



UNIVERSITY OF LEEDS

This is a repository copy of *'This man represents China': The Racist Rhetoric of 'Object Lessons' in W.W. Peter's Health Lectures.*

White Rose Research Online URL for this paper:

<https://eprints.whiterose.ac.uk/id/eprint/230434/>

Version: Accepted Version

Article:

Stones, C. (Accepted: 2025) *'This man represents China': The Racist Rhetoric of 'Object Lessons' in W.W. Peter's Health Lectures.* Journal of Design History. ISSN: 0952-4649 (In Press)

This is an author produced version of an article accepted for publication in Journal of Design History, made available under the terms of the Creative Commons Attribution License (CC-BY), which permits unrestricted use, distribution and reproduction in any medium, provided the original work is properly cited.

Reuse

This article is distributed under the terms of the Creative Commons Attribution (CC BY) licence. This licence allows you to distribute, remix, tweak, and build upon the work, even commercially, as long as you credit the authors for the original work. More information and the full terms of the licence here: <https://creativecommons.org/licenses/>

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



eprints@whiterose.ac.uk
<https://eprints.whiterose.ac.uk/>

'This man represents China': The Racist Rhetoric of 'Object Lessons' in W.W. Peter's Health Lectures.

Original Article

Dr Catherine Stones

University of Leeds

Summary

William Wesley Peter was an American medical missionary who performed ambitious visual health campaigns in China from 1915 to the early 1920s. Crucial to many of the exhibits used in his performances was the human figure, be it drawn, modelled, mechanical or real. The primary purpose of this study is to critically argue that his body-based 'object lessons' manifest racist and colonial ideals beyond their primary function of health education.

The study begins by presenting a brief history of American Medical Missionaries in China and related America-Chinese socio-political tensions. An overview of contemporary health exhibits in the USA is presented prior to a case study that closely examines, for the first time, six of W.W. Peter's exhibits and their visual and performed characteristics. Analysis is based upon primary sources from the Kautz Family YMCA archive comprising letters, photographs, reports and newspaper articles.

The exhibits were found to reflect 4 tropes of racist and colonial discourse: categorization, debasement, affirmation and negation. Tropes were visually evident in using the human form to segment and compare, infantilizing the audience through use of doll-like figures and 'backwarding' via depiction of empty heads. The study provides original insights into the visual strategies and colonial rhetoric of early 20th-century health exhibitions, contributing to scholarship in critical colonial design and the history of health exhibition design.

Keywords: health campaigns, information design, China, colonial discourse, racist representation.

Introduction

During the 19th century anti-Chinese¹ views were rife in the United States of America, evident through a popular colonial discourse that dismissed Chinese migrants as 'other'.² From 1830, American missionaries voyaged to China keen to rid the East of its supposed 'heathenism'. By 1900 there were approximately 1000 missionaries from the USA in China and this expanded to 3000 by the year 1930³ signifying American enthusiasm for gaining religious footholds. During the 19th century, missionary efforts primarily focused on the propagation of Christianity. However, the early 20th century witnessed a significant evolution in their activities, with a growing emphasis on the provision of health education, healthcare services, and the establishment of hospital infrastructures. Medical institutions provided missionaries with access to new communities and enhanced their visibility.⁴

China in the early twentieth century was subject to dramatic change in the form of a new republic-led political system in 1911. This was accompanied by tumultuously violent turns and an increase in Chinese interest in western health approaches.⁵ American universities as well as American missionaries began to infiltrate the Chinese medical education system.⁶ Medical knowledge at this time was described akin to 'colonial warfare'⁷ where both Confucian-based and western science approaches to medicine tensely co-existed.

One American missionary involved in this 'colonial warfare' was William Wesley Peter (known as W. W. Peter) (1882–1959).⁸ Peter instigated a large and ambitious travelling health campaign in China from 1915 to the early 1920s and was later classed somewhat as a health education 'hero'.⁹

Influential figures in health museum design such as Homer N. Calvert, Secretary of the American Museum of Health, recognized Peter as a pioneer given his early use of motion and 'ingenious devices'¹⁰ in health lectures. Evart Grant Routzahn, influential health educationalist, described in 1920 how it was 'not so common' to see Peter's use of visual symbolism.¹¹ Peter's novelty was greatly attributed to his adoption of the 'object lesson'. The 'object lesson' itself was well established in Europe and America in the early twentieth century as a means of making education more engaging and memorable, particularly in schools.¹² Children were encouraged to think and reason abstractly by

using physical objects as stimulants for ideas.¹³ Peter's contribution was in applying the 'object lesson' concept to public health education for Chinese audiences. However, despite his cited ingenuity, Peter's 'object lessons', I suggest, are also laden with moral difficulties.

This study surfaces original discussion regarding Peter's performances, with particular focus on the depiction of the human figure (the singularly most repeated motif within Peter's performances). Via detailed new analysis of images and descriptions of the exhibits I argue that the deployment of the human body was indicative of racist colonial values and practices. As such, the reader is warned of the presence of disturbing and offensive quotes and of reference to distorted stereotypes within this work. As a white western-based author I am aware that, by discussing this material I may effectively be enacting a second-order violence. However, by careful contextualizing of the quotes and images I intend only to critically analyse rather than strengthen or condone their message.

This study builds considerably upon Liping Bu's¹⁴ work who is, to date, the only academic to focus specifically on Peter's campaigns. Bu's work, whilst laying rich context from a socio-political perspective, does not consider visual characteristics of any exhibits nor does it examine the exhibits uncovered in this study. The few authors who discussed Peter's work do so broadly within the context of American attitudes to health initiatives in China¹⁵ or in terms of precedence for later campaigns.¹⁶ Several historians briefly mention Peter's magic lantern displays¹⁷ though again fail to acknowledge the specific significance of visual material.

In brief, this study differentiates itself from others given its focus on the critical visual analysis of specific exhibits. It details new characteristics of the exhibits and analyses their visual form with respect to modality, visual appearance and operation. Critical visual analysis affords the researcher the ability to uncover a new understanding of W.W. Peter's underlying visual methodologies and thus serves to surface hitherto unidentified communication strategies within his health campaigns. Visual analysis prioritises the designed outcomes of design history and acknowledges the role that artefacts play in the construction of meaning. Crucially this study enhances understanding of how health exhibits themselves may be interpreted as embodying and expressing the values of colonial rhetoric and its contradictions. In doing so it contributes to scholarship in critical colonial design and the history of health exhibition design as well as deepening understanding of Peter's work specifically. In

addition, it contributes newly identified strategies related to the representations of the human body used in health education in the early 20th century, a topic which remains of widespread academic interest.¹⁸

Methodology

A plethora of original texts including reports, letters and photographs from the Kautz Family YMCA Archive are examined from the period 1914–1931. This reflects the years from the Chinese campaign's inception through to Peter's later discussion of his work. The digital Kautz Family YMCA Archives are based at the University of Minnesota and feature a parent collection entitled Records of YMCA international work in China (Y.USA.9-2-4). The collection contains annual reports, newspaper articles, photograph albums, Peter's personal correspondences and a lecture transcript that refers to Peter's health campaigns. As a central repository, the archive provides rich insights into how Peter recorded details of the campaigns and how, crucially, the contemporary missionary press discussed the exhibits. Systematic searches of US and Chinese (English Version) Proquest archived newspapers from the period (1911–1930) provided thematically-relevant material beyond the YMCA archives and were utilized to gain further journalistic perspectives on Peter's work. Source choice was also necessarily constrained by physical availability and quality of reproduction. As any study reliant on archival data, limitations are posed by the breadth and depth of the archive. For example, not all exhibits during all stages of the performance were visually documented. However, given the performative nature of the objects, photographs of the exhibits have been analysed in conjunction with accompanying descriptions of actions and dialogue to ensure rigour. Through these texts it is possible to establish a clear understanding of the visual characteristics of the exhibits, including colour in some instances, how they were performed and the rhetoric of the oral presentations that anchored meaning. Semiotic Analysis was conducted on each image. This was informed by third-party descriptions of the work (to establish denotative elements such as size, facial features, body characteristics, garments and colour) and by application of colonial discourse (to aid or challenge formulation of connotation).

Colonialism sought 'the improvement of idle bodies ... and irrational minds/souls ... via education, training, and labour'.¹⁹ Despite a seemingly clear definition, the true nature of colonialism is complex

and ambiguous²⁰ though there have been attempts to systematically categorise the composition of a colonial 'discourse'. David Spurr's²¹ influential rhetorical modes (or tropes) of colonial discourse provide a basis for analysis given their flexibility, breadth and use in other studies of visual material.²² In particular, I refer to 4 tropes: Categorisation, Affirmation, Debasement and Negation.²³ A summary of these tropes is provided thus: 'Categorisation' signifies the action of classifying and comparing supposed 'inferior' races with 'Affirmation' acting as a constant re-assurance of white superiority. The 'Debasement' trope labels populations as supposedly 'sinful', 'diseased', 'child-like'²⁴ and 'backward'. 'Negation' utilises the rhetoric of vacant land or absence of language to justify the exertion of power. Such tropes are used to underpin analysis where appropriate.

Health Exhibitions in the Early Twentieth Century

Peter's exhibits can be academically situated within a historical continuum of visual materials specifically developed for health exhibitions. This lineage extends back to the first quarter of the 20th century and encompasses a significant effort in health education dissemination across both the Americas and Europe.²⁵ Vitally, in the USA, health education aimed at the general public was increasingly a priority given the rise of 'sanitary science'²⁶, a discipline that studied hygiene practices and their impact on health. New philosophies of experiential learning²⁷ also infiltrated contemporary health education approaches to enhance broad public appeal. Social reformers in the USA viewed exhibitions as a powerful means of communicating to the public. Sales techniques from contemporary advertising were adopted and persuasive images and copywriting became staple components of health exhibition design.²⁸ Public health communication was also highly organised and structured in the USA in the early 1900s. For example, the Russell Sage Foundation (RSF), was an organisation established in New York City to improve social living conditions in the USA. The foundation was responsible for funding an influential Tuberculosis exhibition that began touring in 1904.²⁹ It comprised statistical displays, posters and pathological specimens and made extensive use of physical exhibits and visual methods. Evert Grant Routzahn of the National Association for the Study and Prevention of Tuberculosis took a strong interest in the development of health exhibits and further organised the well-discussed Tuberculosis Exhibitions from 1906–1912.³⁰ Arguably, when Peter's campaign planning for China was instigated in 1913, there was clear precedent set in the creation of highly

organised health exhibitions within the USA. However, given Routzahn's later appreciation of Peter's work³¹, Peter would innovate further, imbuing live lecture material with a tangible sense of immediacy and dynamism hitherto missing in the exhibitions of that period in the USA.

Overview of W. W. Peter's Campaign

Peter was an American newly trained physician (trained at the University of Chicago's Rush Medical College)³² when he was sent to China in 1911 by the Mission Board of the Evangelical Association.³³ As a medical missionary he was immediately stationed at a hospital in Wuchang³⁴ where he developed a new interest in public health. In 1912 he published an article in the Journal of the American Medical Association citing specific causes for health problems in China – namely overcrowding, poor sanitary conditions, lack of public-health related policies and a poor medical education system.³⁵ Key health problems cited were Cholera, Plague and Tuberculosis. Peter referred to China as 'a menace to the health of the rest of the world'³⁶ that could be vastly improved by foreign interventions. His tone within this early report is dismissive of traditional Chinese approaches to medical training (classed as 'hopelessly inefficient')³⁷ and he extols, with dramatic rhetoric, the imperative for western medical intervention.

Aware of the health education work by the YMCA in China, Peter approached the association with plans for new public health education programmes. Later, in July 1913, he became the YMCA secretary for public health education. In 1914 Peter announced plans for a 'radical departure' to public health education³⁸ and was commissioned by the China Medical Missionary Associations (CMMA) to create a new public health exhibition. In February 1915 Peter's exhibition was shown at the national conference of the CMMA in Shanghai. Due in part to the popularity of the exhibition, the CMMA collaborated further with the YMCA leading to the advent of the touring health campaigns.

The major health campaigns led by Peter were conducted in 1915 across 34 cities and viewed by over 100,000 members of the public.³⁹ The campaigns continued into 1916 and were reported as late as 1921 (in Kuhling). Each campaign lasted 5 or 6 days and comprised lectures of 1.5 hours in length that repeated 3 times per day.⁴⁰ Further campaign components included hall-based static exhibitions and street parades, addressing topics including Tuberculosis, Cholera, Sanitation and Child Mortality.

The campaigns were reported as impactful. For example, Peter⁴¹ himself cited (and thus to be read with some scepticism) physical changes resulting from his 1920 anti-cholera show including improvements to food signage and healthier water sourcing. Reports from others⁴² corroborate his claims. The shows were also designed to encourage audience responses. The rhetoric of the script, the dramatic spectacle of the stage and calls for audience participation resulted in verbal responses from the crowd. Occasionally such responses questioned the data presented.⁴³

Peter took influence from existing touring US-based health exhibits (requesting funds to purchase such items), but in terms of more complex apparatus, he procured a substantial budget for new construction by an internal team.⁴⁴ A remit of the campaign was that it should not simply re-use American material verbatim.⁴⁵ Peter customized the exhibits for the Chinese audience in terms of adjusting, say, human figures on lantern slides (used in smaller evening talks) to be of Chinese appearance. It is also suggested that, in such slides, there were remnants of Americanism in language.⁴⁶ Contemporary accounts also suggest that all devices used in portable exhibitions in USA were somehow re-used in China but also that new ones were ‘invented’ by Peter.⁴⁷ There appears to be no systematic log of how and which exhibits were repurposed. However, it is likely, given the reported novelty of the ‘object lessons’ and Peter’s request for new constructions, that many of the mechanically complex performed exhibits were originally made for the Chinese audience. Arguably the static material used within the hall-based exhibits such as diagrams and drawings (using both English and Chinese texts) were more likely to be more re-appropriated from American material (as Bu has suggested). This is especially likely for print-based material directly related to Tuberculosis or Hygiene, topics very well covered by previous American touring initiatives.⁴⁸ Devices also evolved during the duration of the campaign dates according to Peter⁴⁹ with moments of significant expansion of apparatus used in the lectures.⁵⁰ This again suggests independence of designs that move beyond American versions.

A case study of six ‘object lessons’

A colour-tinted photograph of the Health Show stage, emblazoned with its title ‘Health Pays Dividends’, is shown in Figure 1. Though the photograph features a cacophony of objects each device

featured singularly during the lecture as a series of separate sequences.



Figure 1: W. W. Peter's Public Health Lecture

© Kautz Family YMCA Archives, University of Minnesota Libraries

<https://creativecommons.org/licenses/by-nc/4.0>

The human figure was central to Peter's 'object lessons', perhaps unsurprisingly given the topic of health. Of note was the diverse array of visual representations employed, encompassing modalities such as photorealistic imagery, cartoon illustrations, three-dimensional models, and even the incorporation of live human subjects. Original descriptions and analysis of six body-based 'Object Lesson' are presented below. New empirical findings are presented, each accompanied, where relevant, by critical analysis informed by the framework of colonialist discourse.

The 'object lesson' entitled 'An Index of National Strength' is shown in Figure 1 to the left-hand side of

the stage. This dynamic exhibit was described by Peter thus:

White skulls, painted on variously coloured 8-inch cardboards were mounted together by hinges and folded up in a box which was suspended from the ceiling. At the proper moment a trip released the skulls which fell rattling down in front of the audience. The boxes at one end visualized first the death rates of strong countries; at the other end, of weak countries, In the middle was China with an approximate death rate of 40 per thousand.⁵¹

As the cardboard tiles fell from the stage ceiling, the veristically rendered skulls gradually turned to face the audience. Initiated as skulls in profile, with wide cranial features, each skull's angle adjusted on descent of the tiles. Colour was utilised in this object lesson to distinguish between nations with European countries represented by black, white and green boxes, India and Mexico represented by red and blue and China represented by yellow. Upon rest, a 'reverse string' would be pulled to reveal the name of the country and death rate and in this state the tiles would remain to allow for full comparison.

Arguably, the order of the display itself (of America and Europe first) may have sought to affirm the U.S.A as supposedly superior and China was shown at the end, centre stage. Despite Peter confirming to the audience verbally that the actual death rate in China was unknown,⁵² China was cited to be 'weakest'. 40 tiles were attributed to China in comparison to those countries classed as 'weak' such as India (with 33 tiles). Given the vivid nature of the comparison, the exhibit highlights a form of categorisation that sought to deliberately denigrate the Chinese.

The symbolism within each tile is also worthy of examination. Whilst using a skull as a symbol of death may have been highly dramatic, the skull could also carry subtle intent to affirm western status using supposedly objective and scientific means. The use of the skull motif, it is suggested, may be reminiscent of late 19th Century craniology illustrations in which skulls are presented from varied angles.⁵³ The remit of such practices in Europe and the US was to prove racial superiority via pseudo-scientific⁵⁴ means – cranial cavities were examined and classified to indicate white superiority. Rather than the skull in this exhibit being suggestive of an attempt to debase the Chinese (as all countries were represented with skulls), it may instead imbue the entire data set with the authority of 'objective' western science.

The colour yellow used to represent China's 'box' in 'An Index of National Strength' is a contentious choice for the modern reader given its historically derogatory usage.⁵⁵ It offers a distinct form of visual 'othering'. Figure 1 displays hand-coloured yellow skulls rather than the white skulls described by

Peter. This may indicate the importance of yellow as a labelling device for purposes of posterity, tentatively indicating an ingrained racist use of colour. However, given the inconsistent use of colour within the lecture more broadly, colour does not seem to operate as a systematic visual system for debasement throughout Peter's work. However, and importantly, the mechanical design of this exhibit furnished a discourse of debasement within the popular press. The exhibit was described in 1918, through its use of clattering and falling tiles, as a 'reversion to kindergarten illustration'⁵⁶ and it was labelled as particularly suitable for the 'childlike' Chinese. The mechanical format produced opportunity for racist commentary that appeared to conveniently overlook the macabre and pseudo-scientific imagery used in the exhibit.

The second exhibit to be examined is entitled 'Relative Populations: China Compared with other Nations'. The device featured models of miniature human figures that were revealed to display population density in the 'west' and the 'east'. Arranged in square format the exhibit acted as an animated icon-array. Figure 2 shows two 'tables' that were operated by levers and tilted to allow audience visibility.



Figure 2: 'Relative Populations' Exhibit

© Kautz Family YMCA Archives, University of Minnesota Libraries.

<https://creativecommons.org/licenses/by-nc/4.0>

Edgar French Strother, a contemporary writer and researcher, described in 1918 how these operated. Peter's assistant 'pulls a concealed lever and up jump forty manikins in four rows, like tin soldiers'.⁵⁷ It is likely that this exhibit went through various iterations of colour. For example, in an early version European figures were reported as coloured blue whilst the Chinese figures were described as red.⁵⁸ Later, Peter described Europe as coloured red and Asia depicted in yellow.⁵⁹ Photographic evidence shows that European countries appear to have been rendered in lighter tonal values, whereas depictions of Asia employed considerably darker hues, consequently impeding the clear discernment of colour.

Arguably W.W. Peter was influenced by earlier models used in the AASPIM (American Association for the Study and Prevention of Infant Mortality) exhibition of 1910 that featured a static display of small figures⁶⁰ arranged in square format. Peter, however, expanded the concept of the exhibit significantly. Figures, in Peter's version, were seen to emerge, somewhat supernaturally, from the tables. Crucially, the figures appear starkly different in appearance to the relatively veristic modelling of the cited AASPIM exhibit. Peter's figural representations exhibit a marked simplification of form, characterized by the absence of articulated limbs, rendering them devoid of corporeal agency. Their aesthetic presentation evokes a toy-like quality, further emphasized by rudimentary facial features, often reduced to punctiform representations for the eyes.

Both 'An index of National Strength' and 'Relative Populations' convey a clear depiction of China's 'weakness' (both in terms of death rate and population density), with the assertion that America and Europe possessed demonstrably superior maintenance of population health. Thus, Spurr's tropes of categorisation (of measurement and classification) and affirmation are arguably evident. Of note, data was revealed with exaggerated rhetorical affirmation. This was achieved by dramatic and highly theatrical usage of falling or rising visual motifs. The exhibits also emphasised difference through sequence, frequency, duration of display or sound. It may be argued that since both 'object lessons'

utilise the same models for all populations, bar colour, a higher order of signification is achieved not by 'othering'. Instead, by asserting two somewhat contradictory graphic languages in parallel (the use of scientific realism (skulls or icon arrays) and condescending child-like imagery or gimmicks) the two exhibits may simultaneously reflect the pseudo-scientific affirmation of the Americans and the debasement of the Chinese.

While some 'object lessons' were founded on quantitative data, others prioritized the exploration of systemic relationships. In the section entitled 'Individual Efforts vs United Efforts', two boards were introduced onto the stage (shown in the background of Figure 1 beneath the main stage title). Six small green wooden discs were mounted on the first board each bearing an image of varied working members of society ('schoolers, farmers, labourers and merchants').⁶¹ Each figure bore an outstretched arm and featured loose and jointed limbs. On the outer part of each board a larger yellow wheel denoted social progress. On the first board (labelled 'each for his own sake') the green discs were spatially separate and thus as the arms of the 'labourers' began to move (via a battery switch) the green discs rotated whilst the large yellow wheel remained static. When, by contrast, the second board were set into motion (featuring figures on five abutting discs labelled 'working together'), the larger yellow wheel turned.⁶² Outer movement was accomplished, metaphorically representing the success of collaborative endeavours.⁶³

A photograph⁶⁴ of the exhibit demonstrates use of cultural and distorted stereotypes. The figures appeared overweight, a quality signifying health and wealth, according to Peter.⁶⁵ The figures however are also indicative of stereotypical visual tropes – comical in physique (with large girth, short arms and legs and undersized feet) and infantile in image mode (a drawn cartoon). The figures are also simply illustrated, dressed in plain garments of various undiscernible colours, suggesting a population of physical labourers as opposed to the supposed merchants or 'schoolers'.

A fourth and untitled exhibit examined in this study comprised a life-size anthropomorphic automaton. When introduced onto the stage the figure towered over the demonstrator and was characterised by a head that was cranially incomplete. The model's stance was described within the journalistic press as 'weak and shrunken'.⁶⁶ Derogatory terms were not limited to journalistic accounts but were also, astonishingly, verbalised, to the audience themselves by Peter. For example, during the performance

Peter referred to the Chinese audience as 'ignorant' in terms of health conservation.⁶⁷ He described the model on display thus: 'their heads are empty. See how empty it is'.⁶⁸ After such derision, a bag was inflated in the head area, representing the effects of Western education.

During the finale of this object lesson, lights radiated from the figure's eyes. These were described as 'gleams of intelligence and rectitude',⁶⁹ terms evoking moral judgement on the model's previous state. Though light was commonly used in health exhibits of the period,⁷⁰ in this instance, it also propagated religious interpretations within the mission-oriented press. Rev. Otto Reller, for instance, described this figure as being the climax of the performance recalling 'as the lecturer brings the message of a loving God, the heavenly Father and of Christ, a Saviour, the light of the spirit shines out from the eyes of the manikin; men's soul is enlightened'.⁷¹ The mechanised body functioned not only as a representation of China's perceived intellectual deficiency, but also as a potent vehicle for the dissemination of 'anti-heathen' rhetoric and religious analogies within the press. The model also provoked further racist commentary within the missionary press. For example, an image of the mechanical man from an article by Delevan L. Pierson, editor of *The Missionary Review of the World*,⁷² is captioned with the phrase 'the flat headed, stooped shouldered and underdeveloped Chinese'. The caption's ridiculing tone is rendered particularly salient by the photograph's juxtaposition of the model with an actual Chinese individual. It is unclear whether the derogatory statement refers to the model or to the actual individual. Peter's work thus again, provided opportunity for 'debasement' discourse beyond the lecture theatre.⁷³

Broadly, the pronounced stooped postures depicted in both 'Individual Efforts vs United Efforts' and the large mechanical man may serve to visually represent and reinforce derogatory stereotypes of the Chinese as either aged labourers or overworked, ignorant individuals. In a more extreme interpretation, they may be viewed as enslaved individuals awaiting Western liberation. The mechanical man's blatant representational of 'emptiness' exemplifies Spurr's 'negation' rhetorical trope of colonial discourse.⁷⁴ The vacant head, indicative of the absence of logical thought, was rendered quite literally as a space to be populated by colonial expansion.

Smaller automated human-like figures featured in the exhibit 'On the way to the grave'⁷⁵ as shown in Figure 3. The exhibit was designed to symbolise the global mortality rate attributed to Tuberculosis. The kinetic display comprised a miniature figure exiting a dwelling, traversing a conveyor belt, and subsequently descending into an open coffin every eight seconds.⁷⁶ The coffin descended into the ground accompanied by the sound of a loud gong, drawing gasps from the audience.⁷⁷ The working of the automaton was arguably influenced by contemporary exhibits in the USA. I suggest a mechanism employed at the 1914 Illinois State Fair, to visually represent infant mortality rates, influenced Peter.⁷⁸ Peter's model however employed customised elements for the Chinese audience including use of a white mound (a Chinese symbol of death), a domestic dwelling and a figure in traditional dress. Two versions of the machine existed, characterised by use of different languages – one bilingual (in Figure 3) and another exclusively in Chinese featuring a larger house and figure. Visual analysis of the expressionless miniature human figure in Figure 3 reveals a rigid posture and a disproportionately large expressionless head. Close examination suggests the head's probable origin as that of a Western female doll, evidenced by its prominent cheeks, full lips, and wide-set eyes, with its dark curled hair concealed by a traditional garment. Given this automaton was viewed at a distance the appropriation of the dolls head may have been motivated by efficiency, however as a signifier it may reveal another underlying instance of debasement. The deployment of a Western doll's head to depict a Chinese adult presents a myriad of derogatory connotations – immaturity, intellectual deficiency, agency deprivation, and a state of dependency. In addition, the conveyor belt denies the figure of agency and signifies a seemingly inevitable death.



Figure 3: 'On the way to the grave' Exhibit

© Kautz Family YMCA Archives, University of Minnesota Libraries
<https://creativecommons.org/licenses/by-nc/4.0>

Beyond mechanical figures and dolls, and arguably at his most problematic, Peter also utilised real people as performing exhibits. This is evident in the two-part section entitled 'China's load of disease'. Commencing this act, a performer entered the stage burdened by a substantial sack on his back. The physical exertion of carrying such a load served as a potent visual metaphor when accompanied by the dialogue 'This man represents China'.⁷⁹ Wooden blocks of varying sizes signified diseases with larger blocks denoted those more resistant to eradication. The act of removing a block from the sack correlated with a visible improvement in the figure's posture and gait. As such, the removal of the blocks symbolized the elimination of diseases and its positive consequences.⁸⁰ Peter, disturbingly, outlined the authenticity of the performance within his own writings – the back pack was indeed heavy and so the physical relief of the performer was real.⁸¹ The second segment of the demonstration occurred later in the lecture and represented the state of China after 50 years of public health improvements. As the black curtain dramatically parted, the words 'now, would you see magnificent China when it has put these preventable diseases under its feet' were announced. A man (see Figure 4) stood aloft the blocks. He was described by Peter as 'a perfect specimen of manhood in the city, usually the physical director of the local Y.M.C.A gymnasium'.⁸² The finale was cited as so positively received it resulted in applause.⁸³

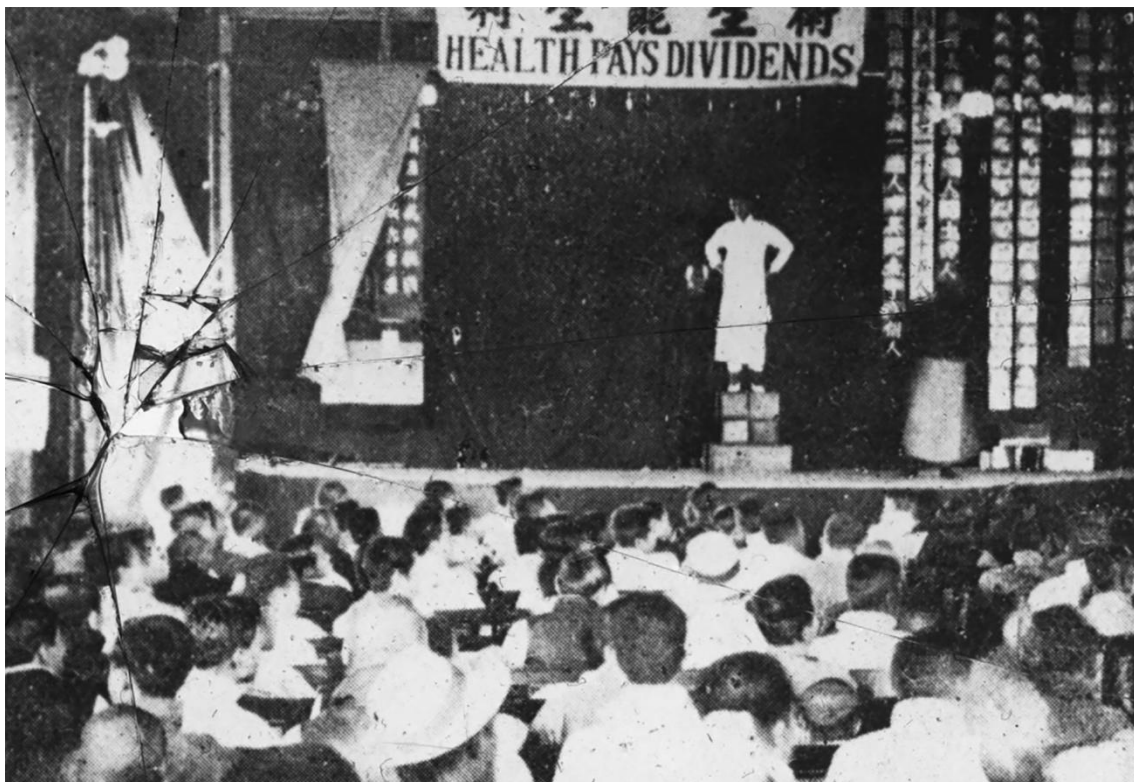


Figure 4: The Finale of 'China's Load of Disease'

© Kautz Family YMCA Archives, University of Minnesota Libraries

<https://creativecommons.org/licenses/by-nc/4.0>

A journalistic account of the first section of this performance jars somewhat with Peter's own recollection and problematises the lecture profoundly. Pierson recalled 'a typical beggar is never hard to find in China and one is led onto the platform, scarred with pock marks, disfigured with boils, ragged and stooped and blind'.⁸⁴ They described how the man staggers under the weight on this back and labels him 'bewildered'. Pierson then goes on to cruelly dismiss the beggar – 'the poor, old beggar, stupidly wondering what it all means, and clasping his newly earned cash is already beginning to pass of the scene'.⁸⁵ As such Pierson referred to the beggar (and thus China) with as much disdain as disease itself. The utilization of a pock-marked beggar to represent China raises significant ethical concerns. This deployment of real individuals within the performance, particularly one with visible disfigurement, bears a troubling resemblance to the practices prevalent in 19th and 20th-century American museums and traveling exhibitions. These venues often featured live human displays, presented under the guise of education, but which frequently served to exploit and objectify individuals deemed 'different'.⁸⁶ Such shows thrived on emphasising or stigmatising otherness to provoke curiosity. In Peter's live exhibit both humans were extremes of otherness – pock-marked by unhealth or a physical exemplar of fitness (a China of the future).

Conclusion

This study has examined six 'object lesson' exhibits utilised in China by W.W. Peter's, surfacing new knowledge about their visual appearance and operation. It is argued that such seemingly heterogenous objects may be unified by varied applications of Spurr's rhetorical modes of colonial discourse. Colonial rhetoric is evident within the infantilizing of the audience (an explicit form of debasement) manifest by cartoon-like exaggerated styling of bodies and utilisation of doll and toy-like constructions. In addition, the body has been shown to function as a comparative device in which the frequency of human figures within designs is used to affirm western superiority. This was notably achieved via the pseudo-scientific symbolism of the skull or crassly formed figurines. Representing China as a weight-laden beggar or an empty head (only transformed with Western intervention)

highlights a sense of white superiority via the rhetorical modes of affirmation and negation. It has also been demonstrated, in three key examples, how contemporary journalistic accounts utilised the design of Peter's individual exhibits to fuel 'anti-heathen' rhetoric. As such, it is suggested that Peter's exhibits may be viewed today as visible 'weapons', propagating America's 'colonial warfare' on health in China. As weapons the exhibits serve, somewhat paradoxically, both to subjugate and encourage. Whilst stressing the supposed inadequacies of the Chinese, Peter was also advocating that China, with western public health initiatives, may compete with the rest of the world politically and financially. This is evident in the rhetoric of exhibition titles such as 'Index of National Strength' and the title of the lecture – 'Health Pays Dividends'. The exhibits themselves reflect well the very definition of colonialism – to justify infiltrated 'improvement' by supposed proof of a population's inadequacies

A limitation of this study is the lack of information available regarding Chinese resistance to the symbolism or content of Peter's 'object lessons'. There is little sense of how the exhibits were received in the Chinese Press or by audience members themselves. Availability of such data would enrich the discussion further. Further research provocations emerge, such as how did early twentieth century exhibition design, such as the Tuberculosis exhibitions within the USA, also reflect colonial tropes and when, and how, were such stereotypes abandoned. Broader questions are posited regarding the influence of health exhibit design on American missionary rhetoric beyond Peter's exhibits. How, for example, were accompanying parades and static exhibitions also vehicles for such discourse? New methodological reflections are also raised in relation to the application of Spurr's textual rhetoric tropes to visual exhibition design and their possible critical expansion.

In conclusion, this study presents new and vital work of interest to the historian studying the relationship between health communication design and colonialism. It contributes new knowledge in how American health campaigns were tailored to Chinese audiences. It contributes a new application of Spurr's tropes to the area of health exhibition design and thus advances methodology in this field of design history. It also advances current debates in design history by adding Peter as a significant though highly problematic figure in health exhibition design in the early 20th Century. Finally, the work has also demonstrated the value of critical visual analysis applied to performed health exhibits. It is insufficient to describe broader remits of colonial endeavours in this area without the tool of visual

analysis. Such methods deepen understanding of historical communication strategies and may, in turn, aid in identifying and classifying visual forms of racism.

¹ The Exclusionist movement is well documented in Paul A Kramer, "Empire against exclusion in early 20th century Trans-Pacific history," *Nanzan review of American studies: a journal of the Centre for American Studies, Nanzan University* 33 (2011): 13–32.

² Jan Misiuna, "The Impact of the Chinese Diaspora in the US on the American View of China," *International Studies: Interdisciplinary Political and Cultural Journal* (IS) 22, no. 1 (2018): 153–168, 157.

³ Kwang-Ching Liu, ed. *American missionaries in China: papers from Harvard seminars* (Cambridge MA: Harvard University Press, 1970).

⁴ See Gerald H Choa, *'Heal the sick' was their motto: the Protestant medical missionaries in China* (Hong Kong: Chinese University Press, 1990).

⁵ See John R Watt, *Saving Lives in Wartime China* (Leiden: Brill, 2014) 18. See also Liping Bu, *Public Health and the Modernization of China* (New York: Routledge, 2017) 47 for discussion about the rise of public health in China since 1910.

⁶ William Wesley Peter, "Some health problems of changing China," *Journal of the American Medical Association* 58, no. 26 (1912): 2023–2024.

⁷ Iris Borowy, ed. *Uneasy Encounters: The Politics of Medicine and Health in China, 1900-1937* (Frankfurt: Peter Lang, 2009), 10.

⁸ See FindAGrave, Dr William Wesley Peter Memorial, <https://www.findagrave.com/memorial/60127763/william-wesley-peter>.

⁹ A plethora of newspaper articles across the U.S. promoted Peter's lively public talks to American provinces from 1919 – see for example "Dr Peter Speaks Here This Evening," *Courier News*, Wed 18th June 1919, 1.

¹⁰ Homer N. Calvert, "The exhibit medium," *American Journal of Public Health* 29, no. 4 (1939): 341–346: 343.

¹¹ Evert Grant Routzahn, *The Health Show Comes to Town: The Story of a Campaign of Health Education which Included the Platform Use of Mechanical Devices and Dramatic Action* (New York: Russell Sage Foundation, 1920), 28. Routzahn also later would recommend Peter's approach in other publications – see for example Evert Grant Routzahn, *Elements of a Social Publicity Programme* (New York: Russell Sage Foundation, 1920), 13.

¹² George Brown Goode, "The museums of the future," in *Report of the United States National Museum for the year ending June 30, 1889*, 427–445, 427.

¹³ Parna Sengupta, "An object lesson in colonial pedagogy," *Comparative Studies in Society and History* 45, no. 1 (2003): 96–121, 96.

¹⁴ Liping Bu, "Cultural communication in picturing health: WW Peter and the public health campaigns in China", 1912-1926," *Imagining Illness: Public Health and Visual Culture* (2010): 24–39.

¹⁵ See Peter Buck, *American science and modern China, 1876-1936* (Cambridge: Cambridge University Press, 1980) and Ko-che Yip, "Health and society in China: Public health education for the community," *Social Science & Medicine* 16, no. 12 (1982): 1197–1205: 1200.

¹⁶ Elizabeth J Perry, "Public Health, National Strength, and Regime Legitimacy: China's Patriotic Health Campaign," *The China Journal* 91 no. 1 (2024): 1–22.

¹⁷ See Yoshino Sugawara, "From teahouse to classroom: Educational screen practice in Republican Shanghai," *Journal of Chinese Cinemas* 16, no. 1 (2022): 9–24 and Yoshino Sugawara, "Toward the Opposite Side of 'Vulgarity,'" in Emilie Yueh-yu Yeh, ed. *Early Film Culture in Hong Kong, Taiwan, and Republican China: Kaleidoscopic Histories* (Ann Arbor:Michigan University Press, 2018):179.

¹⁸ See for example Michael Sappol, *Body modern: Fritz Kahn, scientific illustration, and the homuncular subject* (Minnesota: University of Minnesota Press, 2017) or Elena Canadelli, "The diffusion of a museum exhibit: the case of the transparent man," in Fabrizio Panebianco & Emanuele Serrelli, eds. *Understanding cultural traits: A multidisciplinary perspective on cultural diversity* (Cham: Springer, 2016):61–80.

¹⁹ Barbara Arneil, "Colonialism versus imperialism," *Political Theory* 52, no. 1 (2024): 146–176, 156.

²⁰ See, for example, Anne Maxwell, *Colonial photography and exhibitions: Representations of the native and the making of European identities* (London:Bloomsbury Publishing, 2000) who discusses the essential paradox of colonisation – at once 'other' and 'potentially civilised'.

²¹ David Spurr, *The rhetoric of empire: Colonial discourse in journalism, travel writing, and imperial administration* (Durham North Carolina: Duke University Press,1993).

²² See for example Adriana Cordali, "Visual Rhetorical Analyses of Propaganda in Late-Communist Romania," In *Visual Rhetorics of Communist Romania: Life Under the Totalitarian Gaze* (Cham: Springer International Publishing, 2023) or Barbara Grossman-Thompson and Benjamin Linder. "Landscaping otherness: the charm of inequity in Nepali tourism," *Verge: Studies in Global Asias* 1, no. 1 (2015): 184–211.

²³ Spurr's influential 12 tropes, devised through extensive study of travel journalism, is not entirely applicable to the Chinese context of this study. There are, for example, additional tropes such as idealisation, aestheticism, exoticism or naturalization that apply more to the discourse relating to the (fully colonised) African nations. Equally the literature base for the colonialism area is immense and thus this study has necessarily focused on one hugely influential text for its structure of analysis.

²⁴ There is clear evidence that colonial discourse contained 'the child' as an example of debasement. The child was a much used analogy for the colonial subject, destined to be nurtured by 'the empire'. See, for example, Bill Ashcroft, "Primitive and Wingless: the colonial subject as child," In Wendy S Jacobson, ed. *Dickens and the Children of Empire* (London: Palgrave Macmillan UK, 2000) 184–202.

²⁵ Pedro Felipe N. de Muñoz, "From Dresden to the world: images of the German Hygiene Museum's relations with Latin America 1911-1933," *História, Ciências, Saúde-Manguinhos*, 29 (2022): 195–214.

²⁶ Julie K Brown, *Health and medicine on display: international expositions in the United States, 1876-1904* (Cambridge, Massachusetts: MIT Press, 2009), 2.

²⁷ Jennifer Koslow, *Exhibiting Health: Public Health Displays in the Progressive Era* (New Jersey: Rutgers University Press, 2020).

-
- ²⁸ Nancy Tomes, *The gospel of germs: Men, women, and the microbe in American life* (Cambridge Massachusetts: Harvard University Press, 1999), 19.
- ²⁹ Alexander Wilson, "The Value and Scope of Exhibitions and Museums," *American journal of public hygiene* 20 no. 3 (1910): 498–502, 500.
- ³⁰ Jay Augusta, "Evart Grant Routzahn," *American Journal of Public Health*, Jun; 29(6), 1939 665–666, 665.
- ³¹ Routzahn, *The Health Show Comes to Town*
- ³² Peter Buck, *American science and modern China, 1876-1936* (Cambridge: Cambridge University Press, 1980), 67.
- ³³ Bu, "Cultural communication in picturing health," 25.
- ³⁴ *Ibid.*, 26.
- ³⁵ Peter, "Some health problems of changing China", 2023–2024.
- ³⁶ *Ibid.*
- ³⁷ *Ibid.*
- ³⁸ William Wesley Peter, *Chinese National Committee, Shanghai. Annual Report for the year ending Sept. 30, 1914*, University of Minnesota Libraries, Kautz Family YMCA Archives, <https://umedia.lib.umn.edu/item/p16022coll358:788>.
- ³⁹ YMCA of the USA. International Division, *Annual and Quarterly Reports. Annual reports of the YMCAs of China, Korea, and Hong Kong, 1902-1904: A Year's Work Among Young Men: Annual Report, Young Men's Christian Associations of China, 1915*, (Box 16, Folder 11) University of Minnesota Libraries, Kautz Family YMCA Archives, <https://umedia.lib.umn.edu/item/p16022coll360:31731>, 12.
- ⁴⁰ John Junior Ritchie, "Conquering the Capital of Plague with a Wheelbarrow," *Boston Evening Transcript*, May 29, 1918, Clipping from Kautz Family YMCA Archive (Subject Files. Health Education: Articles, undated and 1917-1924. (Box 94, Folder 2)), no page numbers. <http://purl.umn.edu/240820>, 13.
- ⁴¹ William Wesley Peter, "Foochow Baby Welfare Campaign," April 20–May 15 1921: 8, Subject Files. Health Education: Reports and correspondence, undated and 1918–1932 (Box 93, Folder 3), <http://umedia.lib.umn.edu/item/p16022coll360:66748>.
- ⁴² See Delevan L Pierson, "Health and the Gospel in China," *The Missionary Review of the World*, Jan 1918; 19–28, 28 for evidence of the raising of \$20,000 for a new tuberculosis hospital after the campaign ran in Changsha, Hunan. See Edgar French Strother, "An American Physician-Diplomat in China," *The World's Work* 35 (New York: Doubleday, Page & Co., 1918: 545–555) for reports that vaccination in an unnamed city escalated from 90 to 800 a day following Peter's visit. For further evidence of the legacy of Peter's campaign in which materials were re-used and health education was improved see Liping Bu, "Public health and modernisation: the first campaigns in China, 1915–1916," *Social history of medicine* 22, no. 2 (2009): 305–319. 317.
- ⁴³ For more information about the reception of Peter's work see Bu, "Public health and modernisation," 312 and Yip, "Health and society in China,".

⁴⁴ Peter stated that American methods would help ‘furnish their idea for their own work’ whilst also requesting a budget for new construction, such as an electric device to sound a bell every 50 seconds. The Chinese budget for construction was \$225 (arguably a very large internal budget) in comparison to \$150 for imported American purchases. Peter, “Chinese National Committee, Shanghai. Annual Report for the year ending Sept. 30, 1914,” Appendix 1 9-10.
https://umedia.lib.umn.edu/item/p16022coll358:788/p16022coll358:762?child_index=9&q=W.%20W.%20Peter&query=&sidebar_page=4&sort=&utf8=%E2%9C%93.

⁴⁵ A letter from YMCA member Fletcher S Brockman stated that ‘All material must have a Chinese setting. Exhibits used in America do not apply but are useful for suggestions’, Peter, “National Committee, Shanghai. Annual Report for the year ending Sept. 30, 1914,” Appendix 2, 17
https://umedia.lib.umn.edu/item/p16022coll358:788/p16022coll358:762?child_index=9&q=W.%20W.%20Peter&query=&sidebar_page=4&sort=&utf8=%E2%9C%93.

⁴⁶ Bu, “Cultural communication in picturing health,” 27.

⁴⁷ Hester Donaldson Jenkins, “When the Man and the Job Met,” *World Outlook*, May 1918, 18–19, 18.

⁴⁸ The large flies featured in say, Peter’s street parade are very similar to those reported in Koslow. See endnote 27.

⁴⁹ Peter stated whilst some exhibits were used for years, others were regularly repaired or some methods of visualisation abandoned. See *Records of YMCA international work in China (Y.USA.9-2-4) Subject Files. Health Education: Proof sheets of unpublished W. W. Peter book, 1931 (Box 93, Folder 6)*.
https://umedia.lib.umn.edu/item/p16022coll360:3631/p16022coll360:3414?child_index=74&query=ap paratus&sidebar_page=1.

⁵⁰ See *Records of YMCA international work in China (Y.USA.9-2-4) Subject Files. Health Education: Proof sheets of unpublished W. W. Peter book, 1931 (Box 93, Folder 6)*
https://umedia.lib.umn.edu/item/p16022coll360:3631/p16022coll360:3411?child_index=71&query=&sidebar_ppag=24.

⁵¹ William Wesley Peter, “The field and methods of public health work in the missionary enterprise,” *Chinese Medical Journal* 40(03), 1926, 185–239, 211.

⁵² William Wesley Peter, “National Health and National Strength. A demonstrated Lecture outline prepared by W.W Peter, Council on Health Education, Shanghai, 1923,” YMCA of the USA. International Division, Subject Files. Health Education: Reports and correspondence, undated and 1918-1932 (Box 93, Folder 3) 128. University of Minnesota Libraries, Kautz Family YMCA Archives, <http://umedia.lib.umn.edu/item/p16022coll360:66748>.

⁵³ See for example the diagrams of Morton in ‘Crania Americana of 1839’ in Marianne Sommer, *The Diagrammatics of ‘Race’: Visualizing Human Relatedness in the History of Physical, Evolutionary, and Genetic Anthropology, ca. 1770–2020* (Cambridge, UK: Open Book Publishers, 2024).

⁵⁴ See John S Haller, *Outcasts from evolution: Scientific attitudes of racial inferiority, 1859–1900* (Illinois: SIU Press, 1995), 18 for detailed accounts of this phenomenon.

⁵⁵ See John Kuo Wei Tchen and Dylan Yeats, *Yellow peril!: An archive of anti-Asian fear* (London: Verso Books, 2014).

⁵⁶ John Junior Ritchie, “Conquering the Capital of Plague with a Wheelbarrow,”.

⁵⁷ Edgar French Strother, "An American Physician-Diplomat in China," 553.

⁵⁸ No Author, "Peter, a rush medical man in china," Our own Correspondent, *Peking Daily News* English ed.; Beijing. 13 Oct 1915, 5.

⁵⁹ William Wesley Peter, "Teaching Health in China," *Health*, Jan 1923, 33 Subject Files. Health Education: Miscellaneous printed material, 1915–1931. (Box 93, Folder 5) 110.

⁶⁰ Elizabeth Toon, *Managing the conduct of the individual life: Public health education and American public health, 1910 to 1940* (Pennsylvania: University of Pennsylvania ProQuest Dissertations Publishing, 1998), 2. An image of the exhibit is featured in Gardner T Swarts Jr, "Charts and Maps as Used by Health Officers," *American Journal of Public Health* 8, no. 9 (1918): 674–689, 684.

⁶¹ William Wesley Peter, "National Health and National Strength," 6

⁶² French Strother, "An American Physician-Diplomat in China," 554.

⁶³ An additional suggested reading is of small simplified Chinese figures being dominated by the Western ideal of mechanisation and efficiency.

⁶⁴ Photograph available at Kautz Family YMCA Archive Subject Files. Health Education: Articles by W. W. Peter, undated and 1913-1924. (Box 93, Folder 8) Page 63.
https://umedia.lib.umn.edu/item/p16022coll360:24348/p16022coll360:24305?child_index=62&query=&sidebar_page=21.

⁶⁵ William Wesley Peter, "Letter to Mr Jacob Speicher, Christian Institute, May 22nd 1925," YMCA of the USA. International Division, Subject Files. Health Education: Reports and correspondence, undated and 1918-1932 (Box 93, Folder 3), 103 University of Minnesota Libraries, Kautz Family YMCA Archives, <https://umedia.lib.umn.edu/item/p16022coll360:66748>.

⁶⁶ Ritchie, "Conquering the Capital of Plague with a Wheelbarrow,".

⁶⁷ William Wesley Peter, "National Health and National Strength," 7.

⁶⁸ Ibid.

⁶⁹ Ritchie, "Conquering the Capital of Plague with a Wheelbarrow,".

⁷⁰ Evart G. Routzahn & Mary Swain Routzahn, *The ABC of Exhibit Planning* (New York: Russell Sage, 1918), 88.

⁷¹ Otto Reller, "Health and the Gospel in China," *Evangelical Times*, Nov 16th, 1919, 3–5, 5.

⁷² Delevan L Pierson, "Health and the Gospel in China," *The Missionary Review of the World*, Jan 1918, 19-28, 27. For the full image see:
https://umedia.lib.umn.edu/item/p16022coll360:57439/p16022coll360:57389?child_index=103&q=routzahn%20health&query=&sidebar_page=35&sort=score%20desc%2C%20title_sort%20desc&utf8=%E2%9C%93.

⁷³ Religious interpretations of the show more broadly, within publications such as *Missionary Review*, emphasised a specific Christian agenda. Pierson for example described how the campaign broadly hoped to 'reach Chinese souls through their bodies' and shockingly went on to describe the Chinese

as 'shrunken and misshapen in sin'.

⁷⁴ Spurr, *The rhetoric of empire*, 105.

⁷⁵ Peter, "The field and methods of public health work in the missionary enterprise," 212.

⁷⁶ Strother, "An American Physician-Diplomat in China," 554.

⁷⁷ No author, "Putting China's Quack Doctors to Flight," *Literary Digest*, March 17th, 1917, 709.

⁷⁸ Toon describes a similar mechanism used in the 1914 Illinois State Fair to indicate rates of infant mortality – motorised babies 'crawled' in front of a countryside backdrop and each fifth child was knocked down by a grim reaper figure. See Toon, *Managing the conduct of the individual life: Public health education and American public health*, 2.

⁷⁹ Strother, "An American Physician-Diplomat in China," 552.

⁸⁰ Peter, "The field and methods of public health work in the missionary enterprise," 210.

⁸¹ *Ibid.*

⁸² Peter, "Popular Health Education In China; A Movement Adapted To The Psychology Of The People," *American Journal of Public Health* 9 (Oct 1919): 743–749, 747.

⁸³ Strother, "An American Physician-Diplomat in China," 553.

⁸⁴ Pierson, "Health and the Gospel in China," 26.

⁸⁵ Pierson, "Health and the Gospel in China," 27.

⁸⁶ For more information on 'freak shows' including Barnum's 'American Museum' of 1840, see Robert Bogdan, *Freak show: Presenting human oddities for amusement and profit* (Chicago: University of Chicago Press, 1988).