

Medical Propaganda and Cultural Communication: The Establishment, Development, and Influence of the German *Poliklinik* in Chongqing (1906–1919)

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Abstract: At the beginning of the twentieth century, cultural policy became a central element of Germany's expansionist foreign policy toward China. In this context, the German government had a *Poliklinik* established in Chongqing in 1906, intending to leverage “medical propaganda” to extend German influence. Despite these ambitions, the *Poliklinik* faced socio-political challenges and local resistance, which hindered its ability to fully realize the German government's political objectives. By the time the *Poliklinik* ceased operations in 1919, it had not achieved the strategic impact anticipated by Berlin. However, the *Poliklinik* contributed significantly to fostering mutual understanding and facilitating cross-cultural communication in the medical field between China and Germany. Thus, while initially conceived as an instrument of Germany's cultural policy, the actual social and cultural influence of the *Poliklinik* on Germany and China was rather constructive: it had not only enhanced the understanding of German medicine and culture among the Chinese people, but also promoted knowledge about Southwest China's medical conditions among the German academic community.

Keywords: German *Poliklinik* in Chongqing, Germany's cultural policy towards China, medical propaganda, Southwest China, Sino-German relations

摘要: 20 世纪初, 文化政策成为了德国对华扩张性外交政策的核心。在这一政策环境下, 德国政府于 1906 年派人到重庆创办了一家德国诊所, 旨在通过“医疗宣传”来

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扩展德国在中国的影响力。不过,受制于重庆当地复杂的社会政治氛围,直至1919年该诊所停办时,它也并未完全实现德国政府预期的政治目的。尽管重庆德国诊所最初作为德国推行对华文化政策的工具而设立,但它在德国与中国最终产生的社会与文化影响是具有建设性的。它不仅增进了中国人对德国医学和文化的了解,也促进了德国学界对中国西南医疗状况的认识。

关键词: 重庆德国诊所, 德国对华文化政策, 医疗宣传, 中国西南, 中德关系

At the turn of the twentieth century, the so-called “Cultural Policy” (*Kulturpolitik*) was confirmed as the core of Germany’s expansion policy toward China, that is, “to expand German interests in China by exporting German culture to China.” Previous discussions of this cultural policy have mainly focused on Germany’s educational activities in China (Reinbothe 1992; Huang 1995; Cui 2012). The reason for this is rather obvious: schools and other educational institutions were the most direct and effective way to promote German culture, and therefore served as the main instrument for Germany’s cultural policy in China.

Beyond education, the founding of hospitals and conducting other medical activities closely related to peoples’ daily lives were important means by which Germany implemented this cultural policy. Existing studies on this topic have mainly focused on German medical activities in Shandong, Guangdong, and Shanghai due to the large number of Germans active in these regions. German historian Wolfgang Uwe Eckart (1989) has discussed in detail the role of German doctors in Shandong, Guangdong, and Shanghai during the period 1897–1914, and emphasized the role of medicine as a cultural tool in German expansion into China. In addition, there have been a number of studies focusing on German medical activities in one specific region, for example, on the medical mission of the German Church in Guangdong or Shandong (Riedl 1985; Gerber 2014), on German military medical activities in Shandong (Schrecker 1971, 79–83, 214–217; Helm 1994), and on Tongji Medical College 同济德文医学堂 (*Deutsche Medizinschule für Chinesen*) in Shanghai (Bieg-Brentzel 1984; Li 2007). However, the noteworthy case of the German *Poliklinik* in Chongqing (hereafter referred also as “Chongqing *Poliklinik*”),¹ founded directly by the German government and operated from 1906 to 1919, has to date rarely been discussed in detail. Existing studies have only briefly mentioned the construction and development of the Chongqing *Poliklinik*, without delving into its operations and its close relationship with Germany’s cultural policy towards China. Furthermore, they have not paid attention to the fact that this case shows that German medical activities as an implementation of Germany’s cultural

1 The term *Poliklinik* is used here in its original form and sense as in the German archives and documents investigated in this paper, although it has also been absorbed into English as “polyclinic” today. It should be noted here that *Poliklinik* in the German sense is in fact not a real “clinic,” but a general hospital or health care facility that provides both general and specialist examinations and treatments for a wide variety of diseases and injuries to outpatients.

policy were not limited to coastal areas, but extended into and were well-established in Southwest China (Zhou 2014, 554; Yuan 2021, 83, 122–124).

To explore the history of the Chongqing *Poliklinik* in depth, this paper relies on an investigation of several historical sources: the archives of the German Embassy in China (Deutsche Botschaft China, R9208) and the personal writings of Paul Assmy (1869–1935)²—the main director of the *Poliklinik*, contemporary news reports related to the *Poliklinik*, records and evaluations of various people with whom the *Poliklinik* had direct contact, and so on. Official correspondence between German diplomats stationed in Shanghai, Chongqing, and Chengdu, and the German Foreign Ministry concerning the *Poliklinik* has been crucial for this research. Additionally, Assmy's official reports to the Foreign Ministry, his personal work journals and research publications, as well as records of his communications with family and friends in Germany have been essential. Assmy's family have edited and compiled many of these latter documents for publication.³ These valuable sources, which have hardly ever been publicly discussed in academia before, not only provide the basis for this study, but also constitute the main motivation for its research framework.

Based on a detailed investigation of these unpublished diplomatic archives and other German source materials, this paper first reconstructs the founding and operation of the Chongqing *Poliklinik*, then studies the political motives and primary goals of the German government regarding it, and finally evaluates its achievements as well as its role in the history of modern Sino-German relations. Through this case study, this paper not only tries to provide a new perspective for evaluating German medical activities in modern China, but also aims to offer a deeper understanding of the complexities of certain aspects of the “motives and actual implementation” of Germany's cultural policy towards China. Furthermore, it hopes to illuminate two important features in the history of modern Sino-German relations, that it was “two-way/mutual” and “interactive” (Sun 2014, 40).

1 The commencement of Germany's medical activities in Chongqing

1.1 The context and formation of Germany's cultural policy towards China

In 1861, the Prussian government compelled the Qing government to sign the Sino-German Treaty of Commerce, thereby establishing trade relations with China on

2 Paul Assmy was born in 1869 in the Prussian province of Posen (now in Poland). From 1889 he studied medicine in Kiel, Munich, Berlin, and Heidelberg, obtaining a license to practice in 1897 and a doctorate in medicine from the University of Heidelberg in 1898.

3 For more information on Assmy's work in China, see the Assmy's biography website (<http://www.assmy.net>), completed by his grandson, Wolfgang Assmy, and his daughter-in-law, Christine Assmy.

behalf of the German Customs Union and initiating its expansion in China.⁴ Unlike Britain and France, Germany did not overtly exhibit imperialistic ambitions towards China, and its early expansion in China was mainly focused on economic interests. In 1896, Germany became the second largest trading partner with China after Britain (Leutner 1997, 56). In the same period, Germany began to implement Wilhelm II's "World Policy" (*Weltpolitik*), shifting its focus from the pursuit of European dominance to the pursuit of global hegemony. Consequently, Germany's policy towards China, previously centered on economic expansion, underwent a transformation: Germany occupied Jiaozhou 胶州 by force and actively participated in the invasion of China by the Eight-Power Allied Forces. However, the German government soon realized that military expansion was not in line with Germany's long-term interests in China. As a "rising imperialist power with rapidly increasing industrial production and a keen desire to broaden its product markets," Germany's objective was to remain "to extend its economic interests in China" and persist in seeking "peaceful" expansion in China, as well as to "increase trade with China" (Li 2007, 10)—a policy direction reaffirmed after the Boxer Protocol was signed in 1901. The so-called "German cultural policy" towards China thus emerged, and as late as 1902, Alfons Mumm von Schwarzenstein, the German ambassador to China, explicitly proposed to the German government the pursuit of a cultural policy in China (Mühlhahn 2000, 238).

The notion of a cultural policy towards China was closely related to Germany's attempts to extend its influence internationally at that time. "To achieve economic expansion on the global stage, it was imperative not only to secure this through military might and colonial exploitation, but also to leverage cultural influence to foster a long-term reliance of less powerful nations on Germany" (Reinbothe 1999, 174). That is to say, Germany aspired to dominate the Chinese market by means of cultural exports. The Jiaozhou Leasehold, for example, which had been established through military conquest, diligently carried out the strategy of extending Germany's economic interests in China through cultural initiatives, as evidenced in the Governor's Office work report for the year 1907/1908: "The further development of this colony into a cultural center of Europe, and specifically of Germany, in East Asia, stands as an important objective for the naval authorities. The authorities are convinced that such an initiative will concurrently advance the economic interests of the Germans" (Kaiserliches Gouvernement Kiautschou 1909, 10).

4 The Sino-German Treaty of Commerce gave Prussia and the other member states of the German Customs Union privileges in China equivalent to those enjoyed by the major powers, including Britain and France. These privileges were subsequently inherited by the German government following the unification of Germany in 1871.

The Qing government's "New Policy" 新政 initiative and "Westernization" reforms that followed the Boxer Rebellion presented a favorable opportunity for foreign powers, including Germany, to become more deeply involved in Chinese affairs and at the same time inspired Germany to increase its "sense of competition" for cultural expansion in China. The German government intensified its cultural endeavors in China, aiming to "counteract the creativity of the mainly private missionary groups in England and the United States with a well-targeted cultural policy initiated, financed, and organized by the state" (Mühlhahn 2000, 240), and to "disseminate German spiritual life on a large scale to the rising new China in a planned manner and to a certain extent, and to make it understandable to the new China" (Kaiserliches Gouvernement Kiautschou 1909, 15). In this way, Germany sought to compete with the already entrenched Anglo-American cultural influence in China.

Hence, Germany's cultural policy towards China was predominantly characterized by a government-initiated "one-way export of strong culture" (Li 2007, 12) within the context of its overseas outreach, that is to say, publicizing the unique charm of German culture (compared with that of Britain and the United States) through cultural exports to China. The aim was to solidify and expand German privileges and interests in China by enhancing the influence of German culture there.

Regarding the specific methods encompassed by Germany's cultural policy towards China, the "German-Chinese Association" (*Deutsch-Chinesischer Verband*), a specialized agency tasked with executing German cultural initiatives in China, outlined in its 1914 statute that it should seek to "establish, maintain, or finance German-Chinese schools of all kinds, as well as German-Chinese hospitals and sanatoriums, to send German teachers and doctors to Chinese schools and hospitals, to set up libraries, language courses, and translation institutes, to issue suitable publications in China, to finance research trips to China for the scientific and economic community, to finance Chinese students studying in Germany, to provide economic counseling to members of the Association, and to take other culturally and economically appropriate measures" ("*Deutsch-Chinesischer Verband*" 1914, 390). The inclusion of terms such as "hospital," "sanatorium," and "doctor" alongside "school," "library," "language course," and "teacher" indicates that, in addition to education, medicine was also considered to be a significant cultural instrument by which Germany could expand its interests in China.

German medical activities in China can be traced back to the time before the Opium Wars, and in the early days were led by Christian missionaries. Medical care began as one of the instruments used by missionaries to spread the Christian gospel to the Chinese, and gradually transformed into a mode of exporting medical culture in the context of German expansion there. Through the end of the nineteenth century and the beginning of the twentieth century, German missionary doctors, government doctors, medical teachers, and other medical personnel were sent to China. Although they had

different purposes and tasks in China, they all exported German medical culture to China in their own way as “culture bearers” (*Kulturträger*) (Eckart 1989, 3). Unlike the earlier period, when the missionary societies in China mainly promoted their missionary work through medical aid, during this period, with the increase of Germany’s pursuit of its interests in China and the enhancement of its intention of peaceful expansion, the Germans who came to China became more and more aware of a “medical-cultural policy,” that is, the pursuit of a cultural policy towards China through medicine and to expand Germany’s interests in China in a cultural way. The Tongji Medical College established in Shanghai in 1907 was an important part of this “medical-cultural policy” towards China (Cui 2014), and the medical activities carried out by the German government in Chongqing during the same period were also guided by this policy.

1.2 Germany’s political motives and plans for its medical activities in Chongqing

Following the ratification of the Sino-British Treaty of Yantai, also referred to as the “Treaty of Chongqing,” Chongqing was officially opened for trade on March 1, 1891. Consequently, the British, French, American, and Japanese powers progressively established a presence in Chongqing and extended their influence throughout the Sichuan region.⁵ Similar to developments in other regions of China, these foreign powers competed for dominance in Southwest China. To further its interests, the German government also intensified its cultural penetration into the area.

In 1904, the German government established a consulate in Chongqing to handle negotiations in Sichuan Province, and at the same time dispatched a vice-consul to Chengdu⁶ to support the consulate’s operations in Chongqing (Zhou 2014, 236). Based on the local situation, the German officials in Sichuan applied to the German government to dispatch a consular doctor to support the daily work of the consulate. In January 1905, they obtained initial approval from the German government. However, instead of immediately deciding on the candidate to send to Sichuan and where the doctor should be based, the German government sought confirmation from the consular officials regarding the efficacy in protecting German interests of dispatching doctors to the new consulate.⁷

5 During the period studied in this paper, Chongqing was part of Sichuan Province.

6 Chengdu was not a trading port and foreigners were not permitted to set up a consulate in Chengdu according to the contract. However, in view of its political significance as the capital of Sichuan Province and its convenience for establishing business contacts between Westerners and officials in the province, France had set up a consulate forcibly without the permission of the Qing government there in 1902. Other Western powers followed suit, making the city a residence for foreign consulates.

7 Bericht des Auswärtigen Amts an den Kaiserlichen Generalkonsul Dr. Knappe, 19. 1. 1905, Bundesarchiv (BA), Deutsche Botschaft China (DBC), Deutsche Ärzte in China (1886–1908), R9208/792, Bl. 158.

In March 1905, the German vice-consul in Chengdu, F. W. K. Busse, submitted a detailed report emphasizing the importance and practicality of extending German influence in Southwest China through “medical propaganda” (*ärztliche Propaganda*):

Firstly, the issue of necessity arose, specifically the question of why undertake this action. Busse points out that the main reason for choosing to use medical means for cultural penetration in Sichuan was that Britain, the United States, and France had already gained a clear advantage in the fields of Christian missions, education and even military affairs,⁸ so that Germany, as a latecomer, was not able to exert its influence in these fields. In the realm of medicine, Sichuan still lacked modern medical and health institutions, and the local people still regarded Chinese medicine as the main means of medical treatment; the only Western medical facilities in the region were part of missionary activities—“medical missions”—conducted since the mid-nineteenth century, providing space for the implementation of a secular “medical-cultural policy.” As a result, Busse was convinced that, despite the difficulties of conducting medical activities in Sichuan, “a skillful [German] doctor, completely independent of the missions” “would be able to succeed in his work here and to access the upper echelons of Chinese society.”⁹

Secondly, there was the question of feasibility, that is, the question of “how it should be done.” In his first reply to the government in February 1905, Busse makes it clear that, “if sufficient funds are available,” the best option would be to “set up a small *Poliklinik*,” and that dispatching a doctor to be based at this *Poliklinik* “would best meet expectations and further our interests.”¹⁰ In his March report, Busse then proactively offers a concession to the government in order to expedite the plan of sending a doctor: “If the government does not have sufficient funds at present to maintain a German *Poliklinik* while sending a senior doctor,” a young consular doctor could initially be dispatched to share the daily workload of the consulates in Chongqing and Chengdu, though “in such a way it would be difficult to promote German interests directly, but even if the medical activities were limited, the German doctor would at least come into contact with the very reserved population of Sichuan, and lay a solid foundation for broader German cultural initiatives in western China in the future.”¹¹ Busse thus emphasizes the political significance and promising prospects of medical activities backed by the German government, steering clear of any missionary undertones.

Based on Busse’s report, the German government’s initiative to dispatch a consular doctor to Sichuan was officially formalized. The political impetus behind Germany’s

8 Bericht über die Entsendung eines deutschen Arztes nach Chengtu, 28. 3. 1905, BA, DBC, R9208/792, Bl. 179–180.

9 Bericht über die Entsendung eines deutschen Arztes nach Chengtu, 28. 3. 1905, BA, DBC, R9208/792, Bl. 183.

10 Bericht Dr. Knappes an den Reichskanzler, 1. 3. 1905, BA, DBC, R9208/792, Bl. 161.

11 Bericht über die Entsendung eines deutschen Arztes nach Chengtu, 28. 3. 1905, BA, DBC, R9208/792, Bl. 183–184.

“medical-cultural policy” was evident: to bolster German influence and extend German interests in Southwest China through medical propaganda. The decision-making process of the German government for the selection of doctor to be sent to Sichuan and the selection of his residence was as follows:

First of all, after careful assessment, Paul Assmy, a German military doctor with experience in China and who had travelled to Sichuan, emerged as the optimal candidate. Assmy came to China in 1900 as a lieutenant doctor in the German East Asian Expeditionary Corps, tasked with quelling the Boxer Rebellion; by September 1903 he had carried out medical work in Beijing, Langfang 廊坊, and Yangcun 杨村 in Tianjin 天津. During his subsequent travels from Beijing to Burma, he investigated the medical conditions in various parts of China, and shared with Heinrich Betz, then the German consul in Yichang 宜昌 and later the consul in Shantou 汕头 (Swatow), the acting head and interpreter at the consulate in Tianjin, the consul in Ji’nan 济南, his observations and opinions about the French mission hospital in Chengdu. He notes that the situation of the French mission hospital showed that there were great difficulties in combining medical and missionary operations in Sichuan, and it was for this reason that the French government was planning to set up a hospital in Chengdu that was independent of the Catholic church (Assmy n.d.b.). At the conclusion of his first stay in China in April 1904, Assmy returned to Germany to continue his work in the army and was soon promoted to the rank of captain surgeon, though he still harbored a persistent desire to be redeployed to China. After applying for the position of consular doctor in Sichuan, he received swift support from the German Minister to China, Mumm, the interpreter at the consulate in Tianjin, Betz, the Minister of Defense, and others.¹²

Secondly, a choice needed to be made concerning where the doctor would be stationed, the options being Chengdu and Chongqing. Chengdu, home to numerous dignitaries and the provincial capital of Sichuan, with its progressive reformative perspective, appeared to be the ideal location for carrying out German medical propaganda in Sichuan. On the other hand, Chongqing, after over a decade of growth, had emerged as the commercial gateway to Sichuan. It had a large population, a prosperous economy, and many privileges as a treaty port that Chengdu did not have,¹³ making it equally suitable for the German “medical-cultural policy.” Both cities

12 Bericht des Auswärtigen Amtes an den Kaiserlichen Generalkonsul Dr. Knappe, 22. 6. 1905, BA, DBC, R9208/792, Bl. 185.

13 From 1840 to 1890, Chongqing experienced a significant population growth, swelling from under 100,000 to approximately 200,000 residents. Before its opening as a treaty port in 1891, the downtown area was “only around Shaanxi Street and Linsen Road on the riverbank, covering an area of only about 4 square kilometers.” However, after 1891, the local economy experienced a dramatic surge, and Chongqing “swiftly emerged as a pivotal shipping hub on the upper Yangtze River and a bustling commercial center.” By 1901, the population had surpassed 300,000, and by 1918 it had grown further to approximately 450,000. See Zhang et al. (1999, 19–20, 102–103).

were already within British, American, French and Japanese “medical spheres of influence”; therefore, the key factor influencing the decision was in which city “German medicine” would have a competitive advantage. The pivotal figure in this decision was Fritz Weiss, the interpreter at the Chengdu consulate (Weiss 2009, 61). Weiss arrived in Chengdu in 1905 as an interpreter and was transferred to Chongqing a few months later. He was actively interested in promoting German “cultural work” (*Kulturarbeit*) in Sichuan, and through negotiations with Chongqing government officials, he managed to secure for the incoming German consular doctor the opportunity to work in government offices and educational institutions as well.¹⁴ In other words, if the doctor were to be stationed in Chongqing, he would be able to engage more extensively with the local government and educational community in addition to carrying out the consulate’s medical work. Moreover, the British and Americans had already established a strong presence in Chengdu, and a new doctor would not have a competitive advantage if stationed there. After comprehensive consideration, the German government decided to locate its doctor in Chongqing to better fulfill the objectives of the German “medical-cultural policy” in Sichuan.

Consequently, following over a year of preparation and deliberation, Assmy was officially appointed as the German consular doctor in Chongqing in October 1905. He set off from Germany the following January and arrived in Chongqing in April 1906. With his arrival, the German government was at last able to implement its planned medical activities in Chongqing.

2 The Chongqing *Poliklinik* and German medical propaganda as the primary goal

2.1 The establishment and achievements of the *Poliklinik* under Assmy’s leadership

Upon his appointment as a consular doctor in Chongqing, Assmy began to plan his future work in earnest. In March 1905, the German vice-consul in Chengdu, Busse, had “compromised” in his report to the government, suggesting that the opening of a German *Poliklinik* would not be a priority if there were insufficient funds.¹⁵ Assmy took a different view, however. He emphasized that the establishment of a German *Poliklinik* was an essential method for conducting medical propaganda in western China and made specific demands regarding the resources required: “Based on my experience in

14 Bericht über Zuteilung des Dr. Assmy an das Kaiserliche Konsulat für die Provinz Szechuan, 28. 7. 1905, BA, DBC, R9208/792, Bl. 242–243.

15 Bericht über die Entsendung eines deutschen Arztes nach Chengtu, 28. 3. 1905, BA, DBC, R9208/792, Bl. 183–184.

northern China under almost identical conditions, it seems urgently necessary to me that a [medical] organization, equipped with not too few resources, should introduce itself to the locals. . . . Even if only a small *Poliklinik* is to be maintained on a trial basis, it is in the interests of Germany for it to have sufficient resources.”¹⁶ The German government backed Assmy’s proposal and allocated 4000 marks, enabling him to acquire medical equipment, including microscopes, cameras, stethoscopes, sphygmomanometers, and surgical tools, as well as other medical consumables including medicines, antiseptics, anesthetics, and bandages for the *Poliklinik*.¹⁷

In April 1906, Assmy officially arrived. One of his initial challenges was the unexpected turnover of officials within the Chongqing government, which resulted in the collapse of the work arrangements set up by the consulate’s interpreter, Weiss. Consequently, Assmy was unable to fulfill his plan of taking on a role in the Chongqing government alongside his consular medical duties, a position that would have provided him with additional opportunities to engage with the local elite.¹⁸ Thus, Assmy lost the greatest advantage provided by the choice of Chongqing as a location. He was now mainly reliant on his medical practice to pave the way for the dissemination and influence of “German medicine” and “German culture” throughout Southwest China. He had previously emphasized to the government the imperative of establishing a *Poliklinik* in Chongqing, framing it as a matter of protecting German national interests; in this new situation, the reasons he had used to obtain government support became even stronger. As he articulated to the German government on May 14, 1906: “We cannot afford to delay any further, as the French and Americans appeared to be inciting resistance against German initiatives!” (Assmy 1906b)

The German *Poliklinik* in Chongqing was opened in July 1906. By this time, British, French, and American mission hospitals had been functioning in Chongqing for several years, enjoying relatively strong popular support. This situation presented a double-edged sword:

On the one hand, the public’s comprehension of and trust in Western medicine had been steadily growing, favoring the establishment of medical activities by the *Poliklinik*. At the outset of Chongqing’s opening in 1891, local officials had barred foreigners from entering the inner city to prevent potential conflict between them and the indigenous population. Consequently, foreign businesspeople and diplomatic personnel chose to settle on the south bank of the river across from the main city, establishing consulates, concessions, foreign banks, factories, villas, and hospitals. Thus, several of foreign powers that had arrived in Chongqing before Germany had been through a challenging

16 Bericht Dr. Assmys an den Reichskanzler, 1. 9. 1907, BA, DBC, R9208/792, Bl. 378.

17 Erlass des Auswärtigen Amts an Dr. Assmy, 27. 12. 1905, BA, DBC, R9208/792, Bl. 260.

18 Bericht des Kaiserlichen Konsulatsverwesers Weiss an den Kaiserlichen Generalkonsul, 5. 12. 1905, BA, DBC, R9208/792, Bl. 255–256.

process before ultimately overcoming public fear of foreigners and establishing their cultural and regional influence (Renshaw 2005, 124–125, 281). This was particularly evident in the realm of medical activities. As a result, when Assmy arrived in Chongqing, the public was already acquainted with Western medicine and foreign doctors, and the apprehension towards Western medicine that had been prevalent in the nineteenth century was no longer widespread. As Assmy reported, he treated 4287 patients in the first year of the *Poliklinik* (Assmy 1909b, 403). Furthermore, from July 1, 1909 to June 30, 1910, 2042 patients were treated there, even though Assmy was on leave during that period (Assmy 1911, 113). This demonstrates that his practice faced minimal disruption due to social customs.

On the other hand, having been there more than a decade, Britain, France, and the United States had already established medical institutions with significant social influence and widespread public acceptance, so the *Poliklinik* faced competition with them from its inception. Take the American hospital as an example. In November 1890, James McCartney and his wife were dispatched to Chongqing by the American Methodist Church to engage in missionary work and medical practice. They initially established a temporary clinic in March 1891, followed by the construction of the “Kuan-jem-J-juan” 宽仁医院 (Chungking General Hospital) in 1892, which became known as “the first Western hospital in Southwest China.” In 1902, McCartney founded the “William Gamble Memorial Hospital for Women and Children,” specifically designed to cater to female patients. American medicine, as represented by McCartney, had already secured broad influence and a sterling reputation in Chongqing and across the vast region of western China.¹⁹ Assmy was well aware of this situation, as evidenced by the naming of the *Poliklinik*. He carefully compared the Chinese names of the French, British, and the US hospitals and then gave the *Poliklinik* a more appealing name. This indicates that from the outset, Assmy had prepared to compete with these three hospitals.²⁰ Therefore, it was the goal of Assmy to enhance the influence of the *Poliklinik* by giving the people of Chongqing and China the impression that German hospitals were not inferior to those of France, Britain and the US, and were even more accessible.

19 See “First Annual Report” (1893); “William Gamble Memorial” (1916).

20 As he detailed in his diary on 2 June 1906: “We put up a prominent sign outside the building— ‘Da-dö. Pu-dohi-J-yüen,’ [sic] literally ‘The Great German General Help Healing Institute.’ For reference, the French hospital is called ‘Jenn-ai-tang 仁爱堂,’ literally ‘Hall of Charity’ or ‘Charity-Hall’; the American hospital ‘Kuan- jem [sic]-J-juan 宽仁医院,’ literally ‘Healing Institute for the Exercise of General Charity’; the Japanese hospital ‘Jenn-dchi-J-Jüon 仁济医院,’ literally ‘Healing Institute for Welfare and Help.’” See Assmy (1906a). The spelling of “Da-dö. Pu-dohi-J-yüen” does not quite correspond to the *Poliklinik*’s official Chinese name “大德国普济医院”; it is likely an error introduced during the transcription of Assmy’s diary manuscript. A more commonly found spelling in other German archives is “Ta-te-kuo-pu-che-yi-yuen.”

Assmy's initial task was to provide a better patient experience in terms of reception, treatment, and hospitalization, in order to establish trust and a positive reputation within the local community as soon as possible. With limited start-up funds, Assmy organized the rooms of the *Poliklinik* in the most logical way, placing patient welfare at the forefront. This patient-centric approach was evident in several aspects: he established three wards, each with five beds (with two additional wards, accommodating two and three beds, respectively, added in 1907), along with dedicated toilets, bathrooms, and dining areas for the patients' comfort; upon admission, all patients were required to bathe and change into clean gowns; patients were also provided with three meals a day by the *Poliklinik*, including rice, vegetables, and meat (Assmy n.d.a). "Costs for patients who cannot pay will be covered by donations from consulate collections in Chungking and Chengtu," he planned, so that "health care for the poor local population" would be ensured in his hospital (Assmy 1909b, 404). These conveniences and humane considerations were highly appealing to patients.

Secondly, Assmy viewed his sacred duty as a doctor as inseparable from his private life. He gave up material pleasures and dedicated considerable effort to mastering the local language and customs, with the aspiration of assimilating into the community swiftly, so that the work of the *Poliklinik* could be carried out more smoothly. This determination is best demonstrated by the fact that he even gave up the comfortable accommodation provided to him by the German consulate in Chongqing, and "decided to live in the *Poliklinik*," where living conditions were spartan and it was stifling hot during the summer. He gave four reasons for this: (1) "The *Poliklinik* is 30 minutes away from the consulate by sedan," and he didn't want to "go through the city twice a day" and "lose any time with the constant back and forth." (2) He could always be there whenever the patients needed him, because living in the hospital meant "I always have my things to hand." (3) He wanted to personally make sure that all the "expensive equipment is not exposed to the break-ins that are common here without European protection." (4) The biggest advantage of living in the hospital was that he could "mingle" with Chinese assistants, translators, and patients at any time. Or as Assmy put it, "I can always deal with Chinese people and thus learn the language more quickly" (Assmy 1906b).

In his report to the German government, Assmy expressed his gratitude for the fact that "the empire is still striving very hard to bring Germans (like myself) into Chinese state positions," and took the opportunity to show his determination to do his best to learn Chinese language and culture and become integrated: "So I've thrown myself into Chinese, not only do I have to learn to speak, but above all, I also have to learn how to read!" (Assmy 1906c)

Thirdly, from the outset, Assmy recognized that a skilled doctor was the most vital asset of a medical institution. Therefore, he used his professional knowledge and

experience to establish himself as the “star attraction” of the *Poliklinik*. This certainly enhanced the reputation of the *Poliklinik* as the “latest to open” in the region. In 1906, during the *Poliklinik*’s first year of operation, Yamakawa Sosui, a Japanese teacher at the Sichuan Provincial School of Higher Education, travelled to Chongqing and offered the following observations on several foreign clinics and hospitals there: “It is said that this [German] hospital, founded by a military doctor who formally studied medicine, is far superior to the first three [hospitals opened by Britain, France, and the US], and is gradually gaining popularity.”²¹ Assmy himself wrote with pride in 1907: “Almost every local Chinese and foreigner knows that there is a German *Poliklinik*. It is not difficult to find guides in the city who are willing to show the way if one asks where the German *Poliklinik* is. I myself am frequently addressed as ‘German doctor’ by small children while walking in the streets.”²² As is evident, thanks to Assmy’s efforts, the *Poliklinik* quickly became well-known and highly esteemed by the local populace not long after its opening.

It is noteworthy that during his stay in Chongqing, Assmy never forgot his political mission of competing with the British, French, and Americans for the advancement of German interests in China. In his diaries (fully aware that they might one day be disclosed) and in his reports to the German government, he consistently and skillfully adopted a “narrative of competition” that German officials would have liked. He gleefully reported that the British consulate was adjacent to the *Poliklinik*, affording him frequent opportunities to play tennis with the British consul and “other gentlemen,” boasting that “thus far, I have bested them all.” He even proudly invoked a German adage “*Keiner konnte ein Bein auf die Erde bringen*,” which translates to “They can’t score a point against me” (Assmy 1906a).

This competitive mindset was naturally reflected in Assmy’s career at the *Poliklinik* as well. His objective was straightforward: to elevate German medicine to the forefront of international competition. He was convinced that, given the good standard of the medical facilities of other Western countries in Chongqing, relying solely on the technical prowess of German doctors would not suffice for the *Poliklinik* to attain the desired level of recognition. He articulated his thoughts clearly to the German government and sought their support:

The *Poliklinik* in this region aims to effectively promote German culture and values. However, the era when mere improvisation could sufficiently demonstrate the merits of Western expertise and knowledge to the local populace has passed, even in China. With the increasing familiarity of many Chinese with European medical practices, and the

21 “A military doctor who formally studied medicine” refers to Paul Assmy. See Yamakawa (2019), 211.

22 Bericht des Stabsarztes Dr. Assmy an den Reichskanzler, 1. 9. 1907, BA, DBC, R9208/792, Bl. 380–381.

presence of well-established French and American hospitals even in the interior, the German Empire cannot afford to enter the arena with a *Poliklinik* operating on a minuscule scale and with scant resources. Should additional funds for a more substantial hospital not be immediately available, it is imperative to seize this opportunity to provide some good (medical) equipment as an advertisement for our *Poliklinik* to enhance our appeal.²³

One curious detail is worth noting here. As the work of the *Poliklinik* progressed smoothly, the German government proposed in May 1907 to withdraw financial support for it starting from the fiscal year 1908/1909, thereby requiring it to sustain its daily activities solely through its own revenues.²⁴ Not only did Assmy strongly protest against this directive, but the officials at the German consulate in Chongqing and the consulate general in Shanghai also believed that this decision was incongruent with the local conditions in Chongqing. In response to the proposed funding cut, they advocated an increase in financial aid to the *Poliklinik*, aiming to bolster its competitiveness in international medical activities within the city. This would more effectively showcase the prowess and allure of German medicine and fulfill its medical propaganda mission. The report, written by Wilde, interpreter at the Chongqing consulate, was forwarded to the Imperial Chancellor (*Reichskanzler*) by the consul general in Shanghai, Paul von Buri, explicitly outlining these demands:

The renown of the *Poliklinik* extends to the far reaches of Sichuan Province, while its burgeoning appeal among the affluent circles of Chongqing, and the esteem it has garnered from Chinese officials in the provincial capital, who contribute generously to the *Poliklinik*, compel us to enhance its facilities and to perpetually elevate the services we offer to our patients. A fundamental requirement for this endeavor is the modernization of the wards and the acquisition of a larger, more versatile building.

This will inevitably incur additional expenses, encompassing higher rents, the cost of refurbishing the premises, and the requisite funds for upgrading the equipment.

...

Furthermore, to preserve its reputation and fulfill its mission of enhancing and disseminating German prestige, the *Poliklinik* must, in the long term, consider seeking additional funding, especially when comparing the financial investments made by other Western countries in medical (missionary) activities. The *Poliklinik* . . . must engage in competition with these Western nations in the medical field. Otherwise, we will fall short of our objectives.²⁵

23 Bericht des Stabsarztes Dr. Assmy an den Kaiserlichen stellvertretenden Generalkonsul, 7. 6. 1906, BA, DBC, R9208/792, Bl. 287–288.

24 Erlass des Herrn Reichskanzlers an den Kaiserlichen Generalkonsul. Shanghai, 31. 5. 1907, BA, DBC, R9208/792, Bl. 375.

25 Bericht des Kaiserlichen Dolmetschers Wilde an den Kaiserlichen Generalkonsul von Buri, 18.

In response to Assmy's objections and the protests and support from other German officials in China, the German government withdrew its proposal to cease financial aid for the *Poliklinik*. However, the anticipated financial support for renting a larger facility, upgrading medical equipment, and other improvements to the *Poliklinik*, which both Wilde and Assmy had advocated for, failed to materialize.²⁶ This shortfall adversely affected the next development phase of the *Poliklinik*.

2.2 Relocating the *Poliklinik* to better serve medical propaganda: A debate and its outcome

As the influx of outpatients and inpatients grew, the inadequacy of the space available and the deteriorating condition of the building became increasingly evident. At the close of 1908, the military building inspector attached to the German Embassy in Beijing conducted an inspection of the *Poliklinik* in Chongqing and concluded that "the development of the *Poliklinik* has been seriously hindered by the state of its premises."²⁷ His report indicated that there was no viable option for upgrading the *Poliklinik* building to support its sustained development and the sole remedy was to erect a new structure on a different site. This led to a deliberation among German officials in China over its relocation. The two proposed options were to transfer it to Chengdu or to construct a new facility in Chongqing. The debate centered on which option would better serve German medical propaganda and, by extension, advance Germany's political and economic interests in Southwest China.

The first option was proposed by Weiss, who had been promoted from consular interpreter to acting German consul for both Chongqing and Chengdu. In February 1909, he initially voiced his opinion that the *Poliklinik* should be relocated to Chengdu, a stance on which he subsequently elaborated several times. In his view, the creation of the Chongqing *Poliklinik* had actually been a temporary choice, and the factors that originally supported this choice no longer existed; under the new circumstances Chengdu was apparently a more suitable place for a newly built German *Poliklinik*.²⁸ Wilde, the consular interpreter, concurred with the proposal, and he further argued²⁹ that the role of the *Poliklinik* in Chongqing as a propaganda entity was first and foremost "to make the German name known to the general public." The development

6. 1908, BA, DBC, Deutsche Ärzte in China (1908–1913), R9208/793, Bl. 19–20.

26 Bericht des Kaiserlichen Generalkonsuls von Buri an den Kaiserlichen Gesandten von Rex, 20. 1. 1909, BA, DBC, R9208/793, Bl. 42.

27 Bericht des Militärbaupinspektors Boerschmann, 6. 11. 1908, BA, DBC, R9208/793, Bl. 125–129.

28 Bericht des Kaiserlichen Konsultsverwesers Weiss an den Kaiserlichen Generalkonsul, 10. 5. 1909, BA, DBC, R9208/793, Bl. 52–53.

29 Bericht des Kaiserlichen Dolmetschers Wilde an den stellvertretenden Generalkonsul, 17. 6. 1909, BA, DBC, R9208/793, Bl. 81–90.

of the *Poliklinik* had indeed achieved this objective, earning “the trust of Chongqing’s residents and the recognition of provincial and Chengdu officials. It will also be able to fulfil this task further, in the same way, in the same house, in the same place.” However, the government’s aim in funding the *Poliklinik* was not limited to just this. On the one hand, the aim was to advance Germany’s interests in China by competing with other nations for China’s attention and to engage in its reform processes. On the other hand, the goal was to realize Germany’s political interests in Sichuan, specifically “to facilitate health reforms within the province with German assistance.” To attain these ends, it was imperative to showcase “the progress of German medical science and technology” in China. The current *Poliklinik*, however, was deemed unsuitable in terms of both size and location. Thus, his conclusion was that it should be relocated to Chengdu and rebuilt with reasonable funding.

The representative figure of the opposing position was von Buri,³⁰ the consul general of Shanghai, who pointed out that the Chongqing *Poliklinik* had accomplished considerable achievements under Assmy’s leadership, and that Germany would undoubtedly suffer a double loss of funds and reputation if it were to be suddenly abandoned. Moreover, based on his understanding of Germany’s current financial situation and the strategic layout of cultural undertakings in China, von Buri believed that Sichuan should not be the focal point for Germany’s cultural activities in China, and the government should not bear the high costs that would inevitably be incurred by relocating the *Poliklinik* to Chengdu. Therefore, a much better option was to find a more suitable property in Chongqing and reconstitute the *Poliklinik* there. Most importantly, also, he emphasized that Assmy, the central figure in the whole enterprise, held the same opinions as he did.

As a staged conclusion to this debate, the *Poliklinik* was relocated into a relatively spacious property in Chongqing in April 1911 and continued to operate from there. However, following the Xinhai Revolution of 1911, the same debate in an “upgraded” form was brought up again by German officials stationed in China. These included Weiss, who had been promoted to consul general in Sichuan once again, the consulate interpreter Max Bethcke, a military doctor Kyritz, who temporarily worked in the *Poliklinik* during Assmy’s absence, and von Buri, the consul general in Shanghai. The essence of this renewed debate was how, under the new political situation, should the future of the *Poliklinik* be re-planned in order to be more conducive to German medical propaganda in Southwest China and the expansion of German influence and interests in the Republic of China.

In this debate, the focal point of “the intended purpose of German medical propaganda in Southwest China” was crystallized, summarized by Bethcke thus:

30 Bericht des Kaiserlichen Generalkonsuls von Buri an den Reichskanzler, 15. 6. 1910, BA, DBC, R9208/793, Bl. 115–124.

What should be achieved by the medical propaganda in Sichuan?—This question can be answered as follows: the Chinese are to be encouraged to introduce reforms in the fields of medicine and health care and, when such reforms are implemented, they are to be induced by German medical propaganda to make use of German help, including employing German doctors, purchasing products from German industry and sending their youth to study medicine and healthcare at German medical schools in China or to Germany. Ultimately, the goal should be to enhance Germany's cultural and political influence.³¹

A range of proposals and strategies were set out: Bethcke suggested relocating the center of German medical propaganda to Chengdu, replacing the *Poliklinik* in Chongqing with a German language school and leaving the former *Poliklinik* in the hands of the German church;³² Weiss largely concurred with Bethcke and went further by suggesting that new clinics or hospitals should no longer be established in Chengdu, but rather that German medicine should be expanded among the elite through the personal efforts of German doctors;³³ Kyritz and von Buri, however, did not support the abandonment of the *Poliklinik* in Chongqing. Kyritz advocated for its expansion and modernization, suggesting the introduction of “a grand European-style house, electrical apparatus, technological advancements, and gleaming surgical instrument cabinets” to enhance its competitiveness.³⁴ Von Buri also suggested retaining the *Poliklinik*, but in order to better accomplish medical propaganda he suggested that, in addition to the *Poliklinik*, a private clinic for the upper class could be opened at the doctor's residence, and that the doctor could also establish and maintain contacts with the Chengdu elite by working in Chengdu for a short period of time each year.³⁵

This recurring debate surrounding the relocation of the *Poliklinik* is significant, because it not only reflected its primary function as a tool for German medical propaganda, but also demonstrated that it did not live up to the expectations of the German government of greater political and economic benefits under the social conditions of the time.

The reason why this aim had been curtailed was firstly related to the fact that the German *Poliklinik* had been facing fierce competition from British, American, and French medical institutions in Chongqing and was hampered by its own limited scale.

31 Bericht des Kaiserlichen Dolmetschers Dr. Bethcke an den Reichskanzler, 4. 8. 1912, BA, DBC, R9208/793, Bl. 173.

32 Bericht des Kaiserlichen Dolmetschers Dr. Bethcke an den Reichskanzler, 4. 8. 1912, BA, DBC, R9208/793, Bl. 184–185.

33 Bericht des Kaiserlichen Konsuls Weiss an den Reichskanzler, 28. 8. 1912, BA, DBC, R9208/793, Bl. 163–164.

34 Bericht des Marine-Stabsarztes Dr. Kyritz an den Reichskanzler, 5. 8. 1912, BA, DBC, R9208/793, Bl. 191, 194–195.

35 Bericht des Kaiserlichen Generalkonsuls von Buri an den Reichskanzler, 2. 10. 1912, BA, DBC, R9208/793, Bl. 201–203.

This challenging medical environment made it difficult for it to achieve dominance in the short term. Secondly, it was the result of the political and social climate in Chongqing at that time. In the medical field, although local doctors and gentry had recognized the current unfavorable situation of Chinese medicine and the technological advantages of Western medicine, and consciously absorbed the essence of Western medicine in order to reform Chinese medicine—for example, Assmy had been employed to teach Western surgery in the local Chinese medical school³⁶—there was a distinct sense of competition and confrontation with Western medicine, coupled with a fear that it might supplant Chinese medicine. Consequently, local officials not only rejected the comprehensive adoption of foreign doctors' recommendations for infectious disease prevention (Assmy 1911, 80), but also reinforced the local government's control and initiative in variolation, epidemic prevention, and environmental sanitation reforms (Hui 2019a, 2019b). Moreover, even after the Xinhai Revolution, when medical schools in Chongqing began offering courses in both Chinese and Western medicine, they seldom employed foreign instructors and were hesitant to involve foreign doctors in their medical reform efforts.³⁷

It was, we argue, this fiercely competitive medical environment in Chongqing, coupled with the political and social milieu that constrained the proliferation of foreign medical influence, that had prompted the German *Poliklinik* to concentrate on providing medical treatment from its inception.

Although many ideas were put forward by German officials to further enhance German medical propaganda after the Xinhai Revolution of 1911, the *Poliklinik* not only met hostility from Britain and France in Chongqing due to the fluctuations in relations among the European nations up to the outbreak of the First World War, but also faced the danger of closure by the Chinese government after the severance of diplomatic relations between China and Germany in 1917, which resulted in the failure to implement the proposals.

After the break in diplomatic relations between China and Germany, the *Poliklinik* persisted in Chongqing, now operating under the name “Chongqing Red Cross Hospital” (重庆红十字分会医院), though this name change notably diminished its influence as a component of Germany's “medical-cultural policy” in China. In April 1919, the German government withdrew financial support for the *Poliklinik*, and in June of the same year Assmy proffered his resignation and, faced with repatriation, closed the *Poliklinik* (Assmy n.d.a). Thereafter, the German *Poliklinik* in Chongqing officially ceased to exist.

36 Gesuch des Stabsarztes Dr. Assmy vom 5. d.M. um Gewährung einer Gehaltszulage in Höhe vom monatlich 300 M, 5. 6. 1906, BA, DBC, R9208/792, Bl. 278.

37 Bericht des Kaiserlichen Dolmetschers Dr. Bethcke an den Reichskanzler, 4. 8. 1912, BA, DBC, R9208/793, Bl. 178–179.

3 The constructive influence of the Chongqing *Poliklinik* on Sino-German medical exchanges

Although the Chongqing *Poliklinik* had failed to fully achieve the goals expected of it by the German government in terms of medical propaganda and cultural expansion, it turned out to have built a bridge of communication between China and Germany through its more than a decade long activities in Chongqing. On the one hand, not only had the scientific methods, ideas, measures, and equipment of German medicine been disseminated, but it had also been recognized by different social classes in Chongqing and Southwest China. On the other hand, the experience, observations, and knowledge gained by the German doctors who had worked there were introduced back to Germany, arousing the interest of German academic circles in some hygiene- and climate-related diseases and medical issues in Southwest China, and thus promoted the research on those topics.

3.1 The spread and recognition of German medicine in Southwest China via the *Poliklinik* and Paul Assmy

As a medical institution backed by the German government and established and overseen by German doctors, the *Poliklinik* in Chongqing was constructed and operated in accordance with the principles of Western medicine. From its inception, Assmy planned the internal layout and operational procedures, taking into account the local conditions and the prevalent European hospital models of the era. Spatially, the *Poliklinik* was primarily segregated into waiting areas, consultation rooms, operating theaters, and wards (Assmy 1909b, 404–405). In terms of the internal arrangement of the wards:

The floor is constructed of cement, the walls are painted white, and the upper sickroom, featuring wooden walls, is adorned with Chinese wallpaper. Each room is illuminated by a pendant lamp. The beds are made of wooden frames, topped with cord frames and bamboo mats. During winter, patients are provided with cotton mattresses and pillows filled with rice husks, while in summer, they use bamboo wickerwork pillows. Traditional Chinese sleeping blankets, which consist of cotton with a canvas cover, round out the bedding. Each patient is equipped with an enameled washbasin, a towel, a soap dish, a toothbrush, a drinking water bowl, and a clay urine bottle for personal use. Upon admission, patients are bathed, their clothing is removed and stored, and they are issued a canvas coat, a pair of sandals, and in summer, the ubiquitous fan. (Assmy 1909b, 404)

The reception system consisted mainly of dispensing numbers from 8 a.m. to 11 a.m.; no new numbers were issued in the afternoon, except in cases of acute and severe illness, accidental injury, and suicide; patients were seen by doctors in the sequence

corresponding to their number tickets, and those who had failed to register were ineligible for treatment (Assmy 1909b, 405).

Having been established and run on the principles of Western medicine, the *Poliklinik* showcased distinct characteristics that set it apart from traditional Chinese medical practices in Chongqing. This allowed Chinese patients to actually experience Western medicine throughout the process of obtaining a number, consultation, treatment, and hospitalization, if required, thus enhancing their understanding of Western medicine.

As the founder and long-standing director of the *Poliklinik*, Assmy dedicated considerable effort to its proper operation and development. During his illnesses and absences, he was replaced or supported by the German military doctors Falkenbach, Kyritz, Würth, and Paul Schuchardt. To meet its daily requirements, local people from Chongqing were recruited to translate for the German doctors, to assume the role of pharmacist, and to act as surgical assistants to the doctors (Assmy 1909b, 407–408). Assmy also provided training to prepare these individuals for their specialized tasks. Despite the absence of a systematic professional medical education, the local staff members were directly exposed to Western medical concepts and methods both during their training and in their subsequent practical work.

It is noteworthy that, not being a mission hospital run by a particular religious denomination, the German *Poliklinik* presented the concepts, therapies, and systems of Western medicine to the local people more “purely,” which not only led to a wider range of patients going there, but also strengthened the local people’s understanding of and trust in German medicine.

Despite being smaller than the foreign mission hospitals in Chongqing, over the course of its existence spanning more than a decade, the *Poliklinik* consistently saw an average of forty to seventy patients daily (Assmy 1909b, 403; Assmy 1911, 73). Even in bad weather, twenty to thirty people attended there (Assmy n.d.a). This number of visits not only equaled that of the local American mission hospitals, but also exceeded that of the French and Canadian mission hospitals.³⁸ Its good reputation spread throughout Southwest China, and as Assmy noted: “Soldiers stationed 300 miles away were specifically dispatched by their superiors to the German *Poliklinik*; . . . French missionaries from all over the province and even from the vicinity of Chengdu sought care here.”³⁹ In 1907, Huang Lijun 黄理君 (also known as Huang Fusheng 黄复生), a member of the Chinese United League (*Tongmenghui* 同盟会), was seriously injured while manufacturing explosives in Xuyong 叙永 County, Luzhou 泸州, and was

38 Bericht des Marine-Stabsarzts Dr. Kyritz an den Reichskanzler, 5. 8. 1912, BA, DBC, R9208/793, Bl. 186.

39 Bericht des Stabsarztes Dr. Assmy an den Reichskanzler, 1. 9. 1907, BA, DBC, R9208/792, Bl. 381.

transported over two hundred kilometers to the *Poliklinik* for medical treatment.⁴⁰ *The China Press*, an American newspaper in China, reported in 1912: “Dr. Assmy has been in charge of the German hospital at Chungking for the past five years and has made himself famous throughout Szechuan Province by his skilfull [sic] surgery work” (*The China Press* 1912). In July 1916, Assmy was summoned by Liang Qichao 梁启超 to Shanghai to treat General Cai E 蔡锷 for laryngeal tuberculosis (Li and Yuan 2015, 360).

Moreover, while endeavoring to make an impact on the upper class in Chongqing to expand German interests in China, the *Poliklinik* also delivered significant benefits and improved well-being to the city’s residents, who were notably lacking in medical facilities, particularly those residing in rural areas. According to available statistics, laborers and beggars frequently constituted over half the total patients treated there annually.⁴¹ During the First Constitutional Protection Campaign⁴² 第一次护法战争 of 1917–1918, Assmy was also engaged in treating soldiers together with Schuchardt, a German military doctor who worked at the *Poliklinik* at the time (Assmy n.d.a). As a result, German medicine developed a positive reputation among the local populace.

Thus, the activities of the *Poliklinik* and the “reputation” of the German doctors that staffed it led to German medicine, which had begun to enter in Chongqing only in the early twentieth century, gradually to become a significant force in the local medical environment, one that could not be ignored. Despite the severance of diplomatic ties between China and Germany in 1917, under pressure from the British and French, the Chinese government chose not to close the *Poliklinik*. At the end of 1917, Assmy and the German staff there were recruited by the Red Cross Society of China to treat Chinese soldiers injured in the on-going civil war. The British consul objected, citing Assmy’s status as an “enemy alien” and advocating for his detention, but this did not change the opinion of the Chinese authorities (Assmy n.d.a).

A group of the Chongqing elites, represented by Wei Guoping 魏国平, a prominent entrepreneur, also dispatched a telegram to the Guangzhou military government in the name of the “Red Cross Chongqing Branch,” requesting Assmy be exempted from repatriation:

40 Internal publication: Cultural and Historical Materials Research Committee of the Chinese People’s Political Consultative Conference (CPPCC) Ba County Committee 中国人民政治协商会议四川省巴县委员会文史资料研究委员会, ed. 1986. *Baxian wenshi ziliao* 巴县文史资料 [Cultural and Historical Materials of Ba County], series 3, 15–16.

41 Bericht des Marine-Stabsarzts Dr. Kyritz an den Reichskanzler, 5. 8. 1912, BA, DBC, R9208/793, Bl. 187.

42 The “First Constitutional Protection Campaign” refers to the political and military struggle initiated by Sun Yat-sen and other bourgeois revolutionaries that lasted from July 1917 to May 1918 to uphold the *Provisional Constitution of the Republic of China* (*Zhonghua Minguo linshi yuefa* 中华民国临时约法), which symbolized the republican system, and to oppose the autocratic rule of the Beiyang government 北洋政府 (the central government of China at the time) that refused to restore the “constitution.” However, the war ended in failure.

Honorable ministers of the Guangzhou Military Government:

Despite holding German nationality, the medical director of our branch, Assmy, has resided in Chongqing for thirteen years and has diligently served in his capacity for over four years, tirelessly treating countless individuals. During the Constitutional Protection War, he saved tens of thousands of injured soldiers. This remarkable feat is widely recognized across every province. In accordance with the International Red Cross Treaty, which stipulates funding for the repatriation of enemy aliens, Assmy should be safeguarded from deportation. Moreover, the permanent hospital, which is heavily dependent on his expertise, and the more than a hundred patients under his care, make his departure particularly challenging. Since neither the Foreign Affairs Division nor the Police Commissioner of this city is overseeing his case, I have sent a telegram to the Governor of Sichuan Province to inquire about Assmy's status regarding his stay and departure, but have not yet been replied to, which is why I am reaching out to you. Therefore, I earnestly request that you review the relevant regulations and promptly contact the Governor of Sichuan Province. I urge you to instruct the local officials to grant exemption, thereby upholding the law and preserving the spirit of charity. I am greatly concerned and eager for a resolution, and I would appreciate it if you could provide me with a prompt reply.

Regards from Wei Guoping, President of the Red Cross Chongqing Branch and Hu

Guoliang 胡国樑 (with seal)

on 25 March.⁴³

From this message, it is evident that while the *Poliklinik's* sphere of influence was confined to the medical domain, the medical expertise and humanitarian care exhibited by the German doctors earned them the respect of the local populace and elevated the personal standing of German doctors in the region. Consequently, German medicine was not shunned by the locals, despite the shift in diplomatic ties between China and Germany.

Ultimately, Assmy remained in China, and in 1920 he was appointed as the director of the Red Cross Hospital in Chongqing, where he also took charge of medical services (Chi and Cui 2014, 278). Subsequently, even after he departed from the Red Cross Hospital to establish his own practice, he continued to reside in Chongqing until his passing in 1935.

43 Gongdian 公电 (April 12, Xiuzi 修字 No. 63) "Chongqing Hongshizi Fenhui huizhang Wei Guoping deng yi gaihui yizhang Deji Asimi renzhi simian chengji zhaozhu qi mian qiansong dian" 重庆红十字分会会长魏国平等以该会医长德籍阿思密任职四年成绩昭著乞免遣送电 [Red Cross Chongqing Branch President Wei Guoping Begg That the Society's Chief Medical Officer, the German Assmy, Be Exempted from Deportation Because of His Notable Achievements during the Four Years that He Served] (March 25). In *Junzhengfu gongbao* 军政府公报 [Bulletin of the Military Government], 1919.

3.2 The transmission of medicine-related information and knowledge from Southwest China to Germany via the *Poliklinik*

In addition to treating patients, the German doctors also used the Chongqing *Poliklinik* as a knowledge base for medical research. At the end of the nineteenth century, the training system for German military doctors was already excellent, and most of those who came to China had received a highly systematic medical education; those who worked in the *Poliklinik*, such as Assmy, as well as Falkenbach, Kyritz, and Würth, also had a doctorate degree in medicine. Therefore, in addition to their day-to-day clinical work, they also took the opportunity to carry out research on specific diseases.

As Assmy was at the *Poliklinik* for the longest time, his research was the most extensive and fruitful, and he documented and published his own findings. Some of these findings were published in medical journals, such as the “Clinical Annals” (*Klinisches Jahrbuch*), in the form of reports on his work at the *Poliklinik*. In them, he not only categorizes and summarizes the diseases seen at the *Poliklinik* each year, but also describes in detail the diseases and cases from a professional point of view, covering issues such as their causes, means of transmission, methods of treatment, and preventive measures. At the same time, Assmy also published specialized research papers on particular diseases or treatments in professional journals. His notable works included “Ankylostomiasis in Western China” (1909a), “About Treatment with Beer’s Hyperaemia” (1909d), “On Microorganism Findings in Phagedenic Ulcers in Chongqing” (1909e), “Human and Bovine Tubercle Bacilli” (1909c), “On the Question of Emetine Treatment of *Lamblia* Dysentery” (1914), and “On Salvarsan Treatment of Ulcerative Processes Caused by Vincent’s Symbiosis” that he co-authored with Kyritz (1913a). A perusal of these research papers reveals that the research conducted by the German doctors in Chongqing was characterized by specifically regional epidemiology.

On the one hand, drawing upon their medical expertise from the Chongqing region, they actively participated in dialogue with contemporary medical research, facilitating the transmission of knowledge of local conditions to the German medical community to foster advancements in the relevant research fields. For instance, in the article “On the Question of Emetine Treatment of *Lamblia* Dysentery,” Assmy juxtaposed his observations in Chongqing with research from Germany, noting:

In this weekly magazine 1914 No. 5, Dr. Martin Mayer of Hamburg reported on the cure of a case of “*lamblia* dysentery” through injections of *Emetinum hydrochloricum*. Dr. Mayer attributes the vanishing of *lamblia* and the symptoms of dysentery to *Emetinum*.

The subsequent case history may lead us to adopt a wait-and-see approach in a few more instances to determine whether emetine truly exerts a comparably specific effect on flagellates, as it does unequivocally on dysentery amoeba, in line with my experiences here. (Assmy 1914)

On the other hand, their research concentrated on prevalent illnesses in Chongqing, including hookworm, tuberculosis, and tropical ulcers, and they delved into the specifics of these diseases, taking into consideration the local climate, indigenous medical beliefs, and lifestyle habits. For instance, the epidemiology of typhoid fever was scrutinized in relation to the drinking customs of Chongqing's inhabitants, rampant tuberculosis was attributed to the city's climate and the residential practices of its citizens, and the prevalence of trachoma was linked to the daily habits of the local populace (Assmy 1909b, 414-426). In these analyses, the fundamental health-related characteristics of the Chongqing area were highlighted: drinking water from the "highly turbid" Yangtze and Jialing rivers, a climate characterized by "fog and rain," "damp and dim" housing conditions, and the local penchant for "boiled water," alongside a "lack of awareness regarding modern medicine" and "insufficient hygiene practices," and others.

It is crucial to acknowledge that German doctors, including Assmy, along with many of their European peers, held a pejorative view of Chinese medicine and the medical practices they witnessed in China, which often diverged from Western medical principles. In his writings, Assmy frequently blamed the "disadvantages" of the local medical concepts and customs of the indigenous population. For instance, when discussing why malaria persisted in the region, Assmy pointed out that:

Due to the apathy of the Chinese populace, it is impractical to achieve complete eradication of all chronic and recurrent illnesses, and thus, freeing the Chinese people from malaria remains an unattainable goal. . . . Should malaria symptoms cease, the majority of patients discontinue their quinine treatment after just one dose. If they are "prudent," they might return for a three-day course of quinine. However, should they realize that the anticipated relapse on the third day does not materialize, they are unlikely to return until the next weather fluctuation triggers another attack! (Assmy 1911, 82)

While we cannot dismiss the report's authenticity, which is based on Assmy's personal experiences, there are numerous factors that influence whether a disease can be completely cured. The assertion that the failure to cure is solely due to the medical habits of the locals, which are directly projected onto the "Chinese people as a whole," is clearly a subjective interpretation.

It is evident that subjective assertions akin to those made by German doctors of the era were frequently encountered in academic literature, and that this contributed to a negative image of China, which often served as the fundamental rationale for Germany's medical expansion in China. Nevertheless, the empirical observations and scientific studies conducted by them provided a wealth of information about medical conditions in the Chongqing region. This knowledge production not only helped to

improve their own medical understanding and laid the groundwork for medical activities there, but also furnished Germany with a detailed and comprehensive resource for grasping the medical culture of Chongqing and for enhancing its overall knowledge of China.

The specialized nature of this medical research did indeed attract the attention of the medical community back home. Not only were their articles published in prominent German medical journals, such as the “German Army Medical Journal” (*Deutsche Militärärztliche Zeitschrift*), “Archives of Ship- and Tropical-Hygiene” (*Archiv für Schiffs- und Tropen-Hygiene*), and “Munich Medical Weekly” (*Münchener Medizinische Wochenschrift*),⁴⁴ but their research findings were also frequently cited by their peers. For instance, German military doctors Prieur and Ernst Fürth, stationed in the Jiaozhou Leasehold, referenced Assmy’s research on parasitic diseases in the Sichuan region when examining cases of *Necator americanus* among the Germans in their area (Prieur and Fürth 1910, 601). Furthermore, the German medical missionary Gottlieb Olpp, who directed the German Medical Missionary Institute (*Deutsches Institut für ärztliche Mission*) and the Tropical Sanatorium in Tübingen (*Tübinger Tropengenesungsheim*) from 1909 to 1937, repeatedly cited Assmy’s research in discussions about medical and hygienic conditions in China, as well as various diseases including hookworms, cestodiasis, and malaria (Olpp 1910, 119, 123, 132, 135–136).

Thus, despite being imbued with the expansionist mentality of the imperialist period, the German doctors’ focus and research output on diseases prevalent in Chongqing served to integrate Chongqing’s medical culture into the German medical scholarship. It deepened German comprehension of Chongqing’s medical traditions and broadened understanding of China, becoming an integral component of German medical scholarship and propelling the German medical community’s research into medical issues pertinent to China.

4 Conclusion

Like many institutions established and operated by the German government in China during the early twentieth century, the Chongqing *Poliklinik* was conceived as a strategic instrument for advancing Germany’s expansionist cultural policy. Its primary objectives, as viewed from the German government’s standpoint, were to disseminate German culture, foster a favorable perception of German medicine, science, and cultural achievements, thereby extending Germany’s economic and imperialist interests. This was accomplished through the deployment of so-called “medical propaganda” in Chongqing and beyond. From the Chinese perspective, the *Poliklinik* served a significant indicator to the social transformations that occurred from the late Qing

44 For example, Dohrn (1909), Wiens (1911), and Assmy and Kyritz (1913b).

dynasty to the early Republic of China, deeply entwined as it was with the history of medicine and the history of Sino-Western cultural exchanges in Chongqing and the whole of Southwest China.

In this study, through extensive and meticulous archival research, we have “rediscovered” and reconstructed the establishment, development, and local integration of the Chongqing *Poliklinik* during a transformative historical period. Additionally, we have conducted a detailed analysis of its distinctive characteristics within the broader framework of Sino-German diplomacy and bilateral relations. Beyond examining institutional factors, we have also highlighted the pivotal contributions of key individuals, particularly Paul Assmy, the most prominent German doctor at the *Poliklinik*. His work not only played a crucial role in the introduction of modern Western medicine to Chongqing, but also significantly enhanced the local recognition and reputation of German medical practices.

Our conclusions are that the Chongqing *Poliklinik* ultimately exerted a profoundly constructive social and cultural influence on both China and Germany. It played an interactive and constructive role in China’s early social modernization, particularly by fostering the acceptance of Western medical knowledge and practices. Simultaneously, the German medical community also benefited from this engagement, acquiring valuable insights into hygiene- and climate-related diseases prevalent in Southwest China. These findings not only enriched their understanding of such conditions but also provided crucial data and motivation for advancing medical research in these areas within Germany.

Finally, this case study challenges the conventional “one-way pattern” explanation of the development of Sino-German diplomatic relations. While Germany actively pursued its expansionist cultural policy in China, the latter was far from a “passive” recipient of politically driven German influence. The divergence between the intended political objectives and the actual social functions of the Chongqing *Poliklinik* was, in part, shaped by local resistance to German cultural expansion. This highlights that the progress of Germany’s imperialist cultural policy in China was not solely determined by its own ambitions; rather, it was significantly influenced by the complexities and dynamics of local Chinese society. Therefore, this case underscores the inherently two-way and interactive nature of Sino-German relations during this period.

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