

**Title:**

## Fever Dreams: Infectious Disease, Epidemic Events, and the Making of Hong Kong

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**Abstract (summary):**

There is no surfeit of infectious disease or of epidemic events in Hong Kong's history. Accounts of local outbreaks of malaria, tuberculosis, influenza, cholera, and typhus pepper colonial government archives and newspaper reports. Deadly outbreaks of malaria dubbed the 'Hongkong fever' nearly put an end to this colonial project within its first few years of existence and to survive, its administrators borrowed strategies from Britain's other tropical colonies, implementing afforestation projects and legislating spatial segregation from the local Chinese population. As entrepôt trade grew and Britain's anchor to the China trade was integrated into imperial networks, local epidemics in 'insalubrious' Hong Kong spread through those same networks and so became pandemics. Such was the case when bubonic plague broke out at the end of the nineteenth century, carried through Hong Kong's port system. In the twentieth century, Hong Kong faced chronic trouble with infectious disease, notably chronically high rates of tuberculosis, and was associated with three global pandemics: H2N2 or the 'Asian flu' in 1957, H3N2 or the 'Hong Kong flu' in 1968, and then a novel virus, SARS, in 2003. There are many reasons for Hong Kong's implication in these pandemics, a constellation of the territory's geographical, climatological, political and social traits. This confluence of factors is particular to Hong Kong and its risks intensified after the 1997 reunification with the People's Republic of China. This dissertation narrates Hong Kong's history through five epidemic events, revealing the medical stakes of the city's hyperconnectivity as a global hub. At the same time, the project shows that this challenging disease history has molded local society, culture, and identity. Where epidemic events make Hong Kong's global connections all too evident, collective memory of losses and surviving epidemics is integral to Hong Kong life and history. Its lives of its people, heunggangyahn, are shaped by the chronic presence of infectious disease and their survival of crises—medical, economic, and political—helps shape this distinct, local identity.

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University of Hong Kong, Hong Kong (K.O. Kwok); Shenzhen Research Institute of The Chinese University of Hong Kong, Shenzhen, China (K.O. Kwok); City University of Hong Kong College of Liberal Arts and Social Sciences, Hong Kong (K.K. Li); Sungkyunkwan University College of Software, Seoul, South Korea (A. Tang). of major events related to COVID-19 both inside and outside Hong Kong and the number of confirmed cases in Hong Kong before and during the period covered by the survey (Figure 1). Abstract. During the early phase of the coronavirus disease epidemic in Hong Kong, 1,715 survey respondents reported high. levels of perceived risk, mild anxiety, and adoption of personal-hygiene, travel-avoidance, and social-distancing. measures. Annual incidence of scarlet fever in Hong Kong remained elevated after an upsurge in 2011. Incidence increased from 3.3/10,000 children <5 years of age during 2005–2010 to 18.1/10,000 during 2012–2015. Incidence was higher among boys and was 32%–42% lower in the week following school holidays. Author affiliations: World Health Organization Collaborating Centre for Infectious Disease Epidemiology and Control, University of Hong Kong, Hong Kong, China. Cite This Article. Open modal. Abstract. Annual incidence of scarlet fever in Hong Kong remained elevated after an upsurge in 2011. Incidence increased from 3.3/10,000 children <5 years of age during 2005–2010 to 18.1/10,000 during 2012–2015. In the realm of infectious diseases, a pandemic is the worst case scenario. When an epidemic spreads beyond a country's borders, that's when the disease officially becomes a pandemic. Communicable diseases existed during humankind's hunter-gatherer days, but the shift to agrarian life 10,000 years ago created communities that made epidemics more possible. After the disease passed through Libya, Ethiopia and Egypt, it crossed the Athenian walls as the Spartans laid siege. As much as two-thirds of the population died. The symptoms included fever, thirst, bloody throat and tongue, red skin and lesions. The disease, suspected to have been typhoid fever, weakened the Athenians significantly and was a significant factor in their defeat by the Spartans. 165 A.D.: Antonine Plague.

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