Marcos Cueto, Theodore M. Brown & Elizabeth Fee, *The World Health Organization: A History*, Global Health Histories, Cambridge: Cambridge University Press, 2019. Pp. xvi + 373. Paperback ISBN 9781108728843 doi:10.1017/9781108692878

The aspiration to write ‘global health histories’ reflects both the transnational turn in history that globalisation has ushered in, and the intensification of phenomena in public health that transcend both the national and the international. Infectious diseases, like capital flows, know no borders; multinational producers ply harmful commodities wherever markets allow; medical labour is footloose, likewise medical tourism; learning circulates on instantaneous networks, fuelled by Northern research done to the South; thickets of health metrics inform a global consciousness and its contested politics; international organisations - public, private and non-governmental – promulgate health policies more technocratic than democratic; and behind it all the planetary climate timebomb ticks. None of us can dodge the implications for our thinking.

No one has done more than the trio of authors here to map this transition from ‘international’ to ‘global’ health, and their long-awaited study of the WHO consolidates scholarly themes they have developed over several years. Several of their key arguments have been trailed in the ‘then and now’ sections of the *American Journal of Public Health*, which under Brown’s and Fee’s curatorship provided a vital platform for the social medicine tradition of historical writing. Cueto also brings to the task his prior work on the Pan American Health Organisation, and his pioneering studies of Latin American history of medicine. Together with Randall Packard’s recent *A History of Global Health*, and Nitsan Chorev’s more theoretically-driven WHO study *Between North and South*, this new book presents scholars and teachers with a standard account from which global health history can advance.

A key contribution of a survey text like this is to provide a narrative structure through which the WHO’s history can be read. The organisation of the first few chapters consolidates a framework already established in prior works. First the precursors are discussed, from the nineteenth century international sanitary conferences, to the Rockefeller Foundation’s health division and the League of Nations Health Organisation. Next the debates surrounding the WHO’s foundation are described, followed by the major eradication campaigns of the post-war decades. Some of the empirical content is familiar from the official histories, but Cueto, Brown and Fee are unconstrained by diplomatic considerations, and offer a more candid reading than available hitherto of the geopolitics surrounding the organisation. In particular, the onset of the Cold War and the marginalisation of social medicine in favour of vertical disease programmes is clearly laid out. Their chapter on the rise and fall of ‘Health For All’ in the 1970s and early 1980s follows Cueto’s earlier account, as the optimism surrounding the Alma Ata Declaration’s promise of universal coverage gave way to more attenuated forms of ‘selective’ primary health care. Also vying to become a standard reading is their take on the entry of the World Bank, whose advocacy of mixed funding methods for health services in low-income countries is held to have disadvantaged the poor in the era of structural adjustment.

Other sections of the book map the newer terrain of recent history. One chapter tracks the transformation of population control into a concern with reproductive and sexual health. The discussion of international responses to HIV/AIDS is pacey and gripping, as forceful individuals struggled over whether to pursue biomedical strategies that were politically neutral, or the human-rights based approach that seemed ever more necessary as the crisis deepened. Two themes dominate the later part of the book. One is the changing ‘burden of disease’ landscape challenging global policy-makers, in which emerging infectious diseases, from AIDS to ebola, threatened health security in the poorer world, just as the scourge of pathogenic lifestyles in the richer nations made its way to the developing economies. The other is the new global architecture of health policy-making, in which the WHO progressively ceded ground, first to the World Bank then to the plethora of public-private partnerships, bilateral initiatives and philanthropic donors who occupy today’s scene. Partly this reflected the preferences of the United States as global superpower to work through institutions that allow it to control resource flows. Partly it turned on the personalities of the Director-Generals, for the capacity to impose vision and leadership really mattered to WHO’s standing. In this account the most effective DGs were Marcolino Candau, Halfdan Mahler and Gro Harlem Brundtland, while Hiroshi Nakajima and Margaret Chan seem the least impressive.

One tension flagged at the start, but not completely resolved, is whether the WHO’s history is best viewed from its headquarters in Geneva or from its different regional offices. Indeed, the series editor, Sanjoy Bhattacharya, is a great advocate of the latter perspective, since his own work on smallpox eradication in South-East Asia revealed what could be gained from decentring the narrative. The authors do acknowledge the issue, and partially address it with passages such as the account of the establishment of the Africa Regional Office and the subsequent africanisation of its governance. However, they leave plenty more for future researchers to do on this score. Arguably too, this book, like Packard’s, is global health written from a US-centric position, and while this brings the benefits of sharp critical insight into the reach of American domestic politics, it also leaves gaps for others to fill. Ann Emanuelle Birn’s work on Soviet influences at the WHO points the way, as do studies by post-colonial scholars of British and French policies towards international health. Finally, it is sad to note the death of one of the authors, Elizabeth Fee, shortly before the book appeared. Amongst her many legacies to our discipline there now stands this benchmark account, on which others will be sure to build.