PERSONAL DATA

Age: 47 Sex: Male

Education: Medical College

Total Years Relevant Experience: 18

Last Year of Relevant Experience: 1978 Year Left China: 1978

Initial Immigration Status: Legal

Native Place/Overseas Connections: Vietnam OS, returned 1950s

Class Background/Political Designation: OS

OCCUPATIONAL HISTORY SUMMARY

Positions Held: 1) Doctor, County hospital attached to local factories, near Hangzhou (wife a factory clinic doctor during same period), 1961-78

Administrative Level of Work Unit/(No. of employees);

1) County

Occupational History (6/30/80, 2 hrs.)

The informant is an overseas Chinese, a native of Húe, Vietnam, who returned to China during the 1950s to study. He was a doctor, and worked in a county-run hospital near Hangzhou in Zhejiang. He worked there from 1961-78. Part of his responsibility was to see workers from nearby factories, and sign sick leave certificates. His wife was also a doctor and she worked in a factory clinic during the same period in the same area. Her plant had about 3000 workers. The interview draws both on the informant's own experience and in places on that of his wife.

Doctors and Sick Leave

If a worker feels sick and wants to see a doctor, he can do one of several things. First, he can to to the factory clinic before the shift starts. Second, he can ask to go in the middle of the shift, in which case he asks permission from the group leader. Third, he can go after the shift—normally 3-4pm is the busiest time in factory clinics. Some just stay at home and rest, and whenever they get up they go see the doctor to get the certificate. There is no set system for asking for leave. Chinese factories are pretty lax (suibian) about these kinds of things. There is no time clock to punch.

If a worker wants to see a doctor after 4pm when the factory clinic is closed, he has to see a person on duty who will give a certificate to him allowing him to be seen at a hospital. This is the case for acute diseases. For normal chronic problems, they will tell the person to come back to the clinic the next day. For serious problems the clinic doctor can issue a certificate allowing the worker to go to the hospital. So if a worker wants to go to the hospital he has to have forms filled out first at the factory clinic.

Generally speaking, the clinic doctors have power to sign sick leave forms for one week or less. The hospital doctors have the power to sign forms completely according to the illness. There is no limit on them. But all the forms signed by the hospital doctor need to be countersigned by the doctor in the factory clinic. If the leave authorized is for 3 days or less, the shop director does not need to sign. For 3 days to one week, the shop director has to sign. In the hospital, a regular doctor could sign for one day, a department head for 3 days, and the hospital director for over a week.

Workers got full pay for sick leave up to 6 months in a row, while the 7th month they got only 40% of their wage. But they had ways to get around this by asking for 5 months leave, then working half time (also with doctor's certificate) for a month, then ask for long-term sick leave again. This happened a lot.

Trends in sick leave requests: There were fewer workers asking for sick leave during the period before 1966, and after 1977. During the intervening 10 years workers asked for sick leave more often, often feigning illness or arguing with doctors over the number of days sick leave they were given. If they argued, doctors usually just signed the form for them because the workers could acuse them of being a stinking intellectual who doesn't serve the workers, peasants, and army. When there are arguments of this sort, the leading cadre would never support the doctors but the workers. So when the workers argued, the doctors just gave in and signed. During these 10 years workers would generally ask for more leave than initially given. But before and after this period they hesitated

to take more than 2 days, even if offered, because after 3 days sick leave in a month they would no longer be eligible for a bonus.

People would also use personal relations with doctors to ask for more leave, and sometimes would use connections. For example, sometimes the plant director would ask for a month's sick leave for his wife, and you didn't dare not agree to it. If your disability is due to industrial injury, they often do not deduct wages after 6 months. Also, the informal practice is to allow children or wives to take the place of the injured worker if permanently disable or killed. But this is all informally arranged, there are no set regulations.

People would use personal guanxi to get a few days of sick leave without really being ill. Good friends of doctors can obtain sick leave certificates for their other friends without these third parties ever having to come in and see the doctor. But you have to have pretty good relations with a doctor to manage this. Sometimes these transactions are accompanied by gifts to doctors, but these are not directly connected with any particular favor or request as such. What these gifts are depends on the person's own resources. If you have a relative in the country, you can give the doctor eggs or vegetables. If you are a skilled worker, you offer to do work--painting, repairing, carpentry--in his home. But these favors are usually only accepted from people who know a doctor fairly well. So every worker as a result wants to befriend a doctor. Everyone is nice to the doctor. This was a common practice, but was especially prevalent in the period after the cultural revolution, partly because people wanted to avoid a political campaign in which they were not interested.

In the same way, there were many leading cadres who pretended illness during the cultural revolution, because they wanted to escape criticism by mass factions. Also, if workers wanted to get out of work for exchange of experiences, or armed struggle in the cultural revolution, they sometimes asked for sick leave for this.

In the period after the cultural revolution right up to 1977, faking illness was a serious problem. Doctors signed even when they suspected fakers because often it is hard to tell, and they didn't want to argue with them. The leaders also knew this was a serious problem, but they had no way to solve it, and also they didn't want to offend the workers, because they knew another political movement might come and they could be attacked and beaten by workers as during the cultural revolution. So they were a little scared to crack down.

After 1977, the problem did improve because if you had over 3 days of sick leave in a month, no bonus. Workers even asked for fewer days. But if they had already surpassed the 3 days in a given month, for the rest of the month they would abuse sick leave, feign illness. If they were lucky, they would have genuine illnesses early in the month, then be able to take advantage for almost the entire month thereafter. When the next month began, they would stop.

But conditions are not the same in all plants. Different enterprises have different bonus systems, and they are continually evolving. So those plants that have quarterly and year-end bonuses that take over-all attendance into account are able to prevent workers from abusing sick leave during these 'lost' months. Generally speaking, the problem of attendance has improved a lot over the period from 1966 to 1976.

Production Campaigns and Industrial Accidents

After 1970, they ran several production campaigns, because during this period they started to grasp production. During these campaigns the number of industrial accidents increased. Also, there were generally more industrial accidents in collective enterprises, like the collective iron smelting plant in their county, because they were responsible for their own profits and losses and they single-mindedly pushed for more production. Generally the labor protection equipment is not as good as in state-run enterprises. Workers from these collective enterprises rarely come to the hospital to ask for sick leave, because if they don't work, they don't get paid.