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## American Association for the History of Medicine (AAHM) Conference, May 2018

The Centre had an impressive showing at the latest annual American Association for the History of Medicine (AAHM) conference in Los Angeles.

The Health Systems in History project had two panels accepted. In the first, Martin Gorsky and Hayley Brown from the Centre and Linda Bryder from the University of Auckland presented on the parallel development of the UK and New Zealand health systems.

The second panel featured John Manton and Christopher Sirrs from the Centre, and Janelle Winters from the University of Edinburgh. Focusing on the politics of international health development, the papers discussed the World Health Organisation's health planning activities in Malaysia, the World Bank's onchocerciasis control programme, and the ILO's activities in health care financing.

The Placing the Public team was also well represented. Peder Clark presented the latest results from his research on the Whitehall Studies, while Hannah Elizabeth presented a poster on the educational and emotional needs of HIV-affected children and adolescents in 1990s Britain.

The LSHTM contingent — much larger than other UK institutions at the conference — demonstrated the considerable breadth and vibrancy of the Centre's current research programme.



## Publics and their Health: Historical Perspectives, Future Directions

28–29 June 2018

*Institute of Historical Research,  
London*

Who or what is the public within public health? How have publics and their health changed over time and place? What makes 'public health', public? Surprisingly little attention has been devoted to these crucial questions. At this conference, we aim to explore the changing nature of public health, and the public which it serves, at different times and in various locations. The programme includes a keynote lecture from Dr Tom Crook (Oxford Brookes University) and a roundtable session where we will reflect on the papers and discuss ways forward.

The conference is free to attend but places are limited. [Registration](#) closes on the 12 June.

For further information and the conference programme, please visit <http://placingthepublic.lshtm.ac.uk/conference-2018-publics-and-their-health/>.

## Auckland Witness Seminar on Health Policy Making in an Era of Reform: the NZ Health System in the 1980s and 1990s

Dr Hayley Brown, Research Fellow, reports on the Health Systems in History project's latest witness seminar

**O**n Wednesday 28 February as part of the New Zealand – United Kingdom health systems project, we held a witness seminar at the University of Auckland, New Zealand, on health policy making in New Zealand in the 1980s and the early 1990s. The seminar was well-attended and we had fifteen witnesses including former Ministers of Health, Hon. Dr Michael Bassett and Hon. David Caygill as well as former opposition spokesperson for health, Rt. Hon. Sir Don McKinnon. In addition five doctors acted as witnesses including Dr Ian Scott, a retired GP and former member of the Auckland District Health Board and Prof Colin Mantell who is a retired obstetrician and gynaecologist and a former Professor of Māori and Pacific health at the University of Auckland. Other witnesses included Graham Scott, former secretary to the Treasury; Claudia Scott, the chair of the Health Benefits Review, a major report into health provision in New Zealand in the 1980s;

David Moore, the founding general manager of PHARMAC (the body which decided which medicines are subsidised for use in NZ) and David King who has worked both in the UK as District General Manager of the Exeter Health Authority and in NZ as General Manager of the Auckland Area Health Board.

The reason why we chose to focus on the 1980s and early 1990s in our seminar is that this period was both an era of economic reform and a pivotal moment in the history of New Zealand's health system. There was a growing sense of the need for change, rethinking and policy innovation. As well as the gradual establishment of area health

boards from 1983, focal points of debate were the 1986 Health Benefits Review and the 1988 Gibbs Report ('Unshackling the Hospitals'). Out of this ferment came the more radical health reforms of the early 1990s as well as the establishment of PHARMAC. The 1980s was also a time when Māori were continuing to exert their right to sovereignty and there was growing acknowledgement by politicians that this needed to be reflected in policy. We were able to discuss all these issues during our seminar which was ably chaired by our colleague Prof Linda Bryder of the University of Auckland. The event was concluded with a

drinks reception where we were able to continue many of the discussions begun during the seminar.

As well as discussing many of the major points of reform or potential reform, one of the advantages in holding a witness seminar is the stories that participants share that have not been recorded anywhere else. One of the amusing anecdotes to come

out of the seminar involved a Minister of Health requesting to visit a small hospital in the 1980s. Unfortunately at the time he was to visit there were no patients in the hospital so the staff had to arrange for a mother who had given birth there a few weeks earlier to return with her baby. The mother was given a nice afternoon tea and the Minister did not realise that her baby was rather large for a new-born!

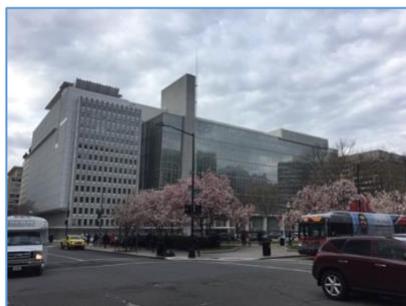
We have had the seminar transcribed and are currently in the process of editing the transcription and plan to have the final version available on the Centre's website in July.



## Archival research in international organisations



Dr Christopher Sirrs, Research Assistant, reports on his travels to some fascinating (and frequently frustrating) international archives



*Headquarters of the World Bank in Washington, DC.*

**A**s a member of the Health Systems in History project, I have been fortunate to travel abroad and study in the archives of several major international organisations. Since late 2015 I have accompanied Martin Gorsky to the archives of the World Health Organisation (WHO), International Labour Organisation (ILO) and League of Nations in Geneva; I have also conducted visits on my own to the archives of the Organisation for Economic Co-operation and Development (OECD) in Paris and the World Bank in Washington DC. These visits have given me a close insight into how the archives of international organisations operate and how they compare to the archives most often used by historians, such as national archives and the archives of voluntary and professional organisations. The archives of international organisations pose particular challenges for historical research; in this article, I explore some of these issues, in the hope that this information is useful for colleagues who might conduct research there in future.

### Accessibility

The conditions of access to the archives of UN agencies such as the WHO are, in general, no more onerous than the conditions of major national archives. All that is required is usually an email to the archivists a few weeks in advance of your visit, alongside a

list of material that you would like to view. The archives of other international organisations, however, are much more ‘locked down’ and are in this respect more akin to some corporate archives, where specific permission may need to be granted. This can be very time-consuming: My trip to the World Bank in the USA took several months to organise, in large part because most of the material I wanted to view (which I had identified beforehand) had not yet been declassified for public viewing — even many older documents, thirty or forty years old. Thus, in order to gain entry, not only do you need to be fairly clear about what documents you would like to view, but you will need to embark on a lengthy disclosure process that, depending on the quantity of material ordered, can take a very long time to complete.

### Discoverability

Access to the archives of international organisations is further complicated by the paucity of systems for discovering material. None of the archives visited by the project team have *comprehensive* electronic catalogues and those that are available are not particularly friendly to use. In some instances, electronic catalogues are only available on-site (ostensibly for security), in other instances, they only cover the most recent material, with older documents

discoverable via card catalogues. Finding aids are often available for popular research subjects and major organisational groupings and structures; however, usually, there is no single place where all relevant material is listed. Disconcertingly, for the OECD no publicly accessible catalogue was available in advance of my visit at all, meaning that I was entirely reliant on the advice of the archivists to retrieve relevant material. On-site, the archivists were based in a separate building to the reading room, a block or two away, meaning that they were not always on-hand to dispense advice.

Fortunately, for most of the organisations Martin and I have visited, huge digital repositories of information are available online which complement material retrieved through archive research. Databases such as WHO's IRIS, World Bank Documents, and ILO's Labordoc provide access to digital copies of major reports and memoranda. Most archival material, however, especially the correspondence of lower-ranking officials, and smaller organisational units, remains accessible only via a visit to a physical archive.

### **Transparency**

The difficulties of accessing and discovering material raise significant questions about the transparency of international organisations and the role of archivists as gatekeepers to information. Where catalogues are poor or incomplete, researchers are almost completely dependent on archivists to retrieve material and there is little guarantee that all relevant documents have been (or will be) disclosed. How are we to know that archivists are not denying us access to documents that could be controversial, or damaging?

Good professional relations with archivists are always important for historians, but with international organisations they are essential. Thankfully, in our visits to international archives we have been aided by some very knowledgeable, friendly and committed

archivists who have done their utmost to make us welcome, in some instances offering to digitise material especially for our use. There has been no shortage of interesting material; in fact, the opposite problem is the case — we have found enough material to sustain research for many years beyond the end of the current project!

### **Completeness**

Gaps in the historical record are a problem in many (or even most) archives, but for international organisations this problem can be especially severe. Changing retention policies over time, and an inclination to destroy rather than preserve documents in the past, mean that there can be chronological discrepancies in the records of even major departments and units. For highly decentralised organisations such as the WHO, with a plethora of regional and country offices, this problem is particularly acute because documents are not kept in one secure central location but dispersed. The OECD appears to have relied on microfiche to preserve copies of most of its important documents, suggestive of a former policy of destruction (most probably to save space at its Paris headquarters).

Of course, none of the above problems are unique to the archives of international organisations. Freedom of information requests, for example, can significantly delay research in major public archives, and most of us will be familiar with the clunky nature of electronic catalogues. I describe these issues here not as a warning to researchers but as an encouragement: As I explained, there is no shortage of fascinating documents to be found, and the archives of organisations such as the World Bank are a potential treasure trove. As more and more historians look beyond national experiences to foreground the role of transnational expert communities and international relations in history, the archives of international organisations will only become more important as sources of historical documents.

## Introducing new research: measuring mental capacity



Dr Janet Weston, Research Fellow,  
introduces her new three-year Wellcome  
Trust fellowship

Internationally and nationally, mental capacity is on the agenda. Formal assessments of mental capacity determine whether adults should make decisions regarding their own personal and financial lives, and this is increasingly controversial and complex. States find themselves having to consider in more explicit terms the rights and vulnerabilities of adults whose capacity to look after themselves may be limited. Numbers of those potentially affected are on the rise, as mental capacity assessments are usually prompted by impairments such as mental illness, learning disabilities, and dementia, all of which are affected by improvements in diagnosis and life expectancy.

Although recent flurries of consultations and legislation in Britain and Ireland surrounding mental capacity suggest a new phenomenon, the courts have been involved in assessing mental capacity for centuries. My new research project will use court proceedings alongside medical, legal, and advocacy material to consider how mental capacity has been measured, defined, and understood over the twentieth century. It will also compare the approaches of different jurisdictions in light of their particular legal, medical, and social contexts, with a focus on England & Wales and the Republic of Ireland.

I hope to think about how ideas and attitudes regarding disability, gender, old age, vulnerability, and rights have informed decisions and debates around mental capacity, as well as changes within medical knowledge and treatment. I will be paying particular attention to disputed wills, where

the mental capacity of the will-maker is questioned, and the decisions of the Court of Protection (and its predecessors and equivalents) to take control of an individual's finances. These proceedings cover a wide variety of circumstances and often include very detailed information about the lives, activities, and beliefs of those involved.

Although this project is still in its early stages, remarkable cases are already coming to light. One is the case of Miss Alexander, a housekeeper from Dorset, who inherited a modest fortune from her employer in the mid-1930s. Neighbours raised concerns that a disreputable local family had moved in with Miss Alexander and taken control of her newly acquired wealth, and the Court of Protection was appointed to manage her money. Miss Alexander's diagnosis was simply that she was 'without character and without courage', and therefore succumbed too easily to bad influences. In another case, it was elderly Mr Park's marriage to a much younger woman that raised alarm bells, and his physical frailty, advanced years, and readiness to marry were all given as evidence of mental weakness.

I'm looking forward to finding out more about Miss Alexander, Mr Park, and the decisions that were made about them and many others during the 1900s. Over the next three years, I'll be visiting archives in London and Dublin, and perhaps also Belfast, Edinburgh, and Glasgow, and I also hope to engage with practitioners and legal scholars involved in matters of mental capacity today.

## MRC Unit The Gambia at LSHTM



**Dr John Manton, Assistant Professor, writes about his recent visit to The Gambia**

In April 2018, I travelled to the newly renamed MRC Unit The Gambia at LSHTM, to assist in the development of their History Project, and investigate avenues for collaboration with colleagues across scientific and administrative departments at the Unit. There is an active History Committee, seeking to safeguard the archives, excavate oral histories, and produce a range of historical resources for interested investigators and curious visitors. The Committee asked me to visit to contribute to and comment on the work they hoped to undertake, as well as to find ways of liaising with groups and Centres across LSHTM. Members of the Committee provided a warm welcome and generous hospitality throughout my stay, and I was able to visit and meet with senior scientists, archivists, and longstanding field staff members at MRC sites at Fajara (Headquarters), Keneba, and Farafenni, as well as with a senior officer of the National Archives of The Gambia, and retired MRC workers at the Farafenni site of the University of The Gambia (formerly the MRC site). I uncovered tantalising materials on the long history of LSHTM engagement with MRC work in The Gambia, and advised the working team on the work of sensitising key staff to the value of documentation and archival preservation of materials of historical significance. There is much work to do to ensure the integrity of historical materials, but we believe that any investment in this will reap great scholarly rewards. I invited members of the Historical Committee, and other interested parties, to join the LSHTM Centre for History in Public Health, and I hope to develop working relationships and research projects with MRC Unit The Gambia in the coming months and years. I left with warm thanks to all the colleagues at MRC, and the Committee has since submitted the History Project for internal review, which we hope will strengthen the basis for future collaborations.



## New arrival

### Dr Erica Nelson introduces herself and her new role on the Health Systems in History project



On the 16<sup>th</sup> of April, I became the newest member of Professor Martin Gorsky's Wellcome Trust-funded project, 'Health Systems in History: Ideas, Comparisons, Policies c.1980-2000'. As a research fellow, I will be carrying out a project on health systems developments, debates and implementation experiences in Colombia, c.1961-1991. I have been working in the field of global health, as an anthropologist/historian and applied/academic hybrid, since completing my PhD in Latin American history in 2008 (University of Wisconsin-Madison). My dissertation concerned the politics and practice of population control, family planning and sexual and reproductive health programmes in Bolivia, c.1964-2004. Inspired by this work, I became involved directly in global sexual and reproductive health initiatives, both as a researcher and consultant. This led to a post-doctoral research fellowship in Medical Anthropology (University of Amsterdam, Institute for Social Science Research, 2010-2014), carrying out the qualitative component of an adolescent sexual and reproductive health intervention in Bolivia, Nicaragua, and Ecuador. After further consultancy work on gender and global health, and health systems strengthening, I joined the Institute of Development Studies in Brighton as part of the Accountability for Health Equity programme. One recent success has been the publication of an issue of the IDS Bulletin on 'Accountability for Health Equity: Galvanising a Movement for Universal Health Coverage' (see here: <http://bulletin.ids.ac.uk/idsbo/issue/view/233> )

I am delighted to have joined the "Health Systems in History" team and the broader community of the Centre for History in Public Health. It is a real gift to have the time and focus to do historical research after a decade of interdisciplinary working, so thank you Martin for making this possible.

## Latest publications

### Virginia Berridge

Virginia Berridge, *Addiction Lives: Thomas F. Babor*. *Addiction*, 113 (2018) 185–188.

### Alex Mold

[Alex Mold, 'Exhibiting good health: public health exhibitions in London, 1948-1971', \*Medical History\*, 62:1 \(2018\) pp. 1-26.](#)

### Martin Gorsky & Christopher Sirrs

[Martin Gorsky, and Christopher Sirrs, The Rise and Fall of "Universal Health Coverage" as a Goal of International Health Politics, 1925–1952, \*American Journal of Public Health\*, Published Online: January 18, 2018.](#)

### Anne Hardy

Anne Hardy, 'Collateral Benefits: Food Poisoning Agents and Their Therapeutic Applications', in Ole Grell, Andrew Cunningham and Jon Arrizabalaga eds, *It All Depends on the Dose: Poison and Medicine in European History*, London: Routledge, 2018

## Dates for your diary

### Annual lecture 2018: Professor Sally Sheard, University of Liverpool

We are pleased to announce that Professor Sally Sheard, Andrew Geddes and John Rankin Professor of Modern History at the University of Liverpool, will be delivering this year's annual lecture (title TBC). The lecture will be held on **Tuesday 6 November 2018** in the John Snow B lecture theatre, Keppel Street. For the latest details please visit the History Centre website at <http://history.lshtm.ac.uk/annual-public-health-lecture>.

## ABOUT THE CENTRE

*The Centre for History in Public Health was established in 2003, having originally developed from the AIDS Social History Programme in the late 1980s. Its location within a multi-disciplinary public health institution is unique, and keeps it firmly in the forefront of historical research into public health, and health services.*

*The CHiPH mission is to promote and undertake high quality research in order to contribute to the development of the historical discipline and to historical understanding in the field of public health policy.*

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