

**Refugee Review Tribunal  
AUSTRALIA**

**RRT RESEARCH RESPONSE**

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**Questions**

- 1. Please provide information as to whether an individual holding Certificate of Graduation from a 3 year Secondary Tertiary Course in Clinic Medicine and a Certificate of Qualification of Doctor stating they successfully passed the National Examination for Doctor Qualification, pursuant to the Doctor Practising Act, would be a doctor.**
- 2. Please advise what responsibility a doctor with 3 years training would have in a local clinic?**

**RESPONSE**

**1. Please provide information as to whether an individual holding Certificate of Graduation from a 3 year Secondary Tertiary Course in Clinic Medicine and a Certificate of Qualification of Doctor stating they successfully passed the National Examination for Doctor Qualification, pursuant to the Doctor Practising Act, would be a doctor.**

Sources, quoted below, suggest that a person holding the above qualifications could be a doctor. Sources report there are a number of ways to study medicine in China including attending a three year course at a Secondary Medical School. This course is open to high school students who have completed nine years of formal schooling. Graduates of Secondary Medical School with one year clinical experience can sit an examination to become a licensed assistant doctor.

The information provided in response to this question has been organised into the following two sections:

- Secondary Medical Schools; and
- Registration.

## Secondary Medical Schools

According to a 1985 article in the *Yonsei Medical Journal*, the Chinese “government developed a large number of “secondary” medical schools with students entering from junior middle school and undergoing a three-year training program.” The article continues:

Modern medical education planning began in China after 1949 when a central policy was delineated, but it was not until 1954 that the merging of certain medical schools and the relocation of others culminated in the creation of a national unified system. ...Because it was not possible to staff a sufficient number of western schools for a country at that time numbering 400,000,000 population, the government developed a large number of “secondary” medical schools with students entering from junior middle school and undergoing a three-year training program. Today, these secondary schools number around 430. The course work involved different disciplines in different schools but may include western general medicine and surgery; Chinese traditional medicine; public health; dental technology; nursing; pharmacy, and laboratory technology. These schools still play a large role in Chinese medical care and the government is working hard to upgrade the capability of the graduates. There have been more than one million graduates from these schools (Ongley, Dr Patrick A. 1985, ‘A Review of Medical Education: Problems in Some Asian Countries’, *Yonsei Medical Journal*, Vol. 26, No. 2, p.98 <http://www.eymj.org/1985/pdf/96.pdf> – Accessed 8 January 2009 – Attachment 1).

According to a 2002 article in *The Yale-China Health Journal*, there are three programs which prepare three different kinds of doctors, including a three year secondary school program for “practical community medical workers for rural areas”. The article continues:

In 1987, a “3-5-7 plan” for standardizing medical training was instituted to address the issues of existing non-standardized training programs that ranged from two to eight years. A three-tiered system of training was seen as necessary in view of varied levels of economic development throughout the country and the shortage of health workers in rural areas. The numbers “3-5-7” refer to the number of years of training. These three programs aim to prepare three different kinds of doctors: practical community medical workers for rural areas (three-year secondary school program), qualified doctors (five-year undergraduate program), and medical scientists (seven-year MA/MD program) (Wang and Lin 1995). ...As Mary Burris (1990) observed in her study of medical schooling in China, the three-year program is not just 60% of the five-year program. The former is more practice-oriented and based on local needs. ...At present, 95% of nurses and 62% of doctors have prepared at the secondary level only (Shi Jun 2001) (Mei-che Pang, Samantha, Kwok-shing Wong, Thomas & Shukching Ho, Jacqueline 2002, ‘Changing Economics and Health Worker Training in Modern China’, *The Yale-China Health Journal*, Vol. 1, Autumn, pp.66-67 <http://www.yalechina.org/articles/pdf/2002%20Health%20Journal.pdf> – Accessed 8 January 2009 – Attachment 2).

According to a 2004 article in the *Journal of the American Medical Association*, “Medical curricula vary greatly, from 3 years at secondary schools to 5 to 8 years at universities”. The article continues:

In 1965 in China, there were 298 secondary medical-pharmaceutical schools with a 3- to 4-year curriculum, which admitted students with a junior high (9-year) education;... The curriculum of the secondary medical schools at the time often included general education in

language, literature, mathematics, and science, as well as specific vocational training in medicine. ...University graduates were eligible to practice with no further training, whereas secondary school graduates were usually required to complete a practical internship first.

...As of 1996, there were 550 secondary medical-pharmaceutical schools, 123 medical-pharmaceutical universities, and 30 colleges of traditional Chinese medicine in China (Reynolds, Dr Teri A. & Tierney Jr, DR Lawrence M. 2004, 'Medical Education in Modern China', *Journal of the American Medical Association*, Vol. 291, No. 17, 5 May, p.2141 <http://jama.ama-assn.org/cgi/content/full/291/17/2141> – Accessed 8 January 2009 – Attachment 3).

According to the book *Healthcare in Rural China: Lessons from HeBei Province* published in 2005, there are four programs in China to prepare doctors to provide health services at different levels including one offered to high school students who have completed nine years formal schooling. The book continues:

When the CCP [Chinese Communist Party] came into power in 1949, it developed a multilevel medical education program to fit the planned three-tier health care delivery system. To-date, four main programs prepare doctors to provide health services at different levels (Chen et al, 1995; Gong et al, 1997).

...The third major training program is offered in high schools to graduates of middle or junior high schools, who have completed nine years of formal schooling. The graduates of secondary medical schools are capable of providing primary curative care and carrying out public health programs with the support of qualified doctors of the township health centers, or county or city hospitals, for specialized and more complicated treatment.

Nonetheless, shortage of health personnel has led to a lack of differentiation between the functions performed by graduates of the different programs (Anson, Ofra & Shifang, Sun 2005, *Healthcare in Rural China: Lessons from HeBei Province*, Ashgate Publishing, United Kingdom, p.51, Google Books website [http://books.google.com/books?hl=en&id=vK3sC6O-zukC&dq=health+care+in+rural+china+ofra&printsec=frontcover&source=web&ots=YI-XaD1F-A&sig=wcGcKDzaECeHGULNlyV9heBXugg&sa=X&oi=book\\_result&resnum=7&ct=result](http://books.google.com/books?hl=en&id=vK3sC6O-zukC&dq=health+care+in+rural+china+ofra&printsec=frontcover&source=web&ots=YI-XaD1F-A&sig=wcGcKDzaECeHGULNlyV9heBXugg&sa=X&oi=book_result&resnum=7&ct=result) – Accessed 8 January 2008 – Attachment 4).

An article dated 1 January 2008 in the *Medical Teacher* reports that secondary medical vocational schools in China are responsible for training students in medicine for three years after they have completed Grade 9 at school:

Today, there are around 180 medical universities. There are also about 500 secondary medical vocational schools distributed in China (Ministry of Health 2007). The “secondary medical vocational schools” in China normally have responsibility to train the students majoring in nursing or medicine, after completing grade 9 in school, namely middle school education. The common education period for such schools is 3 years. Great variation exists between these various institutions as to size of student body, curriculum, length of training and roles of the graduate (Ren, Xiaofend, Yin, Jiechao, Wang, Binje & Schwarz, M. Roy 2008, 'A descriptive analysis of medical education in China', *Medical Teacher*, Vol. 30, No. 7, 1 January, p.667 – Attachment 5).

The Shanghai Second Medical University has an affiliated Secondary Medical School:

The Affiliated Secondary Medical School was founded in 1989. It has a total of 1,630 students and offers the specialties of nursing, medical Laboratory Sciences, Basic Medicine,

Stomatology, and other specialties with three-and four-year programs. The school has already trained over 1000 intermediate medical personnel. The campus has an area of 70 Mu and a building providing an area of 50,000 square meters. It has a staff of 309 including 33 senior professors. The students train in various general hospitals throughout Shanghai. The school has been cited as an advanced institution for vocational and technical education by the Shanghai Municipal Government on several occasions ('Specialities' 2003, Shanghai Second Medical University website <http://www.shsmu.edu.cn/english/education/education2.jsp> – Accessed 8 January 2009 – Attachment 6).

## Registration

*The Law on Licensed Doctors of the People's Republic of China 1998* is included as Attachment 7. The relevant extracts follow:

Article 8 The State applies the system of examination to determine the qualifications of doctors. The system consists of examinations to determine the qualifications of licensed doctors and examinations to determine the qualifications of licensed assistant doctors.

...Article 9 Whoever meets one of the following requirements may take the examinations for the qualifications of a licensed doctor:

(1) having, at least, graduated from the faculty of medicine of a university and, under the guidance of a licensed doctor, worked on probation for at least one year in a medical treatment, disease-prevention or healthcare institution; or

(2) after obtaining the license for an assistant doctor, having reached the level of a graduate from the faculty of medicine of a university and worked for at least two years in a medical treatment, disease-prevention or healthcare institution; or having reached the level of a graduate from the specialty of medicine of a polytechnic school and worked for at least five years in a medical treatment, disease-prevention or healthcare institution.

Article 10 Anyone who has reached the level of a graduate from the faculty of medicine of a university or a polytechnic school and, under the guidance of a licensed doctor, worked on probation for at least one year in a medical treatment, disease-prevention or healthcare institution, may take the examinations for the qualifications of an assistant doctor.

Article 11 Anyone who in the way of apprenticeship, has studied traditional Chinese medicine for three years or, through years of practice in this field, proves to have mastered specialized knowledge of this field, has passed the examinations conducted by an organization specialized in traditional Chinese medicine or by a medical treatment, disease-prevention or healthcare institutions that is recognized as such by the administrative department for public health of a local government at or above the county level, and is recommended by such an organization or institution, may take the examinations for the qualifications of a licensed doctor or a licensed assistant doctor. The contents of and measures for such examinations shall be specified by the administrative department for public health under the State Council separately.

Article 12 Anyone who has passed the examinations for the qualifications of a licensed doctor or a licensed assistant doctor shall be certified as such (*Law on Licensed Doctors of the People's Republic of China* (Adopted 26 June 1998 & Promulgated 26 June 1998), AsianLII website <http://www.asianlii.org/cn/legis/cen/laws/loldotproc467/> – Accessed 9 January 2009 – Attachment 7).

A 2002 article in *The Yale-China Health Journal* reports that “secondary school-prepared medical workers are eligible to sit for the assistant doctor registration examination after they have completed one year of clinical experience.” The article continues:

The ordinance for doctors’ registration was enacted in 1999. While the certification examination for nurses has only one level, standard assessments were instituted for promotion from the role of medical worker to registered assistant doctor, and then to registered doctor. Unlike the field of nursing, every person must sit for the national examination in order to obtain a medical practice certificate either in clinical medicine, traditional Chinese medicine or preventive medicine. Both college diploma prepared and secondary school-prepared medical workers are eligible to sit for the assistant doctor registration examination after they have completed one year of clinical experience (Mei-che Pang, Samantha, Kwok-shing Wong, Thomas & Shukching Ho, Jacqueline 2002, ‘Changing Economics and Health Worker Training in Modern China’, *The Yale-China Health Journal*, Vol. 1, Autumn, p.75 <http://www.yalechina.org/articles/pdf/2002%20Health%20Journal.pdf> – Accessed 8 January 2009 – Attachment 2).

According to a 2004 article in *Health Affairs*, “In China the license to practice does not distinguish between graduates of Western medical schools, traditional Chinese medicine practitioners, or village “doctors” with minimal training. There is also, as yet, no differentiation between general practitioners and specialists” (Lim, Meng-Kin, Yang, Hui, Zhang, Tuohong, Feng, Wen & Zhou, Zijun 2004, ‘Public Perceptions Of Private Health Care In Socialist China’, *Health Affairs*, Vol. 23, No. 6, November/December, pp.224 <http://content.healthaffairs.org/cgi/reprint/23/6/222.pdf> – Accessed 9 January 2009 – Attachment 8).

## **2. Please advise what responsibility a doctor with 3 years training would have in a local clinic?**

Article 30 of *The Law on Licensed Doctors of the People’s Republic of China 1998* defines the role of licensed assistant doctors:

Licensed assistant doctors shall, under the direction of licensed doctors, do the types of job, as registered in a medical treatment, disease-prevention or healthcare institutions.

Licensed assistant doctors who work in the medical treatment, disease-prevention or healthcare institutions of townships, nationality townships or towns may, in light of the specific medical conditions and needs, independently conduct ordinary practice of medicine (*Law on Licensed Doctors of the People’s Republic of China* (Adopted 26 June 1998 & Promulgated 26 June 1998), AsianLII website <http://www.asianlii.org/cn/legis/cen/laws/loldotproc467/> – Accessed 9 January 2009 – Attachment 7).

According to a 1990 article by Ao-rong Zhu Professor of Medicine at the Anhui University of Medical Services, graduates from secondary medical schools “work at the county or town level as *feldshers* [barefoot doctors], nurses, midwives, laboratory technicians, and assistant pharmacists.” The article continues:

The rural three-tier medical service network enables a medical contingent to take shape in the rural areas comprising the senior, intermediate, and primary medical workers.

...The intermediate medical workers are graduates from the secondary medical schools. They work at the county or town level as *feldshers* [barefoot doctors], nurses, midwives, laboratory technicians, and assistant pharmacists. The *feldshers* and midwives are assigned to work mainly in the towns. A number of counties have established their own secondary medical schools to train professionals working in towns and villages (Zhu, Ao-rong 1990, 'China: the goal is attainable', *Achieving health for all by the year 2000: midway reports of country experiences*, World Health Organisation, pp.54-63  
[http://whqlibdoc.who.int/publications/1991/9241561327\\_china.pdf](http://whqlibdoc.who.int/publications/1991/9241561327_china.pdf) – Accessed 8 January 2009 – Attachment 9).

According to a 2002 article in *The Yale-China Health Journal*, graduates of the three year secondary school program become “practical community medical workers in rural areas” (Mei-che Pang, Samantha, Kwok-shing Wong, Thomas & Shukching Ho, Jacqueline 2002, 'Changing Economics and Health Worker Training in Modern China', *The Yale-China Health Journal*, Vol. 1, Autumn, p.66  
<http://www.yalechina.org/articles/pdf/2002%20Health%20Journal.pdf> – Accessed 8 January 2009 – Attachment 2).

According to the book *Healthcare in Rural China: Lessons from HeBei Province* published in 2005, “graduates of secondary medical schools are capable of providing primary curative care and carrying out public health programs with the support of qualified doctors of the township health centers, or county or city hospitals, for specialized and more complicated treatment.” The book notes, however, that the “shortage of health personnel has led to a lack of differentiation between the functions performed by graduates of the different programs” (Anson, Ofra & Shifang, Sun 2005, *Healthcare in Rural China: Lessons from HeBei Province*, Ashgate Publishing, United Kingdom, p.51, Google Books website  
[http://books.google.com/books?hl=en&id=vK3sC6O-zukC&dq=health+care+in+rural+china+ofra&printsec=frontcover&source=web&ots=YI-XaDIF-A&sig=wcGcKDzaECeHGULNlyV9heBXugg&sa=X&oi=book\\_result&resnum=7&ct=result](http://books.google.com/books?hl=en&id=vK3sC6O-zukC&dq=health+care+in+rural+china+ofra&printsec=frontcover&source=web&ots=YI-XaDIF-A&sig=wcGcKDzaECeHGULNlyV9heBXugg&sa=X&oi=book_result&resnum=7&ct=result) – Accessed 8 January 2008 – Attachment 4).

## List of Sources Consulted

### Internet Sources:

#### **Government Information & Reports**

The Central People's Government of the People's Republic of China <http://english.gov.cn/>

Immigration and Refugee Board of Canada [http://www.irb-cisr.gc.ca/en/research/rir/index\\_e.htm?action=search](http://www.irb-cisr.gc.ca/en/research/rir/index_e.htm?action=search)

UK Home Office <http://www.homeoffice.gov.uk/>

US Department of State <http://www.state.gov/>

#### **United Nations (UN)**

World Health Organisation <http://www.who.int/>

#### **University Sites**

Shanghai Second Medical University <http://www.shsmu.edu.cn/>

Sydney University <http://www.usyd.edu.au/>

Yale-China Association <http://www.yalechina.org/>

#### **Topic Specific Sites**

AsianLii <http://www.asianlii.org/>

Health Affairs <http://content.healthaffairs.org/>

*Journal of the American Medical Association* <http://jama.ama-assn.org/>

*Yonsei Medical Journal* <http://www.eymj.org/>

### Search Engines

Google <http://www.google.com.au/>

Google Books <http://books.google.com/>

### Databases:

FACTIVA (news database)

BACIS (DIAC Country Information database)

REFINFO (IRBDC (Canada) Country Information database)

ISYS (RRT Research & Information database, including Amnesty International, Human Rights Watch, US Department of State Reports)

RRT Library Catalogue

### List of Attachments

1. Ongley, Patrick A. 1985, 'A Review of Medical Education: Problems in Some Asian Countries', *Yonsei Journal*, Vol. 26, No. 2, pp.96-102  
<http://www.eymj.org/1985/pdf/96.pdf> – Accessed 8 January 2009.
2. Mei-che Pang, Samantha, Kwok-shing Wong, Thomas & Shukching Ho, Jacqueline 2002, 'Changing Economics and Health Worker Training in Modern China', *The Yale-China Health Journal*, Vol. 1, Autumn, pp.61-84  
<http://www.yalechina.org/articles/pdf/2002%20Health%20Journal.pdf> – Accessed 8 January 2009.
3. Reynolds, Dr Teri A. & Tierney Jr, DR Lawrence M. 2004, 'Medical Education in Modern China', *Journal of the American Medical Association*, Vol. 291, No. 17, 5 May, p.2141 <http://jama.ama-assn.org/cgi/content/full/291/17/2141> – Accessed 8 January 2009.
4. Anson, Ofra & Shifang, Sun 2005, *Healthcare in Rural China: Lessons from HeBei Province*, Ashgate Publishing, United Kingdom, pp.50-52 & 86, Google Books website  
[http://books.google.com/books?hl=en&id=vK3sC6O-zukC&dq=health+care+in+rural+china+ofra&printsec=frontcover&source=web&ots=YI-XaD1F-A&sig=wcGcKDzaECeHGULNLYV9heBXugg&sa=X&oi=book\\_result&resnum=7&ct=result](http://books.google.com/books?hl=en&id=vK3sC6O-zukC&dq=health+care+in+rural+china+ofra&printsec=frontcover&source=web&ots=YI-XaD1F-A&sig=wcGcKDzaECeHGULNLYV9heBXugg&sa=X&oi=book_result&resnum=7&ct=result) – Accessed 8 January 2008.
5. Ren, Xiaofend, Yin, Jiechao, Wang, Binje & Schwarz, M. Roy 2008, 'A descriptive analysis of medical education in China', *Medical Teacher*, Vol. 30, No. 7, pp.667-672. (MRT-RRT Library)
6. 'Specialities' 2003, Shanghai Second Medical University website  
<http://www.shsmu.edu.cn/english/education/education2.jsp> – Accessed 8 January 2009.
7. *Law on Licensed Doctors of the People's Republic of China* (Adopted 26 June 1998 & Promulgated 26 June 1998), AsianLII website  
<http://www.asianlii.org/cn/legis/cen/laws/loldotproc467/> – Accessed 9 January 2009.

8. Lim, Meng-Kin, Yang, Hui, Zhang, Tuohong, Feng, Wen & Zhou, Zijun 2004, 'Public Perceptions Of Private Health Care In Socialist China', *Health Affairs*, Vol. 23, No. 6, November/December, pp.222-234 <http://content.healthaffairs.org/cgi/reprint/23/6/222.pdf> – Accessed 9 January 2009.
9. Zhu, Ao-rong 1990, 'China: the goal is attainable', *Achieving health for all by the year 2000: midway reports of country experiences*, World Health Organisation, pp.54-63 [http://whqlibdoc.who.int/publications/1991/9241561327\\_china.pdf](http://whqlibdoc.who.int/publications/1991/9241561327_china.pdf) – Accessed 8 January 2009.