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Emily Baum. *The Invention of Madness: State, Society, and the Insane in Modern China.* Studies of the Weatherhead East Asian Institute Series. Chicago: University of Chicago Press, 2018. 304 pp. \$37.50 (paper), ISBN 978-0-226-55824-0; \$112.50 (cloth), ISBN 978-0-226-58061-6.

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In the past decade, the proliferation of academic works on madness, its treatment, and its regulation in Asian countries in the early twentieth century suggests the emergence of a vibrant academic interest with an emphasis on its distinction from the Western world. As historian Howard Chiang notes, “the history of psychiatric medicine in Chinese culture challenges those conventional narratives that place Euro-American hegemony in a privileged position in the development of modern medicine.”[1] Following this trend, historian Emily Baum has published her first book, *The Invention of Madness: State, Society, and the Insane in Modern China*. This volume demonstrates the tension between modernity and the regulation of madness and insanity in early twentieth-century China.

In the first chapter, Baum addresses the birth of the Chinese government’s mental health regulations in the late Qing dynasty. The Qing government was subjected to multiple external pressures, such as Western missionaries’ concerns about insane people’s plight in Chinese society, foreign governments’ desire to integrate China into the expanding political order, and the model of the Meiji government in establishing government-sponsored mental hospitals in Japan. Therefore, the Chinese government was forced to change its attitude to institutionalizing mental patients in the early twentieth century. As Baum notes, “the policing of madness (alongside the policing of the sick, disabled, and poor) had come to be seen as an integral component of effective governance” (p. 40). Within the practice of disciplining mental health, government officials, especially the police

and court judges, rather than professional psychiatrists, steered its direction. Criminals with mental illnesses became the main goal of this disciplining because they were considered a menace to social order in Chinese society.

Chapters 2 and 3 analyze the institutionalization of the madman and madness in the first three decades of the twentieth century. As a consequence of external pressure, the Qing government opened the first government-sponsored asylum in Beijing in the last decade of the history of the Qing dynasty (1636-1912). In the early republican period, inmates in the asylum experienced a regime of policing and penalizing. Consequently, “madness gradually evolved from the intermittent expression of psychosomatic distress to a regulatory identity—one that could be upheld as justification for incarceration, even in the absence of criminal activity” (p. 62). In chapter 3, Baum discusses interaction between poor families and state government in the provision of philanthropic aid to insane patients and their relatives. Faced with the Beijing municipal government’s efforts to take control of mental health, poor families exercised their own agency in the struggle to improve welfare. By claiming themselves and their families as mental patients, poor residents in Beijing justified their demands for municipal government financial support. For example, tension developed between state government and the population over entitlement to pensions.

In chapter 4, Baum provides an alternative narrative of Chinese patterns in mental therapy. With an emphasis on the interference of consumerism in the definition

of mental illness, Baum demonstrates how “psychiatric entrepreneurs” successfully “expanded the taxonomy of the disorder as a way to attract the financial interests of Beijing’s moneyed consumers” (p. 14).

Baum devotes four chapters to discussing the fusion of Western biomedicine and Traditional Chinese Medicine (TCM). Chapter 5 demonstrates the procedure of pathologizing madness from the late 1920s. Through examining conflicts and collaborations between psychiatrists at the Peking Union Medical College and municipal authorities in Beijing, Baum points to tensions between local authorities and the medical profession in the control of madness in Chinese society. Chapters 6 and 7 explore the Kuomintang government’s use of mental hygiene for social control, while the final chapter discusses the coexistence and interaction of TCM and Western biomedicine in mental health in Chinese society.

Medical historians Bridie Andrews (*Making of Modern Chinese Medicine* [2013]) and Sean Hsiang-lin Lei (*Neither Donkey nor Horse: Medicine in the Struggle over China’s Modernity* [2016]) have previously demonstrated how TCM practitioners borrowed Western biomedical terms and technologies within the modernization of their “local knowledge” in opposition to biomedicine. Baum extends our knowledge of this pattern in mental health intervention. Meanwhile, her discussion of the interaction between social control and mental hy-

giene also illuminates the expansive nature of social control through mental health in Chinese society. Despite Baum’s contributions to expanding our knowledge of insanity, madness, and mental health in the republic period of China, there are occasional translation anomalies, such as the “Hongren Tang” frequently mentioned in chapter 2, which actually is “Tongren Tang” that was operated by the Le family in Beijing. Although claiming to be a volume on modern China, the focus of Baum’s book is on Beijing and her comprehensive consultation of the Beijing Municipal Archives. There are exceptions, such as attention to Shanghai Specialized Hospital for the Insane, but such disproportionate attention to Beijing as reflecting the development of mental health intervention in the context of urbanization and modernization in early twentieth-century China is found elsewhere, such as in Chinese historian Janet Y. Chen’s classic book *Guilty of Indigence: The Urban Poor in China, 1900-1953* (2012). Yet Baum’s insightful examination of the modernization of mental health in republican China provides an important step in furthering our knowledge of the interaction between mental health practice and modernity.

Note

[1]. Howard Chiang, “Introduction: Historicizing Chinese Psychiatry,” in *Psychiatry and Chinese History*, ed. Howard Chiang (London: Routledge, 2016), 15.

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