrilla administration to feed the refugees, and appeals were made to the people for contributions of food and funds as a supplement to the government grants. Such slogans as: "*All the people of the guerrilla bases are of one family. Help those who suffer most.*" aided in getting people to collect the rice dust usually lost in polishing. Families also contributed a "handful" of rice to build up food stores to feed the refugees. Despite the universal minimum subsistence standards in these areas, large food stocks were gathered in this manner and not a single person was allowed to die of hunger.

To keep the people in the strategic resistance areas and to increase production of food for the swollen population, tax burdens and community responsibilities were lightened among the long-established residents, and refugees were settled on land or given employment. This was accomplished by the following measures:

1. Agricultural relief.

- a. In all famine-stricken districts, taxes of settled inhabitants were remitted in direct proportion to the severity of conditions. In the most severely affected areas, all grain collections, taxes and labor services were abolished outright for a year.
- b. Refugees willing to till virgin soil were granted allotments from publicly held land which was tax-exempted for five years. Landlords were urged to bring uncultivated acreage into production and to rent land to refugee farmers for this purpose. In the case of the latter, the guerrilla administration subsidized rent payments, and guaranteed the full product of the land to the cultivator with exemption from grain and tax payments for a period of five years. Through government loans of draught animals, agricultural implements and distribution of seed, newly settled farmers were able to start cultivation immediately. A "Help the Ploughing" movement was initiated, and soldiers and civilians were mobilized into volunteer brigades to hasten and increase the first harvests.

## 2. Government-subsidized work projects.

- a. Long-established cooperatives worked with the government in providing refugees with work relief. Raw cotton, purchased by the government from the cooperatives, was farmed out to refugee families to be worked into cloth or yarn. The government repurchased the cloth for use in hospitals and other institutions.
- b. In addition, loans at low interest were made to refugee groups interested in establishing new cooperative industries. Funds confiscated from captured enemy or puppet organizations were used to finance and subsidize this type of relief.
- c. Refugee labor was also employed in tailoring, shoe-making, paper-making, dike-repairing, and weaving and spinning projects.

These steps successfully transformed immediate relief into productive relief, giving refugees gainful employment, while engaging them in the production of food and commodities to ensure against future famine conditions. It also stabilized the population and strengthened guerrilla resistance to the enemy. All these methods tended to preserve the affected areas economically and therefore militarily. In giving constructive aid to the sufferers, the Border Region government encouraged initiative and self-reliance among the people who discovered they could fight both the enemy and natural disasters.

### And This Year . . . Again

Despite superhuman efforts conditions this year are still serious. In some places peasants ate the first 1943 crop before it was ripe. In other sections peasants were not there to reap the harvest. Some had died; others were unable to return from places to which they had fled. The effect of famine is cumulative, and the virtual extinction of farm animals made it impossible to complete the plowing in time. The first 1943 crop, consisting mainly of wheat, was 50 percent of normal. The second crop, chiefly barley and beans, was much worse. Then came another drought and locusts. Travellers reported that fields were covered with these predatory insects for hundreds of square miles. Of the entire second crop only sweet potatoes were expected to survive.

The people of Honan are known to be among the most enterprising workers and the best soldiers in China. These men are responsible for the opening up of China's Northwest, and for its stubborn resistance to the enemy. To keep them alive is not only necessary from the humane point of view, but is also supremely important to China and the United Nations.

In the 29 guerrilla districts of Honan the people are staying home and facing a greater battle than they fought last year. They hold two coincident fronts—against hunger and the Japanese. Either of these enemies can defeat Free North China and conquer the bastion that for six years has flown the banner of the people's war behind Japanese lines. To survive, it must defeat both enemies. And to defeat these enemies it must have help.



CULTIVATION, REHABILITATION — BUILDING UP A FOOD RESERVE

## A NEW AND PRODUCTIVE LIFE

### Refugee Relief and Resettlement

**D**URING the past few years more than 100,000 refugees have fled to the Shensi-Kansu-Ninghsia Border Region to escape the enemy, flood and famine, maladministration, and difficult conditions of life in other sections of the country.

In sections outside the Border Regions there has been fear of any large influx of refugees. Local authorities generally feed them and move them on as soon as possible without regard to their fate or destination. Border Region authorities, on the other hand, have carried out a policy of welcoming the refugees and providing them with the means of creating a new and productive life. Manpower is needed to convert the Region's undeveloped resources into grain and goods for the people and the war effort. The salvaging and settling of refugees on the land—the undoing of havoc wrought by the enemy and by natural calamities—is therefore considered part of the fight for victory. In the Shensi-Kansu-Ninghsia Border Region and in guerrilla bases behind the enemy lines every effort is made to attract population, discourage Chinese manpower from going over to the Japanese, and prevent the increased drain on resistance that comes of a destitute people.

In accordance with this policy, assistance to refugees is regarded not as an act of philanthropy but as a prime duty both of the administration and local people's organizations. From the day of their arrival, refugees are given civil rights equal to those of Border Region citizens. At first, however, their community responsibilities are lighter than those of permanent residents and are not increased until they have been rehabilitated.

### The Refugee Charter

Regulations concerning the relief of refugees coming into the Shensi-Kansu-Ninghsia Border Region were promulgated in April, 1941, over the signature of Lin Pai-chu, Chairman of the Border Region Government. Defining the responsibilities of a democratic administration, they are a charter of rights for the refugees themselves.

The following provisions are included in the regulations:





REFUGEES — AS FAR AS THE EYE CAN SEE

1. All refugees register with the District Government which finds them a place to live. In cases where a refugee has already chosen a locality, the Government sends him there whenever possible, with proper credentials.
2. The District Government grants each registered refugee sufficient travelling expense to get him to his destination.
3. When refugees report to local authorities at their destination the following measures are carried out:
  - a. Living quarters in caves or houses are found;
  - b. Sufficient grain is provided to feed each family until the next harvest;
  - c. Land, seed and implements are allotted, free of charge to all desiring to settle on the land;
  - d. Work is found, guaranteeing a sufficient livelihood for all workers, agricultural laborers, and clerical employees;
  - e. Local peasants are mobilized to aid the newcomers.
4. In localities where refugees have already been settled, the local government carries out the following measures;
  - a. Refugees to whom public land has been allotted are exempt from land tax and from the grain levy for two years. In cases where refugees are settled on privately-owned land, the government must use its good offices with landlords to secure remission of land rents;
  - b. During the first year of settlement, refugees are exempt from all public duties such as transport and stretcher-bearing. During the second year, their duties should not be more than half of those required from permanent residents;
  - c. Refugees following non-agricultural occupations must be helped to negotiate for a fair wage;
  - d. Refugees must immediately be given civil rights, including the right to vote in all elections;
  - e. Refugees unable to work because of old age, illness or disablement are cared for by the government.
5. Local authorities will be punished with the full severity of the law if they:
  - a. Do not take the initiative in ascertaining needs of refugees and in helping them in their difficulties;
  - b. Do not intervene to protect refugees in cases where the local population attempts to take advantage of them, maltreats them, or refuses them assistance;

- c. Collect taxes from refugees, cheat them or attempt to exploit them;
- d. Contravene the above rules.

Refugees are informed of these regulations, of the fact that they are entitled to claim the rights embodied in them, and that they may lodge complaints against officials who neglect their duties.

In cases where local resources are not sufficient to feed large groups of incoming refugees, or where there is a food shortage owing to bad crops, grain is allotted by the government from its own reserves and is transported to the needy area at the government's expense.

### Local Committees

Each district is required to organize a local Relief Committee composed of from five to seven persons including the district magistrate, the chairman of the Peasants' Mutual Aid Association, the military commander, the head of the Public Safety Bureau and the head of the People's Association for Resisting the Enemy. The most active and capable workers are charged with the work of registering refugees, ascertaining their needs and enlisting the aid of the community. Suggestions made by the local population are treated with respect by the Committee and given due weight in all decisions.

Charters of the local committees warn against blanket relief, and stipulate that each refugee's requirements must be investigated and relief given accordingly. Funds from the Border Government are supplemented by local campaigns for contributions in money and kind. The aim of relief is to tide refugees over the most difficult period and to put them back into production as quickly as possible. Such projects as salt mining, collection of medicinal herbs, productive and transport cooperatives are organized.

The following paragraph is quoted from the body of regulations: "Relief measures must be met at once. No red tape must be allowed to interfere with the immediate satisfaction of urgent needs, and where necessary in such cases, the routine of registration and reports must be deferred. Otherwise the whole aim of relief is nullified."

All District Government records of relief work are filed with the Civil Affairs Bureau of the Border Government for examination and investigation.





REFUGEE AND WOUNDED GUERRILLA SHARE IN RELIEF MEASURES

### Actual Work and Its Results

Examples of achievements by these methods are given in the following excerpts from a report of the Shensi-Kansu-Ningshia Border Government on Refugee Relief and Resettlement:

"In four years, the Border Region, with a population of less than 2,000,000 has taken in more than 100,000 refugees. . . .

"In four villages in Anting Hsien, 26 families out of a total of 228, are former war refugees. Kwanchung now accomodates 600 Mohammedan refugees who came from a distance of more than 1,000 miles. . . .

"The livelihood of the refugees has improved. . . . One old peasant, a flood refugee from Shansi, said: 'At home, when we borrowed 45 catties of grain from the landlord, we had to repay 90 catties at harvest time. We paid a score of different taxes. . . . Now there is nothing of the kind. My two children have been able to marry and I am a grandfather. Who could have dreamed of such a thing before?' . . .

"Hsu Hwei-lin, a farm laborer from Chihsien in Shansi, said: 'Where I come from a laborer ate off the k'ang (heated bed) or the floor. Our food was miserable. Then the Japanese came and



we could get no food at all. Here things are different. The Peasants' Union protects our rights. Wages are higher, and no one is permitted to insult or bully us. I have been allotted 15 mow (1 mow = 1/3 acre) of land and have myself secured the right to 25 mow of hillside from the public domain by putting it into cultivation. I am happy here.

"Yang Pa-lu was penniless when he came from Hweisui, Suiyuan in 1939. He was allotted 15 mow of good land and Ch.\$50. Now he harvests 20,000 cattles of grain and has brought his family of six to join him."

Going on from these individual cases to the general standard of living in the Region, the report adds: "Formerly the peasants ate only two meals of millet and husks a day, but now they have three meals daily, eat meat three or four times a month and have plenty of vegetables. Formerly a padded garment was worn six or seven years until it could be patched no more. Now peasants can afford a padded suit and two summer outfits yearly." The report concludes: "There is not, and has not been for the past few years, a single beggar in the whole of the Border Region." In contrast to other parts of China, the absence of beggars in the towns and countryside of the Border Region very greatly impressed foreign visitors who passed through the area in 1942 and 1943.



THEIR LIVES WERE SPARED

## GUERRILLA INDUSTRIAL COOPERATIVES IN THE NORTHERN BORDER REGIONS

WHEN the Chinese Industrial Cooperatives movement was started in August, 1938, it was planned to organize societies throughout fighting China, from Suiyuan in the north to Yunnan in the far south, and from the westernmost provinces of Sinkiang and Kansu to the Kiangsu and Chekiang coast in the east. Special stress was to be laid on the frontline and guerrilla regions, including those behind enemy lines. The cooperatives were to be used as supply bases for the fighting forces and, by local production of articles needed by the people, were to serve also as an economic defense line against the penetration of enemy goods and influence. A central body, situated in the Chinese capital, was to coordinate all Indusco activities with the triple aim of fully utilizing the country's productive resources, saving refugee workers from starvation and loss of skill, and helping in the most effective way to carry on the war.

The first units actually to begin work were set up in the Northwest because it was realized that the enemy blockade of the coast, coupled with inland transport difficulties, would make it impossible for the Northwest provinces to import needed goods. It was also understood that this economically backward area would in time become one of the main bases for resisting the Japanese. Moreover, the arrival of many refugee workers who came up the Yangtze and Yellow rivers to South Shensi made qualified labor available for rapid development.

The United Front was strong in China then, and it occurred to no one to suggest that cooperatives should be supported in Sian and Paochi and not supported in Yen-an and other points in North Shensi simply because these latter points were in the hands of the Eighth Route Army. On the contrary, the achievements of this army in the early months of the war stimulated a general desire among people both in China and abroad to help it in every way possible. A depot of the Chinese Industrial Cooperatives was accordingly set up in Yen-an, and production began soon afterwards. Contact was maintained with both the regional and central headquarters, and the Yen-an depot had its share in the expansion that was general throughout the region at that time.

Since 1940, however, the situation has changed sharply. The



SHOEMAKING COOPERATIVE — INDUSTRIES ARE DECENTRALIZED



Yenan depot no longer receives funds from Indusco headquarters, though some money comes from foreign friends through the facilities of the China Defence League. The movement of staff members across the boundary of the Border Region has been stopped and the cooperatives in North Shensi are subject to the same blockade conditions affecting International Peace Hospitals.

The North Shensi and Southeast Shansi industrial cooperatives are not a separatist development. On the contrary, they would wholeheartedly welcome reintegration into the parent body on the basis of the same support given to other depots. All their units are organized according to the Indusco constitution and all goods bear the Indusco symbol.

Since information on the movement elsewhere is readily available from the Chungking Coordinating Committee (formerly Central Headquarters) and from supporting organizations abroad, this report confines itself to the blockaded cooperatives of the two regions mentioned above, which are attempting with some success to carry out the original basic aims of the movement—to fight the economic ruin of war by means of local production, and to establish economic bases for guerrilla resistance.

#### **Indusco Under the Yenan Depot**

In North Shensi the programme of the Chinese Industrial Cooperatives has been closely linked with efforts to increase the cultivation of cotton and the production of cotton cloth as the importation of both from Kuomintang China is cut off by the blockade. Nine new spinning and weaving societies were organized between March and December, 1942, producing 2,466 bolts of cloth a month. In addition, another nine rural spinning and weaving societies were established with 500 members and 1,500 additional workers belonging to members' families. These nine societies operate 110 improved hand-pull weaving machines.

At the end of September, 1942, there were 41 cooperatives under the Yenan Depot, with a total of 1,041 members. Share capital had increased from Ch.\$669,314 in 1941 to CH.\$3,434,040 in September, 1942, and loan capital totalled CH.\$1,048,812, of which half came from the Border Region Government and Bank, and half was subscribed by interested individuals.

Monthly production includes 270 woolen blankets, 600 cotton blankets, 14,493 bales of dyed cloth, 2,466 bales of coarse cloth, 367 dozen towels, 170 dozen pairs of socks and stockings, 1,325



pairs of woollen boots and shoes, 1,500 woollen caps, 325 woollen bags, 300,000 bars of soap, 16,796 packets of tooth powder, 3,250 cattles (1 catty = 1 1/3 pounds) of wheat flour, 1,400 lbs. of bean flour, 6,000 lbs. of bean, cottonseed, sesame and rapeseed oils, 3,888 lbs. of refined salt, 257 boxes of sodamint, 605 lbs. of alcohol, 2,043 lbs. of wine, 3,888 lbs. of chalk, 5,250 bottles of ink and 550,000 sheets of paper.

This is a culturally backward region and so during the past three years much attention has been paid to the elementary task of making cooperative members literate. In 1939, only 20 percent could read and 9.7 percent write, but by 1942, no less than 90 percent could read and 20 percent could write.

Medical care is given co-op members through government health protection stations.

While work in the cooperatives in the Yen-an region has had its rewards, the Chinese Industrial Cooperatives there have not been able to develop fully because of limited capital and labor. During 1943 it was planned to consolidate the societies, improve the skill of workers, install more and better machinery and strengthen the marketing and supply system. For success in this work the following funds are needed:

To strengthen and develop marketing and supply departments . . . . .	Ch.\$700,000
To develop castor oil and cottonseed oil industries	300,000
To develop the woollen and carpet industries .	200,000
To develop rural and industrial cooperatives in spinning and weaving . . . . .	400,000

It will be noted that, unlike other points in the Northwest, this depot has no machine shops, a basic necessity for cooperative development. Plans for machine shops as well as for the exploitation of the petroleum resources of North Shensi by cooperative methods had to be shelved when the blockade was imposed.

### Southeast Shansi Cooperatives

The story of the co-ops in the Southeast Shansi area, which have been called "Indusco's Lost Battalion," is worth telling here because it provides the best example in all Indusco's experience of the tenacity of the movement, its ready adaptability to war conditions, and its possibilities if properly developed in the spirit in which it was founded.

Until May, 1941, the Southeast Shansi cooperatives worked as a part of the Northern Front Headquarters area whose centre is Loyang, on the south bank of the Yellow River in Honan province. At that time, however, the Japanese pushed southward to the north bank of the Yellow River and the co-ops found themselves cut off from headquarters by a line of Japanese garrisons and defenses. At first the co-ops decided to stand their ground. They buried their machines in the earth and themselves took to the neighboring mountains. They expected that after a short period of "mopping up" the enemy would retire and they would be able to resume business.

This was not to be the case. No news came of the retaking of the lost territory, traitors were working actively, and bandits and hungry stragglers ravaged the countryside. Since measures had to be taken for self-protection, the cooperators armed themselves with whatever weapons they could find, and organized a Kung Ho Self-Defence Corps. Soon realizing they would be annihilated unless they took more positive steps, they decided to move north to work under the protection of the Eighth Route Army. Discarding extra clothes, cutting down food to a minimum and travelling only by night they reached the Shansi-Honan-Hopei



NORTHWEST TEXTILE COOPERATIVES ARE GEARED FOR WAR

Border Region after ten days. On the road, one of the Depot staff was killed by the enemy and the manager of the Marketing Supply Store was wounded and captured while trying to save him. The manager later escaped and made his way to the Chinese Industrial Cooperatives.

Immediately on their arrival the Eighth Route Army authorities loaned them Ch.\$200,000 as an initial fund to get the cooperatives started. Moreover, they gave another loan for a Chinese Industrial Cooperatives store from the profits of which the Depot was to maintain itself.

Although by October, 1941, staff members were anxious to get to work, they did not lose sight of the importance of proper preparation and the necessity of adjusting their organization to Border Region standards. They found that the people behind enemy lines had a greater sense of solidarity and spirit of resistance plus a readier understanding of Indusco objects than those in the rear. The prompt help given by local authorities and people's organizations in the villages was also a favorable augury for rapid development.

On the other hand, the material and technical difficulties were greater than in the rear. Communications were bad, transport poor, and constant readjustments were necessary to meet the exigencies of mobile warfare. It was therefore agreed to set up small, very mobile co-ops and to encourage members to do other work as well. It was further agreed to consider forming only one cooperative in each village, organizing it with different departments for different processes of the same or cognate industries. In places where there was a shortage of capital that could not be met in any other way it was agreed to allow outsiders to buy shares and participate in the profits. To provide the necessary staff for organization and promotion, two training classes were immediately started, one for staff members and one for accountants.

After completion of these preparations, and up to August, 1942, 51 cooperatives with 357 members had started work. They were engaged in shoemaking, paper making, leather tanning, ropemaking, weaving, flour milling, coal mining, printing and the manufacture of agricultural implements. At one point conditions again became dangerous as a result of a new Japanese "mopping up" campaign, but the cooperatives suffered no loss. They were now well organized and able to quickly hide their property. An economic trial came when the store suffered a business loss of Ch.\$100,000 because of its efforts to speed up turnover in produc-





SPINNING COOPERATIVE — CLOTH FOR FIGHTING GUERRILLAS

ing war goods. The loss was weathered, however, and the cooperatives continued their high productive level.

In this region Indusco staff members and cooperators have clung to their work in spite of many hardships and perils. They have been cut off from the rest of the movement, and have to live in arid, poverty-stricken valleys constantly traversed by the enemy. Highly trained and educated personnel have lived on a wage of \$20 a month, eaten millet for all three meals of the day, and had only one suit of clothes for summer and a padded one for winter. Every effort must be made to break down the blockade which makes it impossible for these men and women to enjoy the same treatment and assistance from the central administration that is given to Indusco workers in the less-menaced rear. It is due to the staunch spirit of such people as these that the Japanese occupation has never succeeded in breaking organized military, political, and economic resistance.



## CANTON INTERNATIONAL MEDICAL SERVICE CORPS

SINCE the fall of Canton in October, 1939, a group of doctors, nurses, medical students and welfare workers organized into the Canton International Medical Service Corps, have been rendering devoted service to the wounded and refugees in southern and eastern Kwangtung. Wherever the need has arisen, the corps has been on the scene and, in relation to its size, is one of the most active medical relief groups in the areas behind the front. Many thousands have been aided every month. Since immediately prior to the outbreak of the Pacific War, its record has been especially inspiring.

On November 6, 1941, Japanese planes bombed Shaokwan, wartime capital of Kwangtung Province, where the corps had its main depot. The majority of the heavy casualties were brought to the depot, and all hands set to work, including those off duty. A number of outside doctors were asked to help. Three operating tables were kept in constant use throughout the day, and by nightfall all cases were hospitalized. During the bombing, one member of the corps was badly wounded, and later in the month another member was killed. In the same month one of the buildings used by the corps collapsed and much equipment, including the only oil immersion microscope, was lost. Fortunately, nine new members, internes from the Sun Yat-sen Medical College, slipped through enemy lines from Hongkong and joined the corps.

With the outbreak of the Pacific War the corps lost its principal source of support. Most of its funds had come from Hongkong, and now Hongkong was lost. At the same time, its responsibilities were doubled because of the great flow of refugees inland. Late in December a call was broadcast for volunteers to go out to the East River area through which most of the refugees were coming. Within three days an ambulance with three doctors, six nurses, two nurses' aids and an orderly was sent out by the corps. Arriving at Waichow on January 1, the group immediately set up an outpatient station which treated, within the first three weeks, 1,976 patients and vaccinated more than 8,365 people. On January 26, the Japanese advanced to the outskirts of the city. The unit worked all night, hiding its heavier equipment in a nearby village. The members slipped away just ahead of the first enemy column

to break through, and in the next three days walked 70 miles along bombed and machine-gunned roads.

During that same month the group had also answered an emergency call from 70 British military men who had escaped Hongkong in torpedo boats just before the surrender of the city. One of the medical officers treated the wounded and accompanied them as far as Shaokwan on their way to Chungking and India.

For two months the group worked along the East River, serving refugees, and in April, after the city had been evacuated by the enemy, returned to Waichow.

Despite the difficulty of raising funds for support, the work of the corps in 1942-1943 grew constantly. In May, 1943, however, a fresh calamity struck. The corps' main depot in Shaokwan was destroyed by fire. The hospital with its various outbuildings, storehouse, dormitories, maternity home and operating room, was burned down in spite of all efforts to save it. All patients and an X-ray machine were rescued, and wards were immediately improvised in neighboring buildings. So efficiently did the members work that the patients' suppers, cooked in the half-burned kitchen, were served punctually. The staff worked all through the night in a pelting rain to reorganise whatever facilities were at hand.

In June, 1943, with the main hospital still in ruins, the number of outpatients treated by the corps reached the record number of 11,015. Under the leadership of Dr. Wong Man, its director, the corps is now rebuilding its main depot and operating branch services in Heung Fa, Ngliting, Pingshek and Samkong.

Since it was first established in 1938, this one corps has operated clinics in more than 30 districts, treated over 570,000 outpatients and 10,000 inpatients, performed 2,300 operations and 1,000 deliveries, and innoculated more than 60,000 persons against epidemic diseases.



ENTRANCE REQUIREMENT

## CHILDREN OF THE BORDER REGIONS

"The army of children left homeless and unprotected by the war, claims more than our sympathy and charity. It represents a whole generation of future citizens—who will be called upon to build a new China after the achievement of victory for which their parents are fighting, suffering, and dying. "Save our children. Help to preserve the vital forces of the China of Tomorrow."

**T**HESE lines are quoted from Mme Sun Yat-sen's appeal of March 28, 1939, at the inauguration of the China Defence League's campaign for aid to the children of refugee and guerrilla families. The appeal is as relevant today as it was four years ago, and the needs are as urgent as ever.

### Child Welfare

The work of the Border Region Governments and the 18th Group Army for the children of the North includes prenatal care, child health and welfare, and education in general. Provision for child care inaugurated by the Shensi-Kansu-Ningsia Border Government are carried out in all anti-Japanese guerrilla bases behind the enemy lines in the provinces of Shansi, Hopei, Honan, Hupeh, Shantung, and others.

Regulations dealing with maternity and infant welfare cover such things as: pre- and post-natal education and care of mothers; short-term training classes for maternity and child care workers who, after graduation, go out to the villages and districts to organize simple training projects; care of pregnant and nursing mothers with provisions for one month's pre-natal rest and six weeks' post-natal rest and government financial aid where needed; free clinical care for expectant and nursing mothers; food and money grants during confinement and delivery; monthly grants of food, clothing and bedding to children up to the age of five and grants of food and cash to children over five.

The Border Region Governments have also initiated the following types of institutions for children:

1. Nurseries attached to organizations such as the Border Region Bank Nursery, the 18th Group Army Headquarters' Nursery, and the Border Region Printing House





DINNER ENGAGEMENT

Nursery. There are 12 such nurseries accommodating 930 children at present.

2. Public nurseries such as the Los Angeles Nursery (established with funds from supporters in California), the Lan Chia P'ing, and the Yang Chia Wan nurseries. There are 9 nurseries of this type that accommodate 600 children.
3. Kindergartens and schools, such as the Border Region Elementary School and the Technical Academy for Young Northwesterners, which together accommodate 351 children.

Previously, the Border Region Orphanage, located in Shensi, was supported through the China Defence League. Mme Chiang Kai-shek's National Association for Refugee Children now aids this orphanage.

The children's work covers a wide field and the China Defence League has been able to help only in supporting specific projects. For this reason it now appeals for support of the day nurseries, the Border Region Elementary School and the Technical Academy. The following description of the Los Angeles Nursery indicates the way in which children's work under Mme Sun Yat-sen's sponsorship is organized:

### The Los Angeles Nursery

Border Region government regulations provide that day nurseries shall be established "in any organization where there are five or more infants," and a joint nursery be set up "for several organizations where there are five or more babies together." The provision is also made that salary, food, and clothing allowances for nursery workers be equal to that of other guerrilla government workers.

The Los Angeles Nursery, attached to Lu Hsun Art Academy is typical of the 21 day nurseries in the guerrilla areas being supported by the China Defence League. The nursery cares for 37 children, and is located near Yen-an, Shensi. When it was established in May, 1942, there was a much larger group of children but during a severe epidemic of pneumonia many died because of the lack of medicines. Established with American funds, the nursery is given small monthly subsidies from Lu Hsun Academy and from the Border Region Government to supplement contributions received through the League.

The children live in clean, well-ventilated caves that open out on broad terraces facing south. They work and play outdoors as



VITAMIN D INTAKE — NURSERIES STRESS SUNLIGHT AND FRESH AIR

much as possible not only for health reasons but also because the lack of adequate equipment makes indoor activity difficult. Their only playthings are locally made dolls and toy animals of clay, wood or rags. There are no brightly colored picture books or other materials of this type, and much time is spent in group dancing, singing and story-telling.

Children who have formerly been listless and fretful show a marked change after only a few weeks at the nursery where special stress is laid on regularity of meals, play, and rest. This change is also due to special attention in feeding. The nursery provides three types of diet. Babies under one year get fruit juice, vegetable soup, and yolk of egg as a supplement to breast feeding. Weaned infants are given liquid and semi-liquid foods such as rice gruel, soya bean milk, meat juices, vegetable purees, rusk, and fruit juice. Older children are given four meals a day including chicken liver or meat soup, vegetables, soya bean milk, custard, noodles, steamed bread with fruit filling. Sweet dates and soya bean milk are substitutes for sugar and cow's milk, both of which are scarce in these regions.

The diet described above, while limited, is adequate for healthy children. It is difficult, however, to build up the health of under-nourished children when concentrated foods such as vitamin tablets and fish liver oils are lacking.

Each year, nursery children are provided with two summer and two winter suits, simply made because the only available material is rough homespun in black, blue or grey. They wear white hand-loomed cotton aprons and, it is said, look like a flock of white-breasted ducklings.

Since the chief difficulty in all nurseries is the lack of trained staff, mothers are being taught to help. Before coming in contact with the nursery training program, most mothers feel it is enough to keep their children fed and clean, but after spending three months in courses being given at the nearest International Peace Hospital even the least educated begin to appreciate the basic principles of child care. Although there are three training courses now being given in the Northwest to train additional workers and raise the level of service offered, standards are still not as high as the authorities desire, and not enough people are reached. Other major handicaps in the children's work are the difficulty of obtaining even the simplest drugs for adequate medical care and a lack of educational toys and equipment.





"CHEE LAI, CHEE LAI"



FREEDOM OF MOVEMENT



### **The Border Region Elementary School**

Located in caves outside Yen-an, the Border Region Elementary School accommodates 51 children, all over four years old. Four caves serve as dormitories where each child has a single bed, and keeps his personal toilet articles—toothbrush and paste, soap and towels.

The children are supplied annually with one winter and one summer suit, one scout uniform, two pairs of sandals and one pair of winter shoes. Food is simple but adequate, and consists mainly of millet, vegetables, soya bean milk, steamed bread and a little meat. Although the general health of the children is good, they are visited regularly by a physician. In this school, too, care of sick children is considerably hindered by the lack of medicines.

The children are divided into two groups to encourage a more personal relationship with the staff. Two hours daily are spent in classroom work which includes arithmetic, reading of characters, and natural science. Two additional hours are spent in group exercises, singing and story-telling. One of the chief problems is the lack of reading materials. There are no picture books and the texts used have been compiled by the teachers themselves. Equipment is of the simplest. Each student receives a minimum of writing paper, one pencil and one Chinese brush monthly. Since locally made candles furnish the only lighting equipment available, the long winter evenings are spent mainly in playing word games and telling stories.

### **Technical Academy for Young Northwesterners**

Located near Yen-an, the Technical Academy was founded in 1940, and was affiliated to the School for Natural Sciences in May, 1941, to take advantage of the better equipment and staff at the School. Under the guidance of scientific workers from two neighboring universities—Tsinghua and Chiaotung—and with access to the Natural Science School's chemical engineering and agricultural laboratories, the Academy has made excellent progress. There are 280 students at present, ranging from 10 to 20 years of age.

The Academy trains young men and women for expert technical work in factories, cooperatives, construction and agricultural enterprises. The ablest of the graduates are given further training in advanced institutions.

The entire Academy course requires four years with two



AS THEY LEARN SO SHALL THEY TEACH

20-week terms a year and 20 hours of classroom work a week. Practical work in agricultural stations and technical workshops begin in the second year, half of the daily work being devoted to it. The following subjects are offered: Chinese, English, mathematics, geography, history, biology, botany, chemistry, physics, social sciences, drawing, music, and physical training.

The majority of students come from the war areas. Their family backgrounds cover all strata of Chinese life from peasants to wealthy merchants and landlords. Students have their own singing, drama and sports club, participate in students' unions and self-governing associations, and send delegates to educational conferences held annually under the auspices of the Director of the National Science School with which the Academy is affiliated. Faculty members, administrative workers and technical instructors of both schools participate in the conferences.

In spite of considerable material difficulties the students are happy in their studies. All realize the tremendous advantages to be gained through education, and they cooperate with the staff in

trying to overcome handicaps and difficulties. At present one of the major problems is the lack of books and special equipment which cannot be easily obtained from the outside.

As in the other children's work under the China Defence League, the annual deficit is made up by the Border Region Government.



**FORWARD TO THE FUTURE**

## FROM HONGKONG TO CHUNGKING

### The Loss of Hongkong

ON December 7, 1941, at the outbreak of the Pacific War, the entire Central Committee of the China Defence League was in Hongkong where its work had been centred for more than three years. It was from Hongkong that the League had sent out its many printed publications and maintained contact with the foreign committees that contributed to its China projects. Moreover, it had built up a large, international group of faithful friends in the city who gave assistance to the League's local fund drives and other activities.

Within two weeks after the attack on Pearl Harbor everything changed. When the Japanese attacked Hongkong, the League's records and publications—including an extensive annual report just off the press—had to be destroyed to prevent their falling into the enemy's hands. Norman France, Honorary Treasurer of the League, was killed while serving with the volunteer corps defending the city. On the insistence of League members and friends, Mme Sun Yat-sen, Chairman, left Hongkong only eight hours before the Japanese occupied the airfield from which she had taken the last plane bound for Chungking. Two members of the Committee were held by the Japanese in civilian internment camps, and another in a political prison for Chinese. Several others were forced to disguise themselves and go into hiding.

In the first three tragic months of 1942, the League lost not only its Hongkong base but also the support of the patriotic and progressive Chinese communities of the Philippines, Dutch East Indies and Malaya—all of which fell to the enemy.

### Chungking Reunion

In Chungking, Mme Sun Yat-sen, aided by a former Chungking correspondent of the League, began to rebuild the organization, re-establishing its contacts abroad and taking other steps to ensure the continued support of the field projects which were aided through no other channels.

This difficult task was made easier by the loyalty and initiative of the foreign committees that were supporting the League's work from abroad, namely the China Aid Council of New York,





GUERRILLAS ARM THEMSELVES BY CAPTURING ENEMY SUPPLIES

the Committee for Medical Aid to China of Victoria, B.C., the Vernon, B.C. Committee for Chinese War Relief, the Chinese Patriotic Association of Aruba, Netherlands West Indies, and after some delay the China Campaign Committee in London. The encouragement afforded by these organizations during the trying days that followed the fall of Hongkong infused the League's work and its projects in the field with new life and gave confidence to those in charge.

Then, too, many of the original members of the League's Central Committee managed to make their way out of occupied territory during the spring and summer of 1942. They fled in various ways—some running the gauntlet of Japanese coastal patrols in fishing boats, some coming quasi-legally in disguise, while two others managed to escape from the notorious internment camp at Stanley. By the middle of August, 1942, a sufficient number were gathered in Chungking to make possible the formal reconstitution of the Committee. The names of members still in Japanese-held territory were provisionally removed from the list.

### The Changed Situation

The reconstituted Committee faced a very different situation from that of its Hongkong days. The International Peace Hos-

pitals, which are the League's main responsibility, had for a long time been victims of the internal political blockade through which no supplies could be sent and money could be transmitted only with difficulty. The situation was aggravated by circumstances which affected all relief agencies equally. The internal purchasing power of the Chinese dollar underwent a terrific decline. Prices rose to an average of from 50 to 200 times their pre-war level. Since the foreign exchange rate increased only four times, this meant that from 10 to 20 times the previous amounts of foreign currency were needed in order to cover the same commitments.

At the same time, the means at the disposal of the League for publicizing its needs and mobilizing support were drastically reduced. Political and technical conditions—the latter including lack of personnel and printing facilities and the difficulty of mailing large quantities of material abroad—made it impossible to issue regular publications linking the League's field projects with the many thousands of friends outside the country. These conditions also precluded large scale local fund-raising campaigns.

### Changes Abroad

Meanwhile, outside of China, all circumstances governing the solicitation and transmission of relief funds had altered. American collections for China were centralized in a coalition of agencies under United China Relief. Centralization also took place in Great Britain with the result that individual components of the United Aid to China organization were denied the right of earmarking funds at the source.

Again the loyalty of foreign organizations made adjustment and continued activity possible. Thanks to the work of the China Aid Council and the strength of intelligent and progressive American sympathy for the Chinese people, relations with United China Relief both in New York and with its representatives in Chungking were soon established satisfactorily. Contributions from this source, though not commensurate with the increasing needs, have been both substantial and regular. A beginning has been made with British contacts, and smaller committees in other countries have continued to remit money even during the most discouraging months when, because of the Hongkong collapse, the fate of the China Defence League was as yet unknown to them.



GUERRILLA WOMEN LEAD IN "TOTAL RESISTANCE" TO THE ENEMY



GUERRILLA MEN DEDICATE THEIR LIVES TO THE FOUR FREEDOMS

### Labor Support

Support for League projects began to come, unsolicited, from a new source—labor organizations in the United States. The pioneer in this regard was the International Fur and Leather Workers' Union which sent a generous contribution for the creation of a new wing of the Bethune International Peace Hospital in the Shansi-Chahar-Hopei Border Region and its partial maintenance for one year. Contact was also established with other unions, and substantial support given by the National Maritime Union and the United Office and Professional Workers of America.

### Local Relationships

The League has also established good relations with local officers of the American Red Cross and the American Bureau for Medical Aid to China, both of whom have given valuable help on several occasions. The League took part in the joint effort of all relief organizations to secure an adjustment in the rate of exchange. This adjustment took the form of a government subsidy of 100 percent on remitted funds for direct relief and 50 percent on those for indirect relief. In the face of constantly depreciating values—estimated at 15 percent per month—the subsidy has been lamentably insufficient but it has served to compensate in a small way for the gross inequities of the previous situation. Contact with local branches and visiting officers of foreign relief amalgamations such as the British Ambassador's Committee has also helped to ensure that the needs of projects in the guerrilla areas would be considered.

### Field Reports

Renewed incentive was received through eyewitness reports of the International Peace Hospital brought by four foreign friends who had escaped from the Japanese in Peiping and came to Chungking after months spent in traversing the guerrilla areas of North China. These friends — Lieutenants Uhlmann and D'Anjou of the Fighting French Forces, Mr. Carl Brondgeest, a Dutch engineer now with the Netherlands Navy in the Indian Ocean, and Mr. Martell Hall of the National City Bank of New York—were unanimous in their enthusiastic praise of the work being done in these areas despite unparalleled difficulties.



Dr. B. K. Basu, chief surgeon of the International Peace Hospital in Yen-an, came through Chungking somewhat later on his way home to India, and gave a detailed and technical account of the projects supported by the League. He also brought the papers of Dr. Dwarkanath Kotnis, a fellow member of the Indian National Congress Medical Mission to China, a hero who fell in the cause of international aid to the Chinese people. Dr. Kotnis worked as director of the Bethune International Peace Hospital in the Shansi-Chahar-Hopei Border Region, behind the Japanese lines. Like Dr. Norman Bethune, his predecessor, he lived and died fighting disease and death at the side of the guerrilla vanguard of the Chinese people.

All these reports have served as the source for the detailed descriptions presented here on the International Peace Hospitals and other League activities in the Northwest.

### Local Activities

In the winter and spring of 1942-1943, in China's sixth year of war, her third year of strength-sapping internal friction, and her second year of being almost totally cut off on land and sea, all



NONE TOO OLD AND NONE TOO YOUNG TO LEARN DEMOCRACY



BETWEEN MILITARY ENGAGEMENTS

previous difficulties were aggravated by a famine of horrifying dimensions. In Honan an estimated five million people perished, and in Kwangtung, additional millions were affected.

Locally, the League played its part in disseminating information and mobilizing support. Two international projects were organized—one for Honan and another for Kwangtung. Through the efforts of volunteer workers and of the British, American and Soviet diplomatic and military communities which provided participants for dramatic and athletic events, more than Ch \$300,000 was raised in Chungking alone.

With the assistance of the China Aid Council, moreover, a grant of US \$50,000 was secured from the United China Relief to aid famine sufferers in the Honan guerrilla areas—sections still untouched by existing famine relief bodies.

The League is happy to report that in June, 1943, a shipment of medical supplies was dispatched to the International Peace Hospitals. Although small and totalling no more than a ton, the shipment did include invaluable surgical instruments and a supply of sulfa drugs secured through the fine cooperation of the American Red Cross and private donors. The trucks carrying

the supplies went under escort of the negotiators for the Eighth Route Army and were thus permitted to enter the Region. This action cannot be interpreted, however, as a permanent breach in the blockade, which for three years now has prevented medical supplies from reaching the guerrillas.

Donations to the League's work play an important role. They are indicative of foreign interest in China's unity for resistance and thus indirectly serve to curb the forces of disruption and civil war. Throughout the whole period of its existence, the League has stressed unity and continues to emphasize it all the more now when the favorable over-all picture of United Nations' successes is clouded by ominous shadows threatening new and suicidal conflicts. These conflicts can and must be prevented by the peoples of the world.

\* \* \*

In presenting this report the Central Committee of the League wishes to thank once again the many friends of its work and of China's war effort. The coming year holds many problems to be overcome, but with continued effort and stronger cooperation, these difficulties can be met—as the workers of the International Peace Hospital and the fighters they serve are meeting far greater hardships in the rear of the enemy.

CHINA DEFENCE LEAGUE  
CENTRAL COMMITTEE

*Chungking, September 16, 1943*

At the request of Mme Sun Yat-sen, the story of the work of the China Defence League for the past three years has been published in Sydney. Because of wartime technical difficulties and mailing problems, publication in China was not feasible.

— Funds to buy medical equipment, drugs, etc., for the anti-Japanese Chinese Guerrillas should be sent to—

Mr. C. LAI, Hon. Secretary,  
Madame Sun Yat-sen Appeal Committee,  
Box 318, P.O., Haymarket, Sydney.