

Personal View

The six doctors gathered around, listening intently. I had been invited to their room during my month as visiting scholar in a major Chinese hospital medical school in the capital, Beijing. My own accommodation was in a comfortable dormitory close to the hospital. I knew in advance that I would have to share a room there and my room mate and I tolerated each other's presence, proud of being able to manage in these difficult conditions. I was not prepared, however, for the cramped conditions in which my Chinese colleagues were living.

Four flights of steep, unlit stairs led up to their corridor, dark and gloomy. Clothes were drying on racks and on lines strung across the ceiling. Other racks contained cooking pots and stores of food. Seventy doctors lived on this short corridor, up to eight in each room. My hosts' room, slightly larger than my own garage, contained four bunk beds, two desks, a bookcase, six Chinese doctors, and now me, sitting in pride of place on the comfortable chair with a cup of hot green tea in my hand.

It was difficult to accept, given the surroundings, that these doctors are the country's medical future—not barefoot recruits but specially selected from all over the country to come to Beijing for advanced training and specialisation. They were all engaged on research projects and were eager to explain the details to me. I had to stop myself from correcting American pronunciation and grammar. Plans for the future were unanimous: all wanted to be professors of their specialty, studying and teaching in the service of science and mankind.

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It was interesting to ask them about traditional medical practice. All thought that it was effective but not very effective and were amused by my preoccupation with the historical details of herbal and acupuncture treatments. I was often asked why I was so interested in treatments which were of fading importance to modern medicine and had to explain about alternative medicine and that many British doctors took these things seriously.

Although living "on the house," three of these men were married; their wives, also medical, living and working hundreds of miles away. None seemed to want to have their child in the near future, but with visits only possible twice or three times a year I thought that the likelihood of their becoming fathers was remote. My host had been very quiet about his wife. He had not previously told me that he was married; perhaps he was too embarrassed to say anything. After all, he had seen his wife for only one week since the wedding a year ago. He had had to listen to my brave denials of loneliness at having left my pregnant wife in our comfortable three bedroomed house for all of a month. I asked about the possibility of their reunion; it seemed that this might be possible but only by giving up the prestige of work in Beijing and moving to the country. Remote areas have few medical facilities and are primitive compared with practice in Beijing, with its advanced state of knowledge, research facilities, and now real contact with the rest of the world. No, on balance they were happy the way they were. The chance of foreign visits to conferences and to study in big hospitals, sometimes for several years at a time, was a potent stimulus for vigorous study.

"How did you get permission to come to China?" I explained about the letters of invitation from the appropriate government department that were necessary to get the visa. It had not occurred to me that they wanted to know how I got permission to leave England. I muttered something about problems of getting study leave, but I hadn't the courage to say that I could come and go exactly as I pleased.

I met a doctor who had just returned from maternity leave, the baby safe with its paternal grandparents a thousand miles away. Her husband had just left for a five year study programme in the United States—unlikely to return sooner as flights are expensive. Families are only rarely allowed to go abroad together. I thought better of mentioning my own plans for the next three years—to travel the world with our young family—wondering whether underneath her pride there was loneliness and despair.

"Tell us about your hospital. Tell us about your family; how do you spend your free time?" The Chinese work six days a week, often meeting family or friends on Sunday for a meal at home or a cycle ride to the local park. The subject of windsurfing came up, a common enough topic in any British doctors' mess. How could I explain this—not the technique and skills required but the concept of our leisure—loading up the car on a Friday afternoon, traffic jams, too much beer, nice little hotel, and breakfast in bed on Sunday with the newspapers? Six weeks' holiday a year, plus study leave, and a couple of weeks with a locum agency to pay off the overdraft from skiing in Courcheval and lazing on Minorca. Perhaps not as exciting as 20 hours on a slow train to the countryside to see your wife, but we seem to manage, and it keeps the bank manager happy.

They thought that we were fortunate to be able to travel, have as many children as we wanted, be affluent, and live with our wives (but how unfair to make them stay at home to look after the children). I retaliated by defending the achievements of the Chinese government: everybody has a job, food, and shelter; there seems to be purpose in life. I saw a lot of blank faces during my stay, but nobody looked truly unhappy. I asked where the depressed people went and was reminded of the Chinese saying, "To achieve longevity, you must be content with your life."

It was difficult to leave that evening. They sat round, posing proudly as I photographed their home. I wanted to invite them to my home, but stopped myself; after the hospitality that had been shown to me I wanted to reciprocate somehow. I promised to write.

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"These are the worst living conditions I have ever seen in 10 years of doing this job," said the flabbergasted BMA industrial relations officer as he inspected our doctors' mess. "Doctors just shouldn't have to put up with this." The living quarters in question are long past their renewal date, a decade of riotous parties and happy hours have left the carpets and walls stained; the furniture is torn, the television stolen, and what is left of the kitchen equipment is unusable. The whole place is due for a refit, but it is warm and does offer spacious, single rooms, not all of which are damp. Mess atmosphere has declined recently with most juniors buying their own houses, only staying every third or fourth night when on call. The row of cars outside bears witness to affluence. Despite stories of cutbacks and unemployment among doctors, the prospects here are good for those who are determined and interested. Trainees for general practice and hospital consultancy can look forward to a comfortable house, perhaps in a pretty village, two cars and foreign holidays, while worrying about the price of their shares on the stock market. It is unthinkable that we could spend years away from our families for the sake of our careers.

I recommend a month in a Chinese hospital to any British doctor disillusioned with his or her prospects—you won't even have to ask permission to leave.

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