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DOI: <https://dx.doi.org/10.38140/sjch.v47i1.7022>

ISSN 0258-2422 (Print)  
ISSN 2415-0509 (Online)  
Southern Journal for Contemporary History  
2022 47(2):120-125

## PUBLISHED:

31 December 2022

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## BOOK REVIEW

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Melissa Diane Armstrong, *An Ambulance on Safari: The ANC and the Making of a Health Department in Exile*, Montreal & Kingston, McGill-Queen's University Press, 2020. 344 pp. ISBN 978-0-2280-0330-4

There has been a growing body of literature on South Africans in exile. The literature has focused on the experiences of South Africans as combatants for the armed wings of liberation movements and also examined the everyday experiences of South African refugees across host countries in southern and central Africa. Very little has been written on aspects of health in exile, and Melissa Diane Armstrong's work, *An Ambulance on Safari: The ANC and the Making of a Health Department in Exile*, intends not only to fill this gap but also add a new dimension to the provision of health services in exile by examining the history of ANC's Health Department. Established in the 1970s and funded by United Nations-affiliated organisations such as the World Health Organisation, the ANC's traditional funders ranging from its communist allies and non-aligned nations to Nordic countries and regional governments that hosted South African refugees, the Health Department played an essential role in coordinating medical efforts in exile. Its position in providing care to exiles increased over time to the extent that by the 1980s, as the anti-apartheid struggle was in full swing, the Health Department had offices around the world and medical teams treating patients in Tanzania, Angola, Mozambique, Zambia, and Zimbabwe.

Central to Armstrong's main thesis is the role of the Health Department in the struggle against apartheid. She argues that the ANC's Health Department played a significant role in the

liberation of South Africa – diplomatically and in the everyday lives of the exiles (p. 7). Not only did the Health Department coordinate primary and secondary care of the exiles, but it also criticised the provision of racialised health services in apartheid South Africa, in the process delegitimising the apartheid health system. With the delegitimation of the apartheid health system, the Health Department presented itself as an alternative health service provider for South Africans and promoted itself as the legitimate provider of health care in post-apartheid South Africa. Armstrong argues that by positioning itself in this manner, the Health Department was also bolstering the ANC's image as a government in waiting (p. 202). Armstrong supports these arguments by carefully examining two interrelated broad themes that run through the book. These are first, an in-depth examination of the bureaucratic structure of the Health Department and patient care, and second, an examination of the personal nature of health and illness in exile.

Armstrong explores five broad sub-themes surrounding the provision of health services in exile. First, she analyses the early provision of medical care, which led to the formation of the Health Department. Despite having rudimentary medical structures in the early 1960s, the ANC had to provide medical services to its cadres in exile and build networks to train medical personnel. Armstrong notes that in 1962, the ANC and the newly independent nation of Tanzania had to clandestinely bring black nurses from South Africa to relieve the pending nursing staff shortages as white nurses left newly independent Tanzania in droves (p. 17). Over the years, the ANC would capitalise on good relations with host nations and other allies by having South African medical personnel trained and gaining experience by working in host nations' hospitals. Armstrong notes that such personnel would be central in the anti-apartheid struggle by, "generating anti-apartheid awareness among their fellow students and colleagues abroad and creating an important international network of solidarity that could be drawn later" (p. 20). Besides the above, the ANC was also responsible for providing medical care to its cadres at various camps dotted across host nations in central Africa. One such camp was Kongwa, and Armstrong goes into greater detail by using this camp as a point of entry to examine the provision of health care to uMkhonto we Sizwe (MK) cadres. Clinics within such camps could not adequately cover the cadres' health needs, and they relied on the host nations' hospitals for secondary care. Armstrong also highlights the disparities in the provision of care between leaders of the movement and the ordinary MK cadres, with the leaders accessing world-class care abroad. In contrast, others were treated with limited resources (p. 24). The year 1977 saw the establishment of the Health Department, funded by the Swedish government. Armstrong notes that the "establishment of an official department of health was a step towards

establishing political legitimacy” (p. 33) on the part of the ANC. Indeed, the bureaucratisation of the medical sector was aimed, amongst other things, to portray the ANC as a government in waiting.

Second, Armstrong investigates the cooperation between the Health Department and its South African hosts. She notes how the relationship between host nations and the ANC enabled the liberation movement to have an operational Health Department in exile (p. 45). The hospitality of countries such as Zambia and Tanzania allowed the ANC to build up health infrastructural projects, train students, and register its medical personnel to practice medicine. With this, the Health Department provided primary care to South Africans in exile, though they relied on host nations to provide secondary care. Furthermore, the provision of primary and secondary care was also shaped by the geographical location of the host nation. Armstrong notes that in Tanzania and Zambia, where there had been a long relationship with the ANC, cooperation included urban and rural components in health provision (p. 46). The independence of Zimbabwe in 1980 opened up new opportunities for medical collaboration within the region. In Zimbabwe, the ANC accessed high-quality medical care in government hospitals in Harare (pp. 63-65). The above three countries were relatively peaceful after gaining independence. This is in contrast to the former Portuguese colonies of Angola and Mozambique. After gaining independence, Mozambique and Angola descended into civil war. At the same time, they hosted refugees, thus putting further pressure on limited medical resources in both countries. The ANC Health Department struggled to provide medical care to South African refugees and MK cadres within the military zones of Angola and Mozambique. Armstrong states, “without medical attention, minor health issues escalated into major, acute health problems” (p. 66), and the department resorted to transporting patients either to Zambia or Tanzania. Besides examining the relationship between the Health Department and host nations, the author also examines how the department dealt with malaria and HIV/AIDS. Armstrong notes how the ANC’s approach to malaria placed more strain on regional health authorities as they had to work with limited resources. The situation was compounded by the emergence of a new strain of malaria. In addition, the Department of Health’s approach towards malaria informed how the ANC responded to HIV/AIDS. With HIV/AIDS, the ANC used “HIV/AIDS conferences hosted in southern Africa to assert its solidarity with the region as well as its ability to deal with the epidemic in the future” (p.47).

Third, Armstrong explores the Health Department’s role in the anti-apartheid movement from 1977 to the 1990s. She argues that the ANC Health Department was effective internationally in raising the plight of South Africans and contributed to the strength of the anti-apartheid movement

and, in the end, the ANC's victory against apartheid (p. 10). In fact, the Health Department portrayed itself as an alternative health institution for South Africans by exposing the inadequacies of the apartheid system in the provision of health services to the majority of South Africans. Furthermore, for the ANC to build its political legitimacy as the government in waiting, it had to establish state-like institutions in exile (p. 98). This was not only meant to serve its people in exile but also as a way to gain international funding. And the Health Department is an example of such an institution. One of the central issues the Health Department dealt with to delegitimise the apartheid health system was how it publicised apartheid family planning policies, especially the dangers of Depo-Provera on black South African women. The Health Department saw the forced sterilisation and the promotion of Depo-Provera among black women as the apartheid government's efforts to control and reduce black fertility. Armstrong notes the approach taken by the Health Department when it came to family planning, and Depo-Provera was meant to delegitimise the National Party government and promote the Health Department and, by extension, the ANC as the future government that would prioritise women's reproductive rights once in power (p. 120). For example, the prioritisation of women's reproductive rights in post-apartheid South Africa, where comprehensive abortion is available - can be traced to the Health Department's policy on reproductive rights.

Fourth, she highlights how infrastructure projects that included clinics and hospitals in Tanzania, Zambia, Angola, and Mozambique were examples of ANC's practice in state-building and statecraft. These infrastructural projects were financed by Non-Governmental Organisations and governments, particularly from Nordic countries. Thus, Armstrong examines the East African Health Team's efforts at providing health care to South Africans in exile by zooming in on the Kurazini and Mazumbi projects in Tanzania. She notes the uncoordinated nature of the East African Health team's efforts and how the "clinics operated in a reactive, near-crisis mode that was fiscally irresponsible, mentally difficult for staff, less effective for patients and put a strain on the relationship between the ANC and its international donors" (p. 126). She also examines personality clashes and interpersonal struggles within the Health Department. The department's problems, including personal issues within the department, no doubt affected the provision of medical care to South Africans in exile.

Fifth, Armstrong puts under scrutiny the mental health crisis in exile. Indeed, being in exile and the trauma of detention and torture would no doubt create a situation in which some South Africans in exile would suffer from Posttraumatic Disorder, schizophrenia, depression, and other mental health-related problems (p. 156). Such mental health problems led to *inter alia* violent

behaviours, drug and alcohol addiction, and suicides. Armstrong also notes how ANC detention centres contributed to mental health problems amongst the cadres (p.156). Armstrong underscores that examining how the Health Department responded to mental health crisis opens ways of examining the department's position in exile, its international connections, and its ability to provide medical care to South Africans in exile.

This is a worthy read that relies primarily on archival material. In constructing the narrative, Armstrong used the ANC archive housed at the University of Fort Hare. The archive has material such as health reports and patient reports, correspondences, speeches, and minutes to name a few. Of course, as with any archive, the ANC archive has its limits, including that the party has the power to limit access to material to researchers. Furthermore, there are fewer documents from the 1960s and 1970s in comparison to the 1980s onwards. Armstrong turned to interviews from the Bernstein Collection at the Mayibuye Centre at the University of the Western Cape to cover the gap left by the archival material and secondary interviews through the South African Democracy Education Trust. She also conducted her own interviews. All in all, interviews were only to supplement archival material.

*An Ambulance on Safari* does an excellent job of showing the provision of health services in exile, the establishment of the Health Department, and how it operated in exile. Even more, is how the book shows the exiled daily experiences with poor health systems in the region, the differences in access to health facilities between leaders and the ordinary cadres, the conflicts between officials within the Health Department, and cooperation between the host countries and organisations as well as the struggles the department faced in the provision of services. I did find her examination of contraception, especially Depo-Provera fascinating. This issue of contraception brings into sharp focus how women's bodies were viewed as political tools by nationalists. I was, however, disappointed by a lack of regional comparison on the matter. For example, in Zimbabwe, Depo-Provera was introduced to African women in the 1960s by a colonial state which wanted to deal with the so-called African population growth. This allowed nationalists to mobilise Africans against contraception as part of their struggle against colonial rule. In other words, birth control in South Africa, as in Zimbabwe from the 1960s onwards, played into nationalist rhetoric. In addition, I was also disappointed that the book ends in 1990 and not at least three or four years later. I understand having 1990 as a cut-off point, but it raises questions about what happened to the Health Department during the transition and how it operated during the transitional period. I am left wondering how those in charge of the Health Department further pushed the idea of the ANC as the right political

party for South Africans by publicising their health policies within South Africa during the time of transition.

Furthermore, considering the massive problem of mental health in exile, I also wonder what structures the ANC Health Department put on the ground (in South Africa at the time of transition) to help those exiled to be rehabilitated and prepare them for integration within South African society. I believe a postscript from 1990 to 1993/4 would have helped to analyse the Health Department during the transitional period. An examination of the transitional period would enable us to engage further with the idea that the Health Department's work enabled the ANC to portray itself as a government in waiting.

Despite the few criticisms raised above, this is a welcome contribution to the history of medical provision in exile and how the ANC used the arena of health provision as a platform to campaign against apartheid. Furthermore, I appreciate that Armstrong points to areas that still need further research to expand the examination of the intersection between medical provisions in exile, the anti-apartheid struggle, and health policy beyond 1994. The Health Department was in charge of creating a post-apartheid health policy, and as she argues, this policy was very much shaped by the exile experiences (p. 204). She notes that there is a need for further research on the continuities and discontinuities of health policy and the provision of medical services in exile and the post-apartheid era. I think an examination of the transitional period will be one of the ways of doing that. In addition, Armstrong also notes the need to examine the continuance of alliances formed in exile to provide medical services in post-apartheid South Africa.

Other areas include biographical studies of medical personnel who were central in establishing the Health Department in exile and occupied key positions in the post-apartheid National Health Services, as well as an examination of the epidemiology of various diseases during the period of repatriation in the 1990s. Besides the above, Armstrong also highlights the need to explore further the medical relationship between liberation movements and international organisations, mental health, and the issue of gender. The above suggestions thus give future historians an array of topics to work on and a starting point to pick from in the examination of health in exile and the legacies of the Health Department. I commend Armstrong for an excellent job in examining the making of a Health Department in exile and the provision of health services to South Africans beyond the borders of South Africa. This book is highly recommended for historians of medicine, health, and healing in South Africa and Southern Africa and those interested in the history of liberation movements in exile.