

Second World War. There is extensive research here but Harrison shows there is much to be done. This is a relatively short book for such a massive topic. It reads well, is challenging and much like a good, long essay is a call to historical arms. There are a few illustrations but surely fans of the BBC television series *Dad's Army* will recognize in the picture on p. 171 that the bank manager Captain Mainwaring (a.k.a. Mannering) did see active service, but under the nom-de-plume of "Two-gun Pete".

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John Farley, *To cast out disease: a history of the International Health Division of the Rockefeller Foundation (1913–1951)*, Oxford and New York, Oxford University Press, 2004, pp. x, 323, illus. £39.50 (hardback 0-19-516631-0).

Although it was one of the most influential public health agencies of the twentieth century and the best-endowed branch of the Rockefeller Foundation, the history of the International Health Division (IHD) has never been told so far. From his forays into the records of the Division, John Farley gives a fairly detailed account of the transnational disease campaigns that it conceptualized for the first time under the rubric of eradication. A "tribute" to the malariologist Lewis Hackett (p. 300), *To cast out disease* is at its best in the central chapters on hookworm, yellow fever and malaria. Farley makes no mystery of it; he believed from the start that the IHD was "more or less the American equivalent of the British Colonial Medical Service" (p. vii). This is understandable, coming as it does from the author of *Bilharzia: a history of imperial tropical medicine* (1991), but this perspective is somewhat misleading.

The picture given of the Division is one of an organization "uncomfortably" divided between the two ideas which were more or less personified by its first directors, Wickliffe Rose

(1913–23) and Frederick Russell (1923–35): the one focused on education and public health, the other on disease control and eradication *per se*. Tramping through swamps and killing mosquitoes, this alone merits the "admiration" of a historian (p. 298) who is indifferent to the problematic nature of the concept of eradication in the 1920s and 1930s when the paradigm of reductionist biomedicine (bacteriology) was undergoing reform. The "medical barons"—Frederick Russell, Lewis Hackett, Paul Russell and "the General Patton of entomology", Fred Soper—were the only true heroes. True, Farley remembers his own professional training in parasitology so clearly that he seems close to espousing a "culture-free model" in which all could be blamed on a few microparasites. It is, however, giving too much credence to his prejudices to suddenly conclude: "What the Health Division archives indicate to me is an organization with its sights fixed on narrow medical concerns" (p. 294). For Rose, the struggle against parasites was no more than a means to an end, namely the health education of populations and their representatives, and we are told that with Rose's failure, comes a farewell to states and governments, a subject on which it seems the author is much more at ease. However, it should be pointed out that the IHD did not spare its efforts later in encouraging state and local initiatives on the five continents to develop permanent public health agencies.

With attention focused on the tropics, continental Europe looks like a poor relation in this picture. With the exception of malarial Italy, the subject is rapidly dealt with: a chapter on tuberculosis in France, followed by a few pages on those European schools of hygiene which, apparently, "predated" the Health Division's endowments of London and Toronto. Those pages do not always demonstrate sound judgment. For instance, great emphasis is put on Prague and Rome, whereas Zagreb and Budapest were considered by the Division itself as "the better Institutes in Europe". And there is nothing on the vision conjured up by Rose and Selskar Gunn of the political stabilization of Central and Eastern Europe, and nothing either

on the Health Organisation of the League of Nations, whose name is not even mentioned. It is as though the Rajchmans, Stampars and Boudreaus had never shared in the history of the Division, which financed 30 to 40 per cent of their accomplishments. This blindness extends to the IHD itself, where numerous important people are overlooked, especially Gunn, who is practically ignored.

Indeed, where there are heroes, there must be villains. It is true that the Division had “no truck” with those who claimed to treat malaria with roast beef and the few who believed in social medicine. But was it really necessary to describe John Black Grant as “dour, humourless, rude and cynical”, or Rose as “incapable of judging men” (pp. 14 and 7)? Curiously, this aggressive tone is extended even to the authors of this review, taken to task for these same “dense and obscure”, “flowery” works on tuberculosis, which our censor nevertheless abundantly draws upon (p. 56). To Raymond Fosdick, Gunn wrote in 1926: “my own conviction is that sociology and public health are closely related”.¹ Believe us, the Rockefeller Foundation was highly sensitive to what was blowing in the wind at the time; it was volatile, changing, sometimes affected by the left-wing romanticism of the Milbank Memorial Fund (at the time of John Kingsbury of course), and sometimes more staid, here “flirting” with Stampar, there with the subversive reactionaries of Getúlio Vargas or Mussolini. It was like a sponge or an ink blotter. A kaleidoscope.

Even more than for his historiographic lacunae, the author can be criticized for drawing on one source only, the Rockefeller Foundation papers themselves. But does the history of the Division unfold in a scientific or diplomatic no man’s land, context-free? Is it not rather inseparable from the history of such dissimilar agencies as the American Public Health Association, the Metropolitan Life Insurance Company or the State Department? And intimately linked as well to a “cluster” of American philanthropies: the Milbank Memorial Fund, the Commonwealth Fund, and finally showing a close relationship with the history of

the other Rockefeller philanthropies? It is no small challenge to claim to give an independent history of it when there were field officers, and not the least among these, who said they “doubt[ed] if the Division, as such, has been of very great significance in establishing the public health policies of the Foundation. . . [and did] not believe that the public health work in the Foundation would suffer if the IHD should be disbanded”.²

In our opinion, the best of the book comes from the assumption that “many of the Division’s decisions appear ad hoc and haphazard” (p. 19). In flashes of lucidity, John Farley sees the IHD’s legacy as one which does not reside at all in the more or less successful diffusion of American methods, but in its incessant efforts in backing brains: “to find and canalise the explosive potentialities of any country and epoch”, in the words of Alan Gregg. It is all the more regrettable that such a work, which in addition will render an important service to researchers, is so full of typographical errors: L Farrard rather than Farrand, E Rust rather than Rist, Dunn for Gunn, Pedroso for Pedrosa, Srobar for Srober, and so on, while not forgetting L Murard, kindly rebaptised Murant or Murand. Inattentions of this kind extend to Mezzogiorno mis-spelled as Mezzaggiorno or poor Mussolini who becomes El Duce. . . . These are of course details, but which, added up, cannot but leave an impression of carelessness.

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¹ S M Gunn to R B Fosdick, 6 Oct. 1926, Rockefeller Archive Center, RG 3, series 900, box 17, f.122.

² Ibid.

Bernard Harris, *The origins of the British welfare state: state and social welfare in England and Wales, 1800–1945*, Basingstoke, Palgrave Macmillan, 2004, pp. xii, 402. £52.50 (hardback 0-333-64997-4), £17.99 (paperback 0-333-64998-2).

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