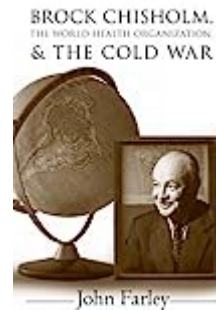


H-Net Reviews

in the Humanities & Social Sciences

John Farley. *Brock Chisholm, the World Health Organization, and the Cold War.* Vancouver: University of British Columbia Press, 2008. 254 pp. \$98.00 (cloth), ISBN 978-0-7748-1476-8.



Reviewed by Chris Dooley (York University)

Published on H-Canada (July, 2009)

Commissioned by Stephanie Bangarth (King's University College, UWO)

"A Story of a Man and an Institution"

In the preface to *Brock Chisholm, the World Health Organization, and the Cold War*, John Farley relates that his first knowledge of Brock Chisholm came not in Canada but in Switzerland. He recounts that on a visit to the headquarters of the World Health Organization (WHO) in Geneva, he was astonished to discover that the first head of that organization was a Canadian physician of whom he had no prior knowledge. That Chisholm, during his lifetime one of the twentieth century's most influential Canadians, has not been suitably memorialized in his own country justifies the deployment of Chisholm's biography as a device for framing this book-length treatment of the formative years of the WHO. Farley, who is clearly writing for a Canadian reader, works from the nationalistic premise that the presence of such a figure on the international stage, however obscure or flawed, ought to be a source of national pride, and that Canadians must learn of Chisholm so that he might take his proper place in the pantheon of Great Canadians. Moreover, the book, published to coincide with the sixtieth anniversary of the founding of the WHO, seems intended to remind

Canadians of the once-prominent role that their nation (or, at least, a conational) played in the United Nations and its organizations, a role that the author would like to see reconstituted.

The author's choice of title suggests a substantially biographical treatment, and while the book does trace the arc of Chisholm's career from before his tenure at the WHO into retirement, conventional biography is neither Farley's mode nor his purpose. Indeed, he acknowledges that this requirement has largely been met by Allan Irving's *Brock Chisholm: Doctor to the World* (1998), published a decade ago as part of the Associated Medical Services' Medical Lives series, a work on which he relies heavily. Instead, the book comprises what Farley calls in the book's opening sentence "a story of a man and an institution": a series of overlapping narratives that interweave the early political and institutional history of the WHO with the personal and intellectual biography of its first director general (p. 1). And while Farley does give due attention to such issues as the fraught relationship that the outspoken Chisholm had with his political mas-

ters and the ambivalent regard that Canadians had of the iconoclastic psychiatrist-turned-diplomat, these details are rendered less to illuminate Chisholm's character than to confirm the basic conflict between Chisholm's committed idealism and the narrow self-interest of nation-states as they negotiated the terms of one of the world's first great functionalist experiments.

As a historian of the WHO, Farley locates himself in a historiographic gap, arguing that the organization has not been especially well served by either of its two earlier official histories, which he dismisses as "basically descriptive" (p. 1). His critique of these histories is rooted not just in their celebratory tone or their tendency to gloss over conflict, but also in their inattention to the personalities that drove the organization. This is a book, therefore, that is filled with personalities, not just Chisholm, but others, such as Karl Evang, Andrija Stampar, Thomas Parran, and Milton Roemer, prominent and controversial figures in mid-century public health circles who emerge in this account as sometimes more important than the states or interests that they represented.

The book is organized into thirteen short chapters, which follow what Farley calls a "functionalist" approach that separates treatments of the work of the WHO—that is to say, specific initiatives and programs—from accounts of the bitter in-fighting and politicking that often hampered the organization's work on the ground (p. 6). He justifies this approach by arguing that negative politics seldom entered the medical arena, and that where they did, they generally mirrored the tensions and priorities of the Cold War. In this rendering, the Cold War becomes the almost personal antagonist of Chisholm, who, as an internationalist visionary, was consistently frustrated in his efforts to hold the WHO and its programs above interest politics. This severing of medicine from politics, however, leaves little room for ideology. By equating politics with national self-interest, this approach elides genuine debates about such questions as the proper relationship between nation-states and supranational organizations like the WHO, the nature of functionalism, and the appropriate balance between short- and long-term approaches to public healthcare.

The book opens with two long chapters; the first is concerned with the institutional prehistory of the WHO, and the second is a brief biography of Chisholm up to the point at which he was elected secretary of the Interim Committee that preceded the WHO. The former offers a straightforward narrative of the brokerage politics that propelled Chisholm—a vocal and charismatic but gener-

ally unknown figure with virtually no background in either public health or international diplomacy—to the head of the organization ahead of several more likely candidates. Here, Farley concedes that Chisholm was an improbable choice, elected as much as anything else as the least unacceptable candidate. The latter—under the title "Who Was Brock Chisholm?"—offers a sympathetic portrait of Chisholm as iconoclast and visionary, and traces the unlikely career arc that saw him rise from relative obscurity to the head of a UN agency in the space of a decade. This is one of the strongest and most engaging chapters of the book, and it establishes Chisholm as a worthy subject of historical inquiry, if an unlikely national hero.

Although he was early a committed pacifist, Farley reminds the reader that Chisholm spent much of his career in uniform. After distinguishing himself as a junior officer during the First World War, he studied medicine and entered private practice—first as a general physician and subsequently as a private psychotherapist—all the while remaining in the Canadian militia. Farley contends that Chisholm's career might have stalled had it not been for his military commission, which provided his principal avenue for professional and social advancement. As a private practitioner, he operated on the margins of the Canadian medical establishment, despite strong social connections by marriage. As a psychiatrist, he cleaved to Freudianism, a school that never enjoyed the vogue in Canada that it attained in the United States, and he might have languished in obscurity had his theories not spoken to the anxieties of the Canadian military when war came in 1939. While serving as a recruiter, Chisholm gained the attention of the general staff for a pamphlet that he had published on the question of military morale. By 1941, he had been appointed director of personnel selection, responsible for the design and administration of psychometric tests to detect neurotic disorders in new recruits, and, over the course of the war, he rose rapidly to the office of director general of medical services. In 1944, he was permitted to resign his commission to become deputy minister in Canada's newly created Department of Public Health and Welfare. His tenure there, which was to be his springboard to the WHO, proved to be one of the most controversial chapters of his career.

As deputy minister, Chisholm was not a retiring bureaucrat; rather, he repeatedly drew unwanted attention to his department for ill-considered and sometimes outrageous public comments. He treated his office as a pulpit from which to preach Freudian-inspired ideas about proper parenting and the perversions of religion and pop-

ular morality. Much of what he had to say concerned what he saw to be the root causes of war. War, he argued, was a manifestation of collective neurosis: the consequence of poor parenting and social institutions that delivered humanity into a state of perpetual immaturity. He condemned the central institutions of society—family, school, and church—for propagating the dogmas that lay at the base of this collective neurosis. Perhaps most famously, Chisholm lashed out against Santa Claus. In an address to an Ottawa audience, he declared that parents crippled their children by consistently lying to them: “Any man who tells his son that the sun goes to bed at night is contributing directly to the next war.... Any child who believes in Santa Claus has had his ability to think permanently destroyed” (p. 43). Asked to clarify his views by an incredulous reporter, Chisholm chose to amplify this statement: “Santa Claus [is] one of the worst offenders against clear thinking, and so an offence against peace” (p. 44). Such statements made Chisholm an object of ridicule in the press and a source of embarrassment to the government, and indeed it is not an unreasonable conjecture that had Chisholm’s career not been rescued by the machinations that saw him elected director of the WHO, he would almost certainly have been dismissed and faded into obscurity, remembered only derisively as the “Santa Claus Man.”

Once installed at the WHO, Farley’s Chisholm becomes a consistent supporter of the have-not nations over the haves, an enemy of nationalism and interest-based politics, and a visionary animated by humanism and a faith in world government. While not a partisan in the formal debates over functionalism, he was, as Farley describes him, an intuitive functionalist, “too busy at his post to be aware of ... the debates over functionalism,” but with a visceral understanding of the imperative to transcend what he saw as the corrosive effects of nationalism by enticing nation-states to cooperate in the pursuit of universal goals (p. 6). This was to be, for Chisholm, a Sisyphean and thankless task. Largely abandoned even by his own government, Chisholm steered the WHO through successive political and financial crises, many of then created by a U.S. government that alternately sought the organization’s extinction or tried to make it an instrument of its own imperial designs. Chisholm would appear to have been defeated at every turn, but in the face of long odds, Farley concludes, the very survival of the organization must ultimately be counted as a victory for which Chisholm deserves the greatest portion of the credit. Here, as in many parts of the book, the author’s distaste for American foreign policy manifests only just

below the surface, and a heavier editorial hand might have been deployed to temper a sometimes intrusive authorial voice. And while Farley’s critique is probably well placed, one might wonder how durable comparisons between Truman-era American attitudes to international cooperation and the musings of John Bolton, the U.S. ambassador to the United Nations in 2005, will prove to be.

For the latter half of the book, Farley turns his attention away from “politics” to “function”: to a study of the early programs and initiatives of the WHO. Here, he scribes a sharp line between “those who believed in the almost mythical potential of magic bullet medicine and those who believed that to improve health, there was no substitute for the long, hard slog of social and economic development” (p. 111). Chisholm fell into the latter camp, and, as the language of this passage would suggest, Farley makes no pretense of not being a partisan for Chisholm’s side. Chisholm, as a strong proponent of “social medicine,” saw disease largely to be a function of poverty and backwardness, and he rejected the prevailing idea among scientific optimists that innovations in medicine and agriculture could end the immiseration of the poor. Any generalized improvement in public health, he felt, required fundamental social and economic change. In the Cold War context, however, social medicine consistently took a back seat to expediency as Western nations, seeking to build a bulwark against communism, sought to win over peoples of the developing world not with incremental change but rather with direct and heroic interventions easily traced back to the Western benefactor.

As the focus of the WHO shifted away from social medicine toward carefully targeted campaigns against the scourges of tuberculosis, syphilis, and malaria, Chisholm and Geneva seem to have become increasingly irrelevant to the execution of these campaigns. Indeed, Chisholm all but vanishes in these chapters. The reader is left to take it on faith that Chisholm “must have shown leadership qualities as well as an aura of command”; Farley provides little evidence to show what kind of leadership Chisholm offered or what kind of tone he set for the organization (p. 69). Where Chisholm does appear, he reveals himself to be perhaps as detached from reality as from realpolitik. He is cited at one point, for example, arguing that “one cultural anthropologist is worth more than 1,200 malaria teams” (p. 122). In spite of the substantial absence of the central character, however, these chapters are some of the most engaging of the book. Farley recounts the practical and imaginative challenges faced by the WHO as it attempted to negotiate

the complex waters of international development. Here, it often found itself at odds not only with self-interested nation-states but also with other functionalist organizations, like the United Nations' own Food and Agriculture Organization, as, for example, initiatives to alleviate famine through the promotion of irrigation threatened to exacerbate the problems of such water-borne diseases as malaria and bilharzias.

Farley sees the intractability of problems related to overpopulation and famine to be the principal factors that drew the WHO into debates about family planning and population control, debates that would prove nearly fatal to the organization and that were perhaps fatal to Chisholm's career. Chisholm, long before he assumed office at the WHO, was an active proponent of population control and eugenics, and Farley asserts that it was inevitable that he would eventually place family planning on the WHO agenda. Moreover, Farley acknowledges that Chisholm was blindly naive when it came to questions of reproductive choice, and he similarly acknowledges the ideological inconsistency of Chisholm's support of the "magic bullet" of birth control as a substitute for structural and economic change. Ultimately, Farley is curiously reluctant to concede that the deadlock over birth control at the World Health Assembly in 1952 probably cost Chisholm a second term as director general. He dismisses assertions that, in the face of American and Vatican opposition, Chisholm would not have been able to muster the votes necessary to be reelected. Similarly, he skirts the question of whether Chisholm even had the support of his native Canada, which was compromised at home by Chisholm's implication in the birth control debates. Indeed, Farley offers evidence that undermines his own assertions when he acknowledges that while Canada was prepared to sponsor Chisholm's reappointment, it communicated confidentially that it did not wish "to conspicuously advocate for Dr. Chisholm's extension," and that "Dr. Chisholm's reputation in some sections of Canada is not very high because of public statements on controversial issues which he has made from time to time" (p. 185). The message, however circumspectly rendered, could hardly have been clearer. Pushed, or simply exhausted, Chisholm retired from the WHO after just one term.

Farley follows Chisholm briefly into his retirement, noting the reemergence of the outspoken Chisholm who had been partly submerged by his diplomatic obligations to the WHO. In retirement, Chisholm continued to speak on issues that were close to him, including nuclear non-proliferation and world government, but his most famous

and most controversial speeches were those concerned with birth control and eugenics, topics that marked him as out of step with modern sensibilities, as Ian Dowbiggen has indicated elsewhere.^[1] Perhaps for this reason, Chisholm, despite his early retiring age of fifty-seven, remained a relatively obscure figure outside of humanist and pacifist circles. Although he did publish one book and ran once, unsuccessfully, for public office, he received no invitations to serve the public on boards and commissions and few public honors, despite living another two decades.

The book lacks a conclusion, including instead a brief postscript after following Chisholm to his grave. This is unfortunate, as the author misses an opportunity to situate his subject as worthy of biographical treatment and to assess his contributions on having presented his evidence. Perhaps, though, this is a reflection that Farley has only too well undermined his own premise that Chisholm is a useful instrument for a nationalist project. An unapologetic booster of the United Nations, Farley opens the book with the assertion that the failure to commemorate Chisholm must be read as a national failure: "That Canada, a country which prides itself on its support for the United Nations ... no longer remembers that one of its own became the first director general of one of the UN's most important agencies is a national disgrace" (p. xii). By his own evidence, however, Chisholm is a problematic icon, and Canada's support for the early WHO is more mythical than real. In the final rendering, Farley's Chisholm remains a visionary, inspired by humanism and a committed world government, but he is hardly representative of mid-twentieth-century Canada. Moreover, this same rendering confirms that he was apolitical and often naive, perhaps respected abroad but best remembered in Canada as "a godless, opinionated, outspoken iconoclast with a propensity for putting his foot in his mouth" (p. 47). Chisholm's worthiness as a subject of historical inquiry is unquestionable, and Farley's history is illuminating. As an icon for a remembered internationalist past, however, Chisholm is wanting, and the evidence for this past is weakened by Farley's own scholarship, underscoring, perhaps, the perils of questing in the past for easy answers to questions about Canada's global role.

Note

[1]. See Ian Dowbiggen, "Prescription for Survival: Brock Chisholm, Sterilization and Mental Health in the Cold War Era," in *Mental Health and Canadian Society*, ed. James Moran and David Wright (Kingston and Montreal: McGill-Queen's University Press, 2006), 176-192.

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Citation: Chris Dooley. Review of Farley, John, *Brock Chisholm, the World Health Organization, and the Cold War*. H-Canada, H-Net Reviews. July, 2009.

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