How the great powers shaped the world after WWII

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Meeting: The Impact of Decolonization and the End of the Cold War on Health Development in Africa,
WHO's initiative on Global Health Histories, Nairobi, February 6-8, 2007
International and Global health

Evolutionary schemas:

• ‘international traffic rules’ [1946]

• ‘International Health’ [1970s]

• to ‘Global Health’ [1990s]
  (Kickbusch 2000)
Defining the space of international health

- The relationship to the nation state

- Content of international health policy:
  - Legitimate areas of action (disease control v. health services reform)
  - Knowledge broking and translation into policy
The United Nations Relief and Rehabilitation Administration

• The European state and the limits of PWR

• PWR in Southern Europe: malaria eradication and the Cold War

• UNICEF, WHO and mass BCG campaigns.
“US Govt and public would think and say that if we cannot provide relief for our colonies we have not the slightest moral claim to retain them. Indeed I would not put it past the US Govt to make the giving up of the colonies a condition of their financial assistance to us, if once we supported this idea by asking an international body to relieve them”
S. Waley (FO) to J.M. Keynes, 1945.

It is “absurd that we can go on pretending to be rich when we are really poor”
P.J.N. Stent (FO) 1945.
The ILO Challenge

• “Any expansion of production, or even any new social service, which is dictated from above and does not attempt to obtain indigenous support, will prolong the frustrations that may be felt by indigenous peoples”.

ILO Convention on Social Policy in non-Metropolitan Territories, 1947
The ILO, FAO and ‘Non-Metropolitan Territories’

• The ILO and the social mandate: stabilization and the application of metropolitan norms
  – ‘protection of dependent peoples’
• Health, nutrition and welfare in a new international order - FAO.
The Regional Question

• A sanitary Monroe Doctrine:
  – Pan American Sanitary Bureau and WHO

• Colonial powers and the threat of regionalism.
  – “it is impossible to expect the countries well developed technically to be overruled by the vote of nations less developed from a Public Health and Medical point of view” Melville McKenzie 1943.
  – Combined Commission for Technical Cooperation in Africa South of the Sahara (CCTA) in January 1950 (Belgium, UK, France, Portugal, South Africa, Liberia)
The Cold War compromise

- Decolonization and the opening to international action.
- Donor control of funding
  - Block voting (Committee of Twelve)
  - Truman and UN Expanded Program of Technical Assistance (1950)
The Legacy of the First Decade of WHO

• Success as a technical agency
  – Expert committees

• Weakness as a field agency
  – Budgets and political control: extra-budgetary funding.
  – Military campaigns v. building state capacity.