

## BOOK REVIEW

**The Tomorrow of Malaria:** Socrates Litsios, 1996, Pacific Press

History can teach the planners so much, if they will only take the time to read it and to consider its lessons. So much depends on the source and the format. In this respect the small volume on malaria produced by Socrates Litsios is a gem pocketbook emanating from the pen of one who has witnessed the drama from a key Geneva standpoint for three decades. An engineer by background, he brings rare artistry as well as scholarship to his task, as he takes us through the forests of international intrigue, dogma, hope and disappointment in the expectation of delineating some of the minefields, that we may try harder to avoid them in the future.

Intentionally or not, one of the salient features of the book is the emphasis on a small number of *dramatis personae*, powerful individuals who dominated or tried to dominate their eras per WHO committee and national programs. A few personalities held sway from time to time, virtually all from Europe or the Americas, going back into colonial times and carrying a neocolonial type thrust into the more recent period. The immediate reaction to this scenario is one of wonder, that the history of a disease like malaria is of necessity told in terms of such individuals, when successful control depends so much, in truth, on anonymous communities working for mutual advantage without power or glory. This picture underscores the central drama: alongside their modest successes, the extent to which powerful dogmatists of western ilk have often stalled progress in this field, misled governments and their people, and wasted large sums, under the guise of wisdom. The story is beautifully told in short form, so that even the busiest bureaucrat can find coffee hour time enough to digest the message.

The drama has been an evolving one, starting with the recorded fears of expatriate populations moving into unfamiliar tropical climes who suddenly recognized a threat which had hovered over indigenous communities from time immemorial, who did not often record what was for them a part of normal existence. The quinine saga, from the Amazon rainforest to the plantations of Java, goes back centuries and it is remarkable that this drug still forms a critical part of the chemotherapeutic

armamentarium. But it is the battles about case management versus vector control, the latter with its militaristic facades which have occupied center stage for so long this century. It is the debate of eradication versus control which has carried the mantle of surrealism for so long, a debate that smoulders on under the cloak of other semantics invented to satisfy the official whims of WHO and other committee dictates. It is a debate sprinkled with patronizing references to the many who suffer by the few from the west who travel in and out of endemic areas in jetset haste casting their self-proclaimed wisdom upon the waters.

Does the personality of a health program leader matter? Should it matter? The advent of the DDT era was to form a watershed in policy terms, creating high expectations for eradication, replacing environmental engineering with residual spraying, coupled with chemotherapy. The vision led to missionary zeal by self-proclaimed "experts" in program implementation, such that it was, for example, recorded of Soper at his death that 'no other person was "so well endowed for large scale disease prevention"', that 'his was a "fanatic, driving, perfectionist leadership"'. Such characteristics were evidently admired, malaria eradication became somewhat akin to conquering an empire, upon fanaticism were heaped honors and awards.

The inward implosion which occurred as the global policy of "eradication" resignedly gave way to "control" arguably reflects in part the non-sustainability of militaristic campaigns driven by outsiders in any nation or community. A basic element in the eradication strategy was indoor residual spraying with DDT, which was so often carried out dictatorially without due consideration of the sensitivities of the target population. Litsios documents with exquisite finesse the manner in which sympathetic individual committee members were ignored in the formalism of program reports that steamrolled conclusions to fit the pattern of thinking of certain influential personalities, often reflecting one side of a multifaceted melee.

In the final two chapters "The Tomorrow of Yesterday" and "The Tomorrow of Today" look, on

the one hand, at the planned expectations of the past that were dashed in the cold war period, and on the other hand at the aspirations of the present, since the malaria summit in Amsterdam in 1992. In the latter context Litsios sees hope in the current development of new tools in relation to diagnosis and treatment, to sustainable prevention including a degree of optimism concerning vaccine development, and new possibilities for vector control. He makes a plea for strengthening local capacities in the context of decentralized management and finally, for a reappraisal of underlying development philosophy and action thereon. This is, in reality, a plea for departure from the dogmatic global "solutions" of the past, a key lesson from careful review of history.

If there is a fault it is perhaps the omission of reference to some cogent examples which may have already partially attained the "Tomorrow of Today", of countries where decentralized community harnessing has already yielded a degree of sustainable control with major reduction in disease morbidity and mortality over substantial time periods. These achievements have mostly been made without the extravagant fanfare of western hegemony and serve as reminders that history has both positive and negative lessons to teach if only we have open minds enough to listen with the intent to learn, and the courage to act in accordance with stepwise, achievable goals, in a milieu inspired by modest rather than grandiose visions.

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