Health and Healthcare Provision for Exiles amidst the Liberation Struggle

Melissa Diane Armstrong, An Ambulance on Safari: The ANC and the Making of a Health Department in Exile

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An Ambulance on Safari by Melissa Diane Armstrong sheds light on the important role of healthcare for South Africans living in exile during the anti-apartheid struggle. This book delves into the African National Congress (ANC)'s multidimensional role in exile, examining how it provided emergency treatment while also creating political legitimacy and advocating for national interests on a global stage. According to Armstrong, she initially came upon the topic of the ANC's expansion of its medical sector when beginning her Master's studies at Oxford University in 2012. Driven by her discoveries regarding the ANC's well documented endeavours, she continued to explore this subject during her PhD studies. Eventually, she converted her PhD thesis into a publication, An Ambulance on Safari, incorporating significant new information she had been unable to include in her original dissertation. An Ambulance on Safari explores the ANC's move into exile, documenting the history of the ANC's Health Department, while incorporating personal accounts of exile journeys and those who were involved in providing health care from the early 1960s to 1990.

Throughout *An Ambulance on Safari*, Armstrong delves into two important topics. First, she discusses the Health Department's organisational structure within the ANC and its approach to patient care, presenting a thorough examination of this department's internal workings and illuminating the ways in which its rules and procedures impacted the delivery of medical treatment while in exile. Second, she analyses the effects that the Health Department had on both patients and healthcare practitioners. This analysis includes interpersonal relationships among staff members, demonstrating how decisions made by the ANC leadership and department personnel had a direct impact on the wellbeing of individual patients.

An Ambulance on Safari is divided into five chapters, with a brief introduction and a conclusion. The first chapter gives a summary of the history of medical services within the ANC in exile and emphasises their crucial role in fostering positive international relations from as early as 1962, particularly between Tanzania and South Africa. This chapter also recounts a significant event involving dissatisfied

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white nurses who intended to leave their hospital posts amidst tensions with Tanzania's newly independent government, potentially leaving numerous medical facilities understaffed (pp. 16-17). However, through collaborative efforts between the ANC leadership and the Tanzanian government, a secret operation was conducted to replace these nurses with black nurses from South Africa (p. 17). This collaboration not only strengthened ties between the two countries but also made it simpler for South Africans who opposed apartheid to seek medical education abroad. Furthermore, the first chapter addresses issues related to healthcare in exile and highlights the role physicians played in raising awareness of anti-apartheid initiatives (pp. 17–20). The ANC's shift to non-military aid is evidenced by the creation of its Health Department in 1976. Thus, this chapter illustrates the goal of improving patient care and raising the organisation's political profile.

The second chapter looks at the collaboration between the ANC and its host countries, Tanzania, Zambia, Zimbabwe, Mozambique, and Angola. It emphasises the influence of geographic considerations on healthcare delivery while concentrating on the political and military environments of the late 1970s and early 1980s. The chapter discusses the strategies used by various branches of the Health Department to address medical care challenges in different regions, with Tanzania's close cooperation and the establishment of a hospital in exile being a key example. Additionally, the chapter explores and addresses the various challenges encountered by the ANC Health Department in delivering healthcare to South African exiles and uMkhonto we Sizwe (MK) members in host countries. These challenges include civil conflicts between the exiles and the locals, refugee influxes, and the widespread prevalence of malaria within the camps, highlighting the urgent need for effective strategies to combat the disease. Furthermore, it emphasises the political importance of HIV/AIDS, the ANC and its host countries' initiatives to tackle the pandemic, while also proposing potential policies to lessen its impact in South Africa.

The third chapter examines the important role that the ANC Health Department played in the anti-apartheid campaign from 1977 to 1990. It focuses on the ANC's Health Department's strategies, goals, and political moves to gain international recognition and draw attention to the inequalities in South Africa's healthcare system. Furthermore, by demonstrating that the Health Department provided care for South Africans in exile, the ANC established itself as a credible political alternative in the eyes of the international community, while also highlighting the shortcomings of the apartheid medical system. The ANC's Health Department also sought to position itself as an alternative medical service dedicated to women's reproductive rights through collaborations and conferences; yet it was unable to take a strictly feminist posture because it failed to create a liberal feminist perspective on abortion legislation.

The fourth chapter delves into the Health Department's infrastructure projects, demonstrating how they are an ideal illustration of the ANC's efforts to serve as a substitute medical representation for South Africa's healthcare system. This chapter also highlights the significance of international donor contributions and medical personnel selection, both of which had a substantial impact on patients' experiences at ANC clinics and hospitals. However, while the Health Department's involvement in the anti-apartheid struggle benefited the ANC politically and internationally, its efforts to provide medical care to South African exiles were important but ineffective. Thousands of patients were treated, and many suffered because of the department's inexperienced, and sometimes corrupt, staff. As a result, the chapter highlights that despite its goals to serve as a replacement healthcare provider advocating for South Africa's interests, the department failed to offer consistent, high-quality care, indicating a lack of leadership ability. Nonetheless, its global exposure helped the initiative to gain financial and political support, notably from Sweden and certain other Southern African countries. Therefore, this examination of healthcare delivery adds to a larger social history that focuses on the daily lives of those who went into exile.

The final chapter investigates the mental health crisis experienced by exiled individuals, particularly ANC and MK members. The emphasis was on prevalent mental illnesses such as post-traumatic stress disorder (PTSD), schizophrenia, depression, and severe anxiety, particularly in cases of traumatic apartheid-era experiences such as confinement and torture, which worsened these conditions and in some cases led to violent behaviour, substance abuse, and even suicide (p. 155). The chapter also describes cases of paranoia which ANC cadres and refugees were subjected to within the ANC itself. Despite the tremendous psychological pressures, there was little reporting on mental health in the 1960s and early 1970s. This lack of reporting is consistent with the general lack of health-related reporting during that period, partly because of the inadequate mental health services available. In addition, the chapter examines the various narratives on how mental health became politicised, including instances where outsiders provided the ANC with urgently needed specialised psychological care but were refused access due to their political stance.

Melissa Armstrong used archival materials, such as health reports, memoranda, personal correspondence, patient letters, speeches, and project proposals when compiling this book. She also looked at records from various sectors of the ANC. Moreover, Armstrong includes specific quotes from these key sources in their original language to ensure the veracity of the comments made. However, she admits that while these archival sources supplied useful information, they also had their limits. For instance, many of the texts had grammatical and spelling faults due to the contributors' different linguistic backgrounds. Also, records in the ANC's Fort Hare collection, for instance, were either in private collections or only accessible to

the public at the party's prerogative. Furthermore, only a minor percentage of Fort Hare's records date back to the 1960s, the important post-Sharpeville era, the formation of MK and the turn to armed struggle; the majority of records are from the 1980s and early 1990s. Aside from historical records, Armstrong used pre-existing interviews from oral history projects and conducted her own interviews with persons familiar with or involved in the ANC's medical services for exiled members.

An Ambulance on Safari provides a significant analysis of the ANC's Health Department, demonstrating how healthcare has developed into an important tool for solidarity and resistance. Furthermore, by focusing on the history of healthcare for South Africans living in exile from the 1960s to the 1990s, a topic that has thus far received little attention and by analysing the complex relationships between politics, international diplomacy, and healthcare delivery in exile, An Ambulance on Safari fills a major gap in the historiography of the South Africa's health history and the ANC's medical sector. Although the book broadens our perspective on South Africa's past, it would have been helpful to learn more about how the ANC's Health Department dealt with the health challenges of those living in exile from the 1970s to 1990s, aside from those mentioned in the book, such as tuberculosis. Additionally, a more in-depth analysis of the traditional healing practices used by South Africans living in exile as well as the concerns of poverty and race among refugee communities would have enhanced the narrative.

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