

Institution: University of York		
Unit of Assessment: 28 - History		
Title of case study: History, World Health Organization and the Empowerment of National Health Leadership in Sri Lanka		
Period when the underpinning research was undertaken: 2010-2020		
Details of staff conducting the underpinning research from the submitting unit:		
Name(s):	Role(s) (e.g. job title):	Period(s) employed by submitting HEI:
Professor Sanjoy Bhattacharya	Professor of History	1/10/10 - present
Dr Alexander Medcalf	Lecturer in the History of Science and Medicine	1/10/12 - present
Period when the claimed impact occurred: August 2013-December 2020		
Is this case study continued from a case study submitted in 2014? No		
<p>1. Summary of the impact (indicative maximum 100 words)</p> <p>The Centre for Global Health Histories (CGHH) at the University of York has been working with the World Health Organization (WHO) since 2010 on research-led initiatives promoting knowledge exchange and institutional transparency. Since 2013, 75 research-based WHO Global Health Histories seminars, researched, planned and supported from within CGHH, have contributed to institutional knowledge sharing and transparency within the WHO. In this period, CGHH also expanded its geographical scope to work with WHO Regional Offices and multiple country governments. CGHH research on national and local histories has been particularly impactful in Sri Lanka, where research-based training, delivered in partnership with its central and provincial health ministries, administrative services, and professional colleges in medicine and science, has redefined national training protocols, reformed the post-graduate curriculum for the country's health managers and medical administrators, empowered health officials to better represent Sri Lanka in international health diplomacy, and changed practice to include historical research in all major policy reports and protocols.</p>		
<p>2. Underpinning research (indicative maximum 500 words)</p> <ol style="list-style-type: none"> 1. Wellcome Trust Senior Fellowship (awarded to Sanjoy Bhattacharya, 2010-2015): This award funded work on histories of Vaccination, Concepts and Practices of Disease Elimination and Eradication, and the impact of Medical Migration and complex forms of Knowledge Exchange. This project produced Bhattacharya's article on Bhutan's smallpox eradication programme in the 1960s and 1970s [3.1], and Bhattacharya's article with co-author Carlos Campani (then Health Sciences, University of York) on the diverse institutional bases of the progression of the worldwide smallpox eradication programme in the 1950s and 1960s [3.3]. This body of work challenges US-centric historical narratives of global smallpox eradication by pioneering new methodological approaches based on multinational and multilingual research with previously unused archival collections. In this way, these articles describe the importance of actors at all levels of national and sub-national governance, around the world, who successfully ran smallpox surveillance, isolation and vaccination campaigns across diverse socio-economic contexts to make worldwide smallpox eradication possible. 2. Wellcome Trust Project Grant (PI Bhattacharya, 2008-2013): Funded work on the history of smallpox control and eradication in South Asia between 1947 and 1977, including an assessment of the movement and vaccination of migrants and pilgrims from this region to West Asia. This project produced Bhattacharya's article on global and local histories of smallpox eradication, which offers research methodologies that allow for more inclusive histories of innovation that can enable more democratic engagements in international and global health [3.2]. 3. Wellcome Trust Senior Investigator Award (with 3 separate Enhancement Grants, PI Bhattacharya, 2012-2020): Funded work on Primary Health Care, the WHO, and engagements with national and sub-national governance. This work promoted the use of archives around the world, assessment of unpublished papers in multiple languages, oral histories with WHO and government officials, and the use of research-based, interactive seminars. The result is a peer-reviewed article about the birth, expansion and impact of the WHO Global Health Histories project, whose expansion between 2014 and 2020 is directly 		

linked to this grant (co-authored with Prof Aliko Ahmed, a Director of Public Health England, and Dr. Alexander Medcalf) [3.4].

Bhattacharya's research methodology has developed a new, decolonised form of critical data collection and analysis that is now influential in academic and policy circles (especially in low and middle income countries), and crucial to CGHH's impact.

3. References to the research (indicative maximum of six references)

3.1 S. Bhattacharya, 'International Health and the Limits of its Global influence: Bhutan and the Worldwide Smallpox Eradication Programme', *Medical History*, 57, 4, Oct 2013. [DOI](#)

3.2 S. Bhattacharya, 'Global and Local Histories of Medicine: Interpretative Challenges and Future Possibilities', in M. Jackson (ed.), *The Oxford Handbook of the History of Medicine* (Oxford University Press, 2011), updated in M. Jackson (ed.), *A Global History of Medicine* (Oxford University Press, 2018).

3.3 S. Bhattacharya and C. Campani, 'Re-assessing the Foundations: Worldwide Smallpox Eradication, 1957-67', *Medical History*, 64, 1, 2020. [DOI](#)

3.4 A. Medcalf, S. Bhattacharya, and A. Ahmed, 'Humanities, Criticality and Transparency: Global Health Histories and the foundations of inter-sectoral partnerships for the democratisation of knowledge', *Humanities & Social Sciences Communications*, 7, 6, 2020. [DOI](#)

All outputs were peer-reviewed, produced with peer-reviewed funding, and returned to either REF2014 or REF2021.

4. Details of the impact (indicative maximum 750 words)

Between 2013 and 2020, the University of York's historical research and associated training and engagement activities have shaped knowledge creation and sharing across WHO networks worldwide. This led to in-depth work with governance structures inside multiple WHO Member States, which has in turn informed changing research, training, and policy design and practice in Sri Lanka.

Shaping research and information sharing at the WHO

The World Health Organisation describes its Global Health Histories project (WHO GHH) in the following terms: 'An official WHO activity, its mission is based on the principle that understanding the history of health, especially during the last 60 years, helps the global public health community to respond to the challenges of today and help shape a healthier future for everyone, especially those most in need' [5.1].

The University of York's Centre for Global Health Histories (CGHH) has played a central role in designing and directing the WHO GHH project's innovative use of historical research for international health policy enrichment, drawing on Director Professor Sanjoy Bhattacharya's work and methods. The collaboration began at York in 2010 and the usefulness of this work was formally recognised by the WHO, which designated CGHH its first Collaborating Centre for Global Health Histories in October 2013 [5.2]. The continued impact of these activities was formally recognised through redesignation of the WHO Collaborating Centre status for another four-year cycle in October 2017 [5.3].

Since 2013, the WHO GHH has continued to expand into a more multinational activity, based on Bhattacharya's research on low and middle-income countries (LMICs) and policy links [3.1-3.3], creating an unprecedented space for the collection and use of diverse historical materials in the WHO's policy and public engagement work. This represented a major methodological shift, where such activities were previously reliant mainly on information provided through epidemiological, biomedical science, clinical and some economics research. WHO GHH work was built around a series of research-oriented seminars, held worldwide: 75 such events were delivered between 2013 and 2020 through York's CGHH. These events placed no constraints on data presentation by groups of WHO officials and externally-located historians, and they were designed to enable WHO Departments and projects to benefit from the systematic collection and critical analysis of written and oral historical materials (both before and after the seminars were held) [3.4].

Bhattacharya's own historical research [3.1, 3.3], as well as the bespoke and detailed evidence-based briefings prepared before and after WHO GHH seminars, helped multiple WHO Departments and projects adapt to diverse region- and country-specific social, administrative,

political and cultural determinants of health. Such research-based policy collaborations created new connections between the WHO HQ, WHO Regional Offices and member states, which bore unique working practices at all these levels of health governance. The WHO Director of Health Systems Development, and Coordinator of the Sustainable Goals, based within the WHO Office for the Eastern Mediterranean Region in Cairo, recognised the impact of Bhattacharya's work on the agency's worldwide frameworks thus: '...your work on the histories of smallpox eradication, primary healthcare and universal health coverage, and the birth and the expansion of the WHO have been profoundly transformational in the way we now take a long-term approach to understanding and dealing with current challenges facing health systems strengthening internationally, regionally and nationally. My colleagues have appreciated the insights already provided by your unpublished and published work in relation to historical methods, the importance of using multiple source materials to develop an effective understanding of the qualitative factors that impact health delivery and uptake, and, not least, the necessity of using several languages for collecting information on social and administrative contexts, so as to create the robust bases for more cohesive, inter-sectoral collaborations. In short, we believe that your cutting edge historical research can continue to help us in the WHO to work with our partners in national health governance to deliver more democratised, equitable and transparent mechanisms for healthcare for all' [5.4].

Such powerful endorsement from within WHO senior management caused Professor Bhattacharya to be invited to deliver similar contributions for multiple national governments. With the resources and time available to him, WHO GHH activities in the form of seminars, briefings and training sessions were organised in countries as diverse as Brazil, India, Hong Kong, Japan, Romania, Singapore, Sri Lanka, Qatar and Zimbabwe. Work was carried out voluntarily, in order to ensure programmatic independence.

Informing government health policy research and medical administration in Sri Lanka

Professor Bhattacharya's historical research has had the greatest impact on Sri Lanka, where it has produced significant reforms in research-based training in public health, international relations and health diplomacy, as well as an unprecedented design of the government's postgraduate training for medical and public health administrators through the formalised introduction of global health histories instruction.

The WHO GHH-led links with the Sri Lankan Health Ministry started developing in 2016, and the seminars and associated research cum engagement protocols were quickly embraced by its senior management, whose members saw this activity as an avenue of modernisation and reform in training of staff earmarked for national and diplomatic duty within the WHO and the UN. By June 2017, Professor Bhattacharya was invited to draw on his own work and run a '...set of bespoke training sessions in international relations, global health histories and their significance for current regional, national and local health policy...[which would] be provided formally, as part of official healthcare functions, to our country's senior public health managers and medical administrators' [5.5]. The stated goal, in the official invitation from the Sri Lankan government, was to '...create a new culture of appreciating medical history...at levels of national governance relating to public health and medicine.... By targeting this kind of training at clinicians, medical administrators and public health leaders, our aim is to develop a valuable and long-lasting culture of interdisciplinary research and training within the country...' [5.5].

Professor Bhattacharya delivered these activities in September 2017 to 60 senior leaders drawn from the Health Ministry, the Colleges of Medical Administrators and Microbiologists, and societies for Clinical Nutrition and Medical Information (the selection process was competitive, with 180 applicants). A focus of this work related to the use of archives of unpublished and sometimes confidential correspondence between international agencies and LMIC governments about plans for health promotion and economic development [3.1, 3.2]. The goal was to impart the skills to draw out information about national strategies, contributions and successes, to then be used by Sri Lankan health and medical administrators in negotiations held in international and global health settings. Draft versions of articles on smallpox eradication and the methodologies underpinning WHO GHH work were presented at this event [published as 3.3 and 3.4]. The official evaluation

from the Sri Lankan Health Ministry noted that the ‘...sessions where you drew upon your research [...] to describe how critical oral history methodologies can help us draw out information about diverse political, administrative, social and cultural complexities on the ground were considered immensely helpful for the design, implementation and evaluation of current and future policy. The breakout sessions that followed, where teams of specialists were invited to use these techniques to problematize their own field experiences were outstandingly successful, and attendees are still talking about how much new, useful information that they picked up from your research and its underpinning methodologies [...]. The feedback received suggests great hunger for more training in research, analysis and engagement, based on the study of contemporary history and politics, within all arms of the Sri Lankan Health Ministry. Therefore, we look forward to organizing many such events with you...’ [5.6].

Empowering Sri Lankan health leadership through curriculum reform

Professor Bhattacharya’s history-based training was, therefore, continued between 2017 and 2020, drawing in 240 leaders from the Health Ministry, professional colleges and government (60 training spaces were made available in each of the 4 meetings). These WHO GHH activities led to unprecedented transformations in national policy: the Sri Lankan government made such in-country research cum training events a core part of continuing professional development qualifications, and, more significantly, the Sri Lankan government also decided to fund the overseas training of senior Health Ministry officials in global health histories and international relations within CGHH, under Professor Bhattacharya’s supervision. Since 2018, the Sri Lankan Health Ministry has funded 2 such placements for its officials [5.8, 5.10]. This investment in historical training is a significant change. As one official puts it: ‘This kind of support is completely unprecedented in our Ministry’s history, as its senior officials are almost always sent out for clinical attachments’ [5.10].

Further impact followed, in the shape of core medical and public health administration curriculum reform, directly informed by Professor Bhattacharya’s interventions. The Sri Lankan Director of Tertiary Care Services informed him in September 2019 that ‘training and educational protocols for the MD in Medical Administration [...] will, for the first time in the history of this Sri Lankan post-graduate training programme for senior health officials, incorporate a core Global Health Histories component. This will introduce our medical administrators and leaders to training in critical historical, international relations and health diplomacy methodologies, which will equip this influential cadre responsible for planning, delivering and improving our government health services at home, and, at the same time, also represent our overseas interests in health and development most effectively. Global Health Histories-based instruction, training and research building capacity, therefore, represents a fundamental shift in vision and actual structure in how senior governmental medical and health managers are prepared for their duties’ [5.7].

Informing Sri Lankan Health Practice: international health diplomacy and embedding history into major policy projects and reports

Other senior Sri Lankan leaders note how Professor Bhattacharya’s research-based training has been influential in reshaping national governmental practice. The country’s Deputy Director General (Public Health Services) writes that: ‘Your Global Health Histories-led training sessions in health management and diplomacy, provided over the course of several years already, have created new educational methodologies and pathways within the Ministry. These have enabled multiple cohorts of Sri Lankan Medical Administrators, who are responsible for delivering effective and quality healthcare to our country’s population, to effectively consider the complexities of social, cultural and administrative determinants of health’ [5.8]. She goes on to highlight the importance of changes to practice on the international stage: ‘This training has helped them apply such new, inter-disciplinary knowledge in impactful ways, not only in national settings, but also in very important regional and international policy forums where Sri Lanka’s rights and responsibilities are considered’ [5.8]. Bhattacharya’s Global Health Histories training has thus contributed to Sri Lankan health diplomacy in international policy circles by empowering officials with knowledge about their own history. As another senior public health manager puts it: ‘Simply put, your global health histories approach allows us to study national and international trends and processes in ways that enrich our evidence base for meaningful action, allows us to better represent Sri Lankan

interests in global health deliberations and negotiations, and improves chances of community understanding and uptake of new policy interventions' [5.9].

The CGHH's research-based training has also led to the inclusion of historical sections in Sri Lankan reports and policy activities. As the Director of Research of the country's Education, Training and Research Unit writes: 'Your meticulously researched and evidence-based engagement with us has already had deep-seated and long-lasting impact on our health governance activities [...]. As a result, my colleagues and me now recognise the importance of developing history background sections for all major reports and policy protocols' [5.10].

Professor Bhattacharya's role in reshaping practices in Sri Lankan health administration has also been formally acknowledged by his trainees in government, who now occupy senior national and international leadership positions. For example, a senior member of the Health Ministry's National Planning Unit who was seconded to the WHO's Sri Lanka Office writes that: 'The training workshops that you have provided in Sri Lanka [...] to Health Ministry colleagues over several years, drawing upon your own published research and work in progress, have transformed research cultures and related policy implementation work within Health Ministry circles. Carefully-researched historical assessments of national and international health policy are now an important component in all current projects and reports, not least as we agree with your message that this enables the evidence-based consideration of diverse and complex cultural, social and administrative determinants of health that are central to programmatic success' [5.9]. Professor Bhattacharya's work has, therefore, put critical historical research and analysis at the heart of Sri Lankan health planning, delivery and evaluation, as well as the engagements of this work internationally.

5. Sources to corroborate the impact (indicative maximum of 10 references)

5.1 https://www.who.int/global_health_histories/en/

5.2 WHO Collaborating Centre Designation Letter, Oct 2013.

5.3 WHO Collaborating Centre Re-designation Letter, Oct 2017.

5.4 Letter from Director of Health Systems Development and Coordinator of SDGs, World Health Organization, Eastern Mediterranean Regional Office, Cairo, Egypt, 21 Jun 2018.

5.5 Letter 1 from Director of Tertiary Health Care, Sri Lankan Ministry of Health, Nutrition and Indigenous Medicine, Government of Sri Lanka, 6 Jun 2017.

5.6 Letter 2 from Director of Tertiary Health Care, Sri Lankan Ministry of Health, Nutrition and Indigenous Medicine, Government of Sri Lanka, 20 Sep 2017.

5.7 Letter 3 from Director of Tertiary Health Care, Sri Lankan Ministry of Health, Nutrition and Indigenous Medicine, Government of Sri Lanka, 20 Sep 2019.

5.8 Letter from Deputy Director General (Public Health Services), Sri Lankan Ministry of Health, Nutrition and Indigenous Medicine, Government of Sri Lanka, 11 Mar 2020.

5.9 Letter from Consultant Health Systems Development and Strengthening, WHO Sri Lanka and Member of National Planning Unit, Sri Lankan Ministry of Health, Nutrition and Indigenous Medicine, 1 Apr 2020.

5.10 Letter from Director of Research, Education, Training and Research Unit, Sri Lankan Ministry of Health, Nutrition and Indigenous Medicine, Government of Sri Lanka, 28 Sep 2018.