

# Dr Alice Hickling (1876-1928): the doctor who changed the paradigm of maternal care in Hong Kong

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Dr Alice Hickling was a pioneer in maternal and infant health in Hong Kong. Born Alice Sibree, she was a daughter of the Reverend Dr James Sibree, a missionary and architect of the London Missionary Society (LMS) in Madagascar. She studied at the London School of Medicine for Women, received special training in obstetrics and gynaecology at the Rotunda Lying-in Hospital, Dublin, Ireland, and was a licentiate of the Royal College of Physicians and the Royal College of Surgeons, Edinburgh.<sup>1</sup> She was engaged by the LMS to direct the new Alice Memorial Maternity Hospital (AMMH) in Hong Kong, which was built using donations from the Chinese elite in the community and was completed in 1904.

In the nineteenth century, both infant and maternal mortality rates were very high in Hong Kong. Although statistics were not routinely recorded for maternal mortality or numbers of live births, estimated infant mortality rates were unbelievably high—from 700 to over 900 per 1000 births between 1895 to 1906.<sup>2</sup> This high infant mortality led to the appointment of a committee in 1903 to investigate the causes of infant deaths. On the basis of findings that 50% of all infant deaths were due to trismus as a result of tetanus infection and the remainder due to other types of infection and malnutrition, the committee recommended more systematic registration of birth and deaths, free maternity service to attend to confinement of women in their own homes, training Chinese midwives, and basic hygiene education for mothers. The Colonial Administrator, Mr FH May, suggested training Chinese midwives in the new AMMH.<sup>3</sup>

There were, however, problems with Mr. May's plan. When Western medicine was introduced in Hong Kong, it was not accepted by the local Chinese who trusted traditional Chinese medicine. Chinese women had their confinement at home carried out by traditional midwives (*wan po*), who learned midwifery and delivery skills from oral tradition and from attending childbirths with another *wan po*, and who knew nothing about sepsis, one of the major causes of maternal deaths.<sup>4</sup> At that time Chinese women would not see a Chinese male doctor let alone a foreign male doctor. When the LMS asked

Dr Ho Kai, who was responsible for raising funds to build the new hospital, for more donations for the salary of a doctor for the hospital, Dr Ho Kai and his friends insisted on having a female doctor to care for the Chinese women. However, Dr RM Gibson, the Medical Superintendent of Alice Memorial Hospital, the first of the Alice affiliated hospitals sponsored by the LMS, insisted that women should be nurses and not doctors, an opinion that was unfortunately prevalent at the time.<sup>5</sup> Another hurdle was the stipulation that this female doctor appointed should learn Cantonese during the first year after arrival, to be able to communicate with the locals.

It was under these circumstances that Dr Hickling entered the scene to become the first female doctor in Hong Kong. Dr Hickling became proficient in Cantonese within the first year, and as a result, she was welcomed into the homes of Chinese families to do her medical and missionary work. She recommended that midwives receive formal training in the Western style, following a 2-year course based on the British curriculum. Student midwives had to complete the general nursing training before being admitted to this programme. The first three student midwives she trained all passed the first government examination for midwives held in 1906 and the government sent more midwives to AMMH for training<sup>2</sup> (Fig 1). By 1907, six trained midwives were employed by the Chinese Public Dispensaries and government clinics, and they attended to 579 domiciliary confinements that year.<sup>6</sup> However, Dr Hickling was not given any opportunities by Dr Gibson to attend to general medical patients in the Alice Memorial Hospital and out-patient clinics. Instead, at the recommendation of Dr Ho Kai, she took over maternity work at Tung Wah Hospital and became the medical officer of Po Leung Kuk (the Society for the Protection of Women and Children). She also initiated a health education programme for mothers after delivery on nutrition and general care of infants in the hospitals.

Despite these challenges, by the end of her contract in 1909, Dr Hickling's services were much sought after by Chinese women in the community. The Chinese elite had been won over and they



FIG 1. Dr Alice Hickling with student midwives circa 1906. Source: Alice Nethersole Ho Miu Ling Foundation

demanded the next female doctor should be on the regular staff of the Alice hospitals and should take charge of Chinese female patients under Western treatment at Tung Wah Hospital.<sup>7</sup>

Dr Hickling returned to London at the end of her contract and resigned from the LMS. On returning to Hong Kong, she started her own practice and served the Hong Kong community in the secular setting. She continued to be responsible for midwife training at AMMH, and in 1914, she was appointed to the Midwives Board. She married Mr CC Hickling, manager of Taikoo Sugar Refinery in 1915. Dr Hickling became the first female doctor to be appointed Acting Medical Officer of Health, in 1918, and Assistant Medical Officer in charge of all Chinese hospitals and Chinese Public Dispensaries, in 1922.<sup>8</sup>

When the Eastern District Plague Hospital was converted into a maternity hospital in 1919, Dr Seenwan Ts'o and members of the Eastern District Public Dispensary invited Dr Hickling to supervise the hospital.<sup>9</sup> The hospital grew quickly, handling close to 200 patients during its first year. When construction was completed in 1922, Dr Hickling became director of Tsan Yuk Hospital. At her suggestion, a midwife training programme was established at the hospital and the matron of the hospital was sent to attend a course at Rotunda Hospital. From then, the teaching of midwifery in Tsan Yuk Hospital was based on the



FIG 2. Portrait of Dr Alice Hickling with the following inscription: "In memory of Dr AD Hickling, MBE, presented by the staff, past and present nurses of Tsan Yuk Hospital" unveiled by Lady Clementi on 21 December 1929. Source: Hong Kong Museum of Medical Sciences

principles of Rotunda Hospital. Dr Hickling also established gynaecology clinics, a gynaecology ward, and an operation theatre in Tsan Yuk Hospital. It was thanks to these efforts that Professor Richard Edwin Tottenham of the Department of Obstetrics and Gynaecology at The University of Hong Kong, gradually transferred the Department's clinical, teaching, and research activities to Tsan Yuk Hospital. As a result, the hospital became not only the training centre for midwives but also for medical students and trainees in obstetrics and gynaecology. Its low maternal mortality set a benchmark for other maternity hospitals in Hong Kong.

Dr Hickling not only pioneered women's medical practice in Hong Kong, she also founded the first "baby clinic", precursor to the present Maternal and Child Health Centres, to care for children aged up to 2 years at Tsan Yuk Hospital. Other infant care

centres were established, first at AMMH and Tung Wah Hospital,<sup>7</sup> then at outside hospitals in different districts. These centres drew large numbers of patients each year where babies were weighed and examined and mothers given instruction in feeding and care of babies and health education.

Dr Hickling was honoured with the Order of the British Empire for her services during the First World War, and received the decoration of Sister of the Order of St John of Jerusalem. She died in Hong Kong in September 1928.<sup>10</sup> In commemoration of her 25 years of contributions to education and medical and healthcare to women and infants, a portrait was presented to Tsan Yuk Hospital by staff and past and present nurses, to be hung in the Nurses' Dining Room. The portrait was unveiled by Lady Clementi in the presence of Dr Seen-wan Ts'o and many dignitaries of Hong Kong in December 1929 (Fig 2).

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