



Book

How much should we be worried?

Global health is in the midst of an uncertain, confusing, and uncomfortable passage. Donor financing for infectious disease control has plateaued and is in decline, while low-income national governments are loath to pick up the slack and state leaders, especially in Africa, have largely exited the stage. Expensive and competing priorities spotlighted in the Sustainable Development Goals—non-communicable diseases, universal health coverage—are capturing the headlines at glossy global summits and stand at the centre of the WHO Director-General’s vision for revitalising WHO, at a suggested price tag exceeding US\$10 billion in new funds.

Yet it remains unclear whether adequate financing and sustained high-level political leadership will materialise to move these visions from aspiration to reality. In the background, populist nationalism reigns in the USA, the UK, parts of Europe, and Brazil, raising the spectre of whether the old liberal institutional order is fading away permanently, what is to replace it, and what might this mean for the future of global health. In the meantime, familiar, often tiresome, debates over vertical versus horizontal investments grind on, combined with intensified, ugly competition for scarce donor dollars, wearing on the nerves of the leadership of Gavi, the Vaccine Alliance and the Global Fund to Fight AIDS, Tuberculosis and Malaria, as each heads towards replenishments.

It is into this fraught moment in time that Thomas J Bollyky, Senior Fellow and Director of the Global Health Program at the Council on Foreign Relations, has made a big splash, inviting a refreshing and provocative debate with

the publication of his sweeping, ambitious study, *Plagues and the Paradox of Progress: Why the World is Getting Healthier in Worrisome Ways*.

Bollyky’s guiding, core ambition is to unravel “the paradox of progress against infectious diseases”. The HIV/AIDS epidemic propelled historic donor investments over the past two decades in control of infectious

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diseases in countries in Africa and south Asia. That mobilisation introduced advanced medical technology on a mass scale, saved and improved countless lives, and increased life expectancy. But these unforeseen public health gains were not accompanied by the sort of developmental transformations seen both in the USA and Europe during the late 19th and early 20th centuries, or in China from the middle of the 20th century.

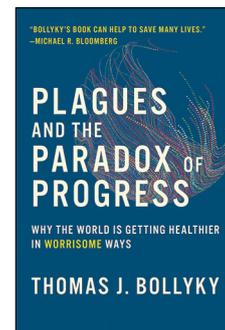
In stark contrast, the recent pattern of donor investments in infectious diseases in low-income countries now appears narrow and free-standing. Durable public health institutions are often absent: in quarantine, vaccination, housing reforms, and sanitation and safe water. The same is true of responsive governance and economic growth that generates lasting wealth and employment. Indeed, people in some low-income countries continue to live under corrupt and unaccountable

systems that woefully underinvest in health infrastructure and human capital in health and education.

The result is a “worrisome” paradox indeed. But that is only half of what may keep us all awake at night. Bollyky carefully explains how ferociously swift, competing transformations are laying the groundwork for future, protracted instability. Low-income countries face an explosive tide of non-communicable diseases, massive, acutely poor world cities have proliferated—1 billion slum dwellers, expected to double by 2030—and profound demographic shifts continue to accelerate unabated, giving rise to a so-called youth bulge that threatens to undermine gains.

In earlier historical periods, surplus youth helped drive high-growth industrialisation at home, or if the home country were too crowded, that talent often migrated to other high-growth opportunities. In today’s Africa and south Asia, such pathways are blockaded. Technology, automation, and competition from China, among other factors, lower the prospects of industrialisation in some parts of Africa and south Asia. Climate change weakens agriculture. And fear-fuelled nationalist populism in some countries—what Bollyky calls a spreading “geopolitical hostility”—is consciously built on anti-migrant reaction.

In telling this complex story, Bollyky follows in the intellectual tradition of William McNeill’s *Plagues and Peoples*. He brings to the task a remarkable command of history, science, technology, medicine, public health, and political science. Bollyky combines his scholarship with an unusually fluid, writing style that invites readers to read more. In mapping his many “worries”, Bollyky carefully treads a middle path between pessimism and optimism—



Plagues and the Paradox of Progress: Why the World Is Getting Healthier in Worrisome Ways
Thomas J Bollyky. The MIT Press, 2018. Pp 280. US\$27.95. ISBN 9780262038454

neither as hopeful as Stephen Pinker or Hans Rosling nor as pessimistic as William Easterly or Dambisa Moyo.

This compact volume also offers many fascinating side-trips and historical insights on, for example, the history of rehydration salts, UNICEF's pioneering leadership on child immunisation under James Grant, the colonial and military roots of vertical disease control programmes, and China's historical "luck" in securing massive markets in the west.

In answering the "so what?" question towards the book's conclusion, Bollyky argues that national governments should focus on urban governance and strengthened land rights. Higher investments in human capital in education and health are essential—a view in synch with Jim Kim at the World Bank and the Bill & Melinda Gates Foundation's Goalkeepers' initiative. Strong primary health care systems are affordable, elemental building blocks—as delineated in the Declaration of Astana agreed at the Global Conference on Primary Health Care in Astana, Kazakhstan, in October.

In his view, donors continue to have a productive role on the edges, particularly if they focus on patient-centred health outcomes, heightened responsiveness to local and national priorities, particularly with respect

to non-communicable diseases, and higher quality and speedier data. Demographic dangers call for expanded family planning and investment in the education of girls. Integration and consistency should be watchwords for the future: the pairing of health investments with economic development, governance, education, and infrastructure; and ensuring that engagement in health is not undercut by contradictory approaches on climate change, migration, and trade.

Bollyky forces us all to think again, to think broadly about what has been accomplished in global health, and to ponder the perverse reality that while historic public health gains have recently been achieved, that progress has not created the basis for stability, good governance, and prosperity. Indeed, it has inadvertently made things worse, and we need a new strategy.

Bollyky leaves us with two fundamental questions: just how worried should we be? And what exactly is feasible today—what is a realistic strategy for the future? At many points, "worry" and "worrisome" seem overly mild for the many dangerous, interlocking trends Bollyky dissects and the future of chronic instability that he convincingly predicts in his book. "Alarm" would seem far more appropriate.

That seems particularly true for many highly vulnerable countries in Africa, whose future, as laid out in *Plagues and the Paradox of Progress*, looks exceedingly unpromising. Altogether unclear is where the next generation of committed state leaders are to emerge in those most problematic countries in Africa and south Asia to carry forward any reform agenda, and just how external parties are to invest most effectively in supporting that generation. A concerted, renewed push on family planning and reproductive health would seem unavoidable, but will run headlong into the multiple political and cultural sensitivities that have set back that agenda in the past: far more thought and effort will be required if the next round of effort is to succeed. Finally, the threat of ethno-nationalist populism is cause for far more than "worry": how to navigate that dangerous reality and achieve the next steps Bollyky outlines remains an open question, and most fundamental to the future.

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Film Interesting drug



Magic Medicine
A film by Monty Wates.
Dartmouth Films, 2018.
<https://magicmedicine.net/>

The human cost of depression is often communicated in very big numbers: the vast economic losses and the legions of sufferers worldwide. It is, nevertheless, an illness of individuals. Mark has suffered from depression all of his adult life. "If this is living then this sucks", he says. John is devoted to his family but has been unable to play a full part in their lives for close

to a decade. The strain this puts on his wife is considerable. Andy has been depressed since a change in the circumstances of his job 13 year ago. All three men have tried numerous treatments with only transient benefit. They are among 12 people recruited to take part in a trial to take psilocybin, the psychoactive compound in hallucinogenic mushrooms. Will this

help where other approaches have failed?

Psilocybin is a controlled substance pretty much everywhere. Despite theoretical promise for the treatment of depression, it's hard to get research into its potential medical benefits off the ground. The regulatory obstacles are onerous and obstructive; pharmaceutical companies stay away.

The other problem is that there is too much violence on TV. Every day we are reported about natural disasters, murders and robberies. We watch hits where people are killed before our very eyes. It dulls our sensitivity and makes us aggressive. A lot of parents still don't know how television influences children's health and development. Is it all right to let children watch TV as much as they want? In my opinion, it's not right that some parents use television as a babysitter in order to keep their children quiet. Boys and girls should understand that there are a lot of other interesting and useful things to do besides watching TV. Many people watch soap operas because they find them enjoyable and realistic. Others say that watching soap operas is just a waste of time.