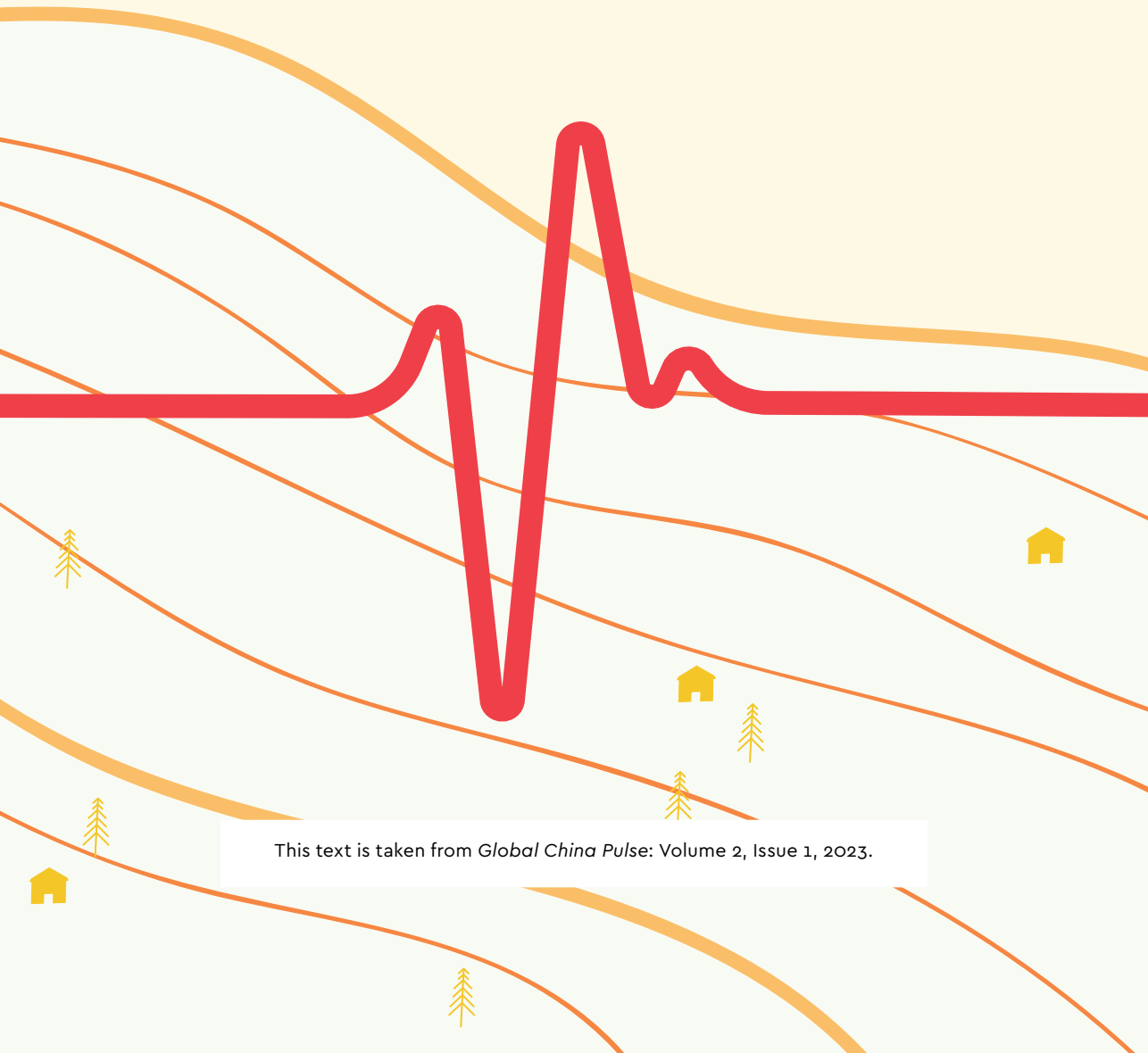


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EDITORIAL

The *Global China Pulse* journal aims to be an open access platform where it is possible to discuss Global China from a more grounded perspective, not consumed by the geopolitical speculations and abstract and aggregate macroeconomic discussions that dominate current debates. In line with our sister project, *The People's Map of Global China*, here we strive to offer perspectives on how Global China is playing out at the grassroots, focusing on how Chinese engagements overseas impact, for better or for worse, the lived experiences of people in different localities and their environments. We do this through contributions written not only by scholars, but also by nongovernmental organisations (NGOs), activists, and journalists.

At the core of this issue is the Focus section, edited by **Miriam Driessen**, that explores the myriad global connections Chinese health authorities, medical doctors, and pharmaceutical companies forged over a century marked by increased mobility. Their engagement, passion, care, and labour rendered China genuinely global in the past as much as during the recent Covid-19 pandemic.

First, **Meng Zhang** takes us back to the early twentieth century when Chinese modernisers sought to introduce Western medical science to a society that was used to radically different forms of treatment. Observations by a Japanese-trained medical doctor named Tang Erhe played a critical role in developing China's dual medical system. Tang travelled to colonial Korea, where he witnessed the futile and failed attempts of the Japanese authorities to eradicate indigenous medicine. His reports inspired China's Republican Government to opt for a softer and more integrative approach. The system it implemented, combining traditional Chinese medicine (TCM) with Western medicine, still exists today.

While medical specialists travelled to learn from experiences abroad, the arrival of foreign diseases in China also compelled doctors to learn. When Chinese medical experts were confronted with the 1918–20 influenza pandemic, they primarily drew on indigenous knowledge. **Marta Hanson** and **Michael Shi-yung Liu** show how the arrival of the 'malignant cold'—as the Spanish Flu became known in China—ignited debates about who to blame for

the disease and how to name and treat it. Amid avid discussions, Chinese medical practitioners redefined the illness and developed distinct methods of treatment drawn from TCM.

The export of Chinese medical expertise took off in the first decades of the People's Republic of China (PRC). Newly liberated African countries were the first to receive Chinese medical aid, in the 1960s. The doctors dispatched to Africa during this period have been praised for their professional commitment and humanitarian passion. **Dongxin Zou**, however, reveals an aspect of Chinese medical missions in Algeria that has long remained hidden. She approaches the delivery of care as a labour process that required doctors to cope with pressures from all sides, including from Chinese health authorities, uninformed Algerian patients, and suboptimal working conditions. Doctors made significant sacrifices in the name of the nation and Third-World solidarity.

Overseas, Chinese medical doctors introduced new forms of treatment. **Emily Baum** shows how the Chinese Government, boasting national pride and confidence as a leader in the spread of socialism, began promoting Chinese medicine globally at the turn of the 1970s. Acupuncture became a distinct marker of Chineseness, as it transformed from a revolutionary praxis during the Mao period into a symbol of China's cultural heritage after market reforms.

Despite changing political winds and radical economic transformations at home, the Chinese Government remained committed to its role as a donor in the international health sector. **Yidong Gong** sheds light on the rhetorical shifts and policy changes in delivering medical aid as he invites readers to enter the Mnazi Mmoja Hospital in Zanzibar, which has welcomed Chinese medical teams since the 1960s. Gong shows how the Maoist revolutionary zeal, driven by the maxim of 'serving the people', made way for an emphasis on efficiency, capacity-building, and technological development. Chinese medical doctors in Zanzibar stopped going out to the villages and instead set up training sessions and upgraded facilities. However, over the years, Chinese medical specialists increasingly found their expertise put to the test as the hospital received medical specialists from other countries. At the same time, Zanzibari staff— aspiring to become more self-reliant—grew suspicious of and averse to Chinese medical practices and foreign involvement more generally.

In the 2000s, China's growing prosperity heralded a shift in its position in the world. Global health policy was one arena where this shift became palpable, marked by the country's transformation from a recipient of international health grants to one of the largest medical aid donors. **Elsa Fan** documents this change by zooming in on one heated episode: the suspension of The Global Fund's health funding to China in 2010–11. She discusses the contrasting responses this decision triggered to reveal the complexity of China's global health engagements that remains relevant today. Fan's essay powerfully illustrates the political nature of international health cooperation.

While the state initiated most past medical engagements overseas, this is no longer true. Growing domestic demand for drugs has forced Chinese pharmaceutical companies to venture out. Many drug manufacturers source ingredients from overseas or have internationalised their production. **Wei Ye** follows the trade of donkey hides, the core ingredient of *ejiao*—a popular medicine believed to cure a range of illnesses—from the slaughterhouses in Kenya to the factories in Shandong. She shows how the globalisation of the drug and its ingredients has been accompanied by shifting popular and scientific discourses on its efficacy in response to fears of diminished quality.

The Focus ends with the Covid-19 pandemic—a recent episode in Global China's medical history that reveals how connected and 'global' China is. Amid geopolitical tensions and finger-pointing, the fight against Covid-19 compelled concerted coordination and cooperation among medical experts, health authorities, and many others. Expert knowledge crossed boundaries, literally and figuratively. **Wayne Soon** highlights the critical contribution of Taiwanese and Taiwanese Americans in shaping the early history of the Covid-19 pandemic in the United States. If initially met with some suspicion, their contributions ranged from scientific research on N95 respirator masks to sharing the successes of Taiwan's pandemic responses and offering policy suggestions. These transpacific exchanges bring into relief the global nature of pandemic responses and the mutual learning upon which they relied.

The issue also includes a forum on the Belt and Road Initiative (BRI) on the tenth anniversary of its establishment. Speaking across disciplinary and methodological boundaries, the contributors reflect on how the BRI has evolved, exploring the contradictions that have shaped it and pressing future issues for policy and scholarship. **Igor Rogelja** reflects on the (in)visibility of the BRI and what that

means for research on infrastructure and Global China. **Han Cheng** considers the BRI as discourse, as project, and as experience, and proposes a research agenda for the second decade of the initiative that takes into consideration its imagined, material, and lived implications across multiple terrains and scales. **Jordan Lynton Cox** offers a historically grounded view of Global China that goes beyond the state-based framing of the contemporary BRI, highlighting the historical depth and geographic breadth that can be gained by studying diaspora communities. **Hong Zhang** turns to the domestic dimension of the BRI, shedding light on the BRI-nurtured local interests dependent on continued international exchanges and their implications for China's domestic political economy. **Cecilia Springer** and **Keren Zhu** explore the changes in BRI financing trends, the evolution of BRI environmental regulations, and ongoing efforts towards a greener BRI. **Elia Apostolopoulou** examines how BRI-driven urban formations join the global urbanisation project in deepening urban marginality and inequality, which may give rise to novel possibilities for urban socio-spatial change. **Jessica DiCarlo** calls for continued efforts on grounded BRI research that pays attention to place-based relations to explain reconfigurations of power. The forum underscores that the BRI will influence and be influenced by dynamics such as domestic trends in China, host-country politics, sociopolitical and grounded processes, and the global geopolitical landscape.

In the op-eds section, **Ivan Franceschini** and **Ling Li** discuss one of the 'dark sides' of Global China: modern slavery in online scam operations run by Chinese organised crime in Southeast Asia. Finally, we wrap up the issue with four conversations about recently published books. In the first, **Emily Wilcox** interviews **Yunxiang Gao** about her *Arise Africa, Roar China: Black and Chinese Citizens of the World in the Twentieth Century* (University of North Carolina Press, 2021). In the second, **Jordan Lynton Cox** engages **Monica DeHart** about her *Transpacific Developments: The Politics of Multiple Chinas in Central America* (Cornell University Press, 2021). In the third and fourth, **Miriam Driessen** chats with **Omolade Adunbi** about his *Enclaves of Exception: Special Economic Zones and Extractive Practices in Nigeria* (Indiana University Press, 2022) and with **Jay Ke-Schutte** about his *Angloscene: Compromised Personhood in Afro-Chinese Translations* (University of California Press, 2023) .