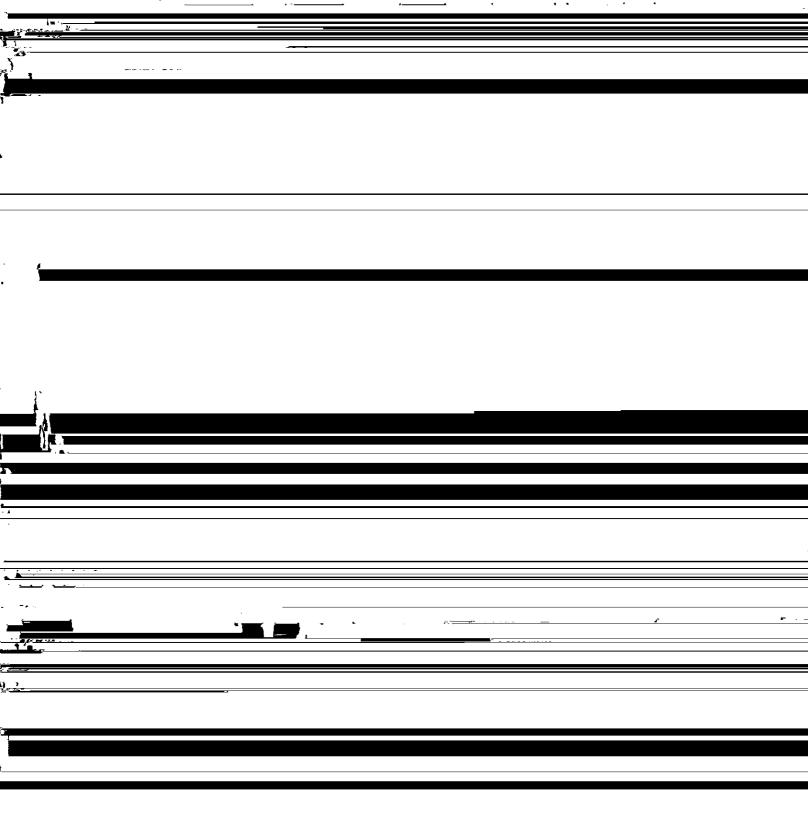
Program of Study

'Helping People Help Themselves':

Democracy, Development, and the Global Politics of Poverty in Canada, 1964-1976

My dissertation is a political, cultural, and intellectual history of the changing meaning of democracy in an emerging global world. I argue that development programs



	the ideas and on-the-ground activism of reformers and radicals into dialogue with the global and transnational context in which they actively and consciously rooted their
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	This project's key methodological and epistemological innovation is to discuss
	democracy and development on three different scales within a single frame. The focus of
	the local scale is on projects undertaken in Northern Alberta and Montreal by the
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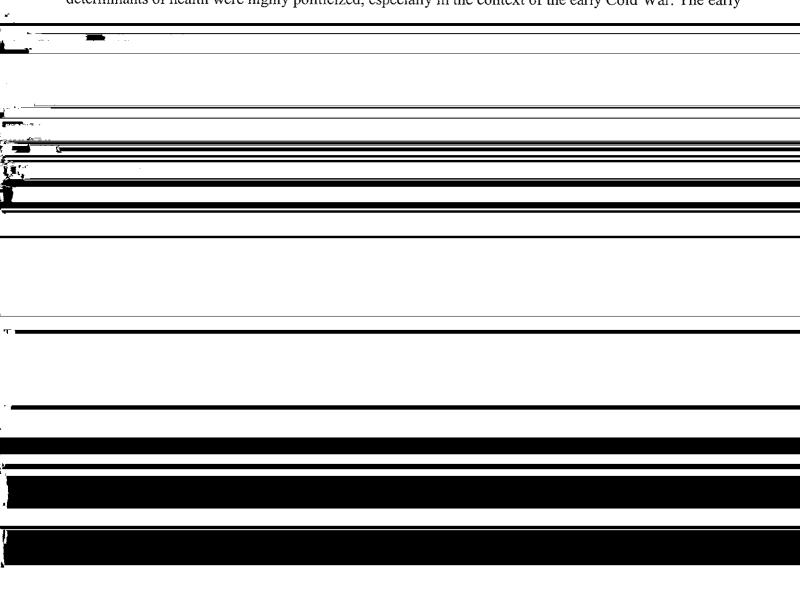
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	Program of Study
. <u>.</u>	In 1943, an editorial in the Journal of the National Medical Association proclaimed: "Medicine is
	always constructive. Its underlying concepts disregard geography, race, and creed. It is not too much to hope that in the post-war reconstruction the spirit of medicine may help lead science to lead mankind to higher ground." I propose to study how this sentiment guided medical practitioners as they informed
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discussions about the place of medicine in the world order emphasized how doctors could combat disease in the same way that Allied nations had fought their foes. Later, in the context of the establishment of the United Nations and its constituent organizations, the literature championed the formative role that the medical profession should play in promoting peace and goodwill around the world, especially in light of the perceived universality of medical compassion and ethics. I am interested in how far these early ideals were realized. To what degree were UNRRA and its successors able to incorporate the belief in the positive and formational influence of doctors, nurses, and public health experts into policy? What ideational or bureaucratic roadblocks were encountered on either side?

I will also investigate whether there was a sharing of ideas about the "medicalization of motherhood" between medical professionals and international policy makers. I am also interested in the relationship between domestic health and welfare policy, and the ideas that shaped humanitarian aid. My research will address questions including whether the rise of the welfare state in Canada and Britain affected their foreign policies with regard to supporting improved child and maternal welfare in a wider context. Additionally, did any of the doctors or medical journals in question take up particular positions on aspects of child and maternal health, like childrearing and infant feeding? Were these ideas also evident in public health internationally?

Attempts to improve the lives of women and children through attention to the physical and social determinants of health were highly politicized, especially in the context of the early Cold War. The early



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Research Contributions Refereed Publications gratte aus nome as

American Journal of Disaster Medicine 4, no. 6 (November-December 2009): 331-344.

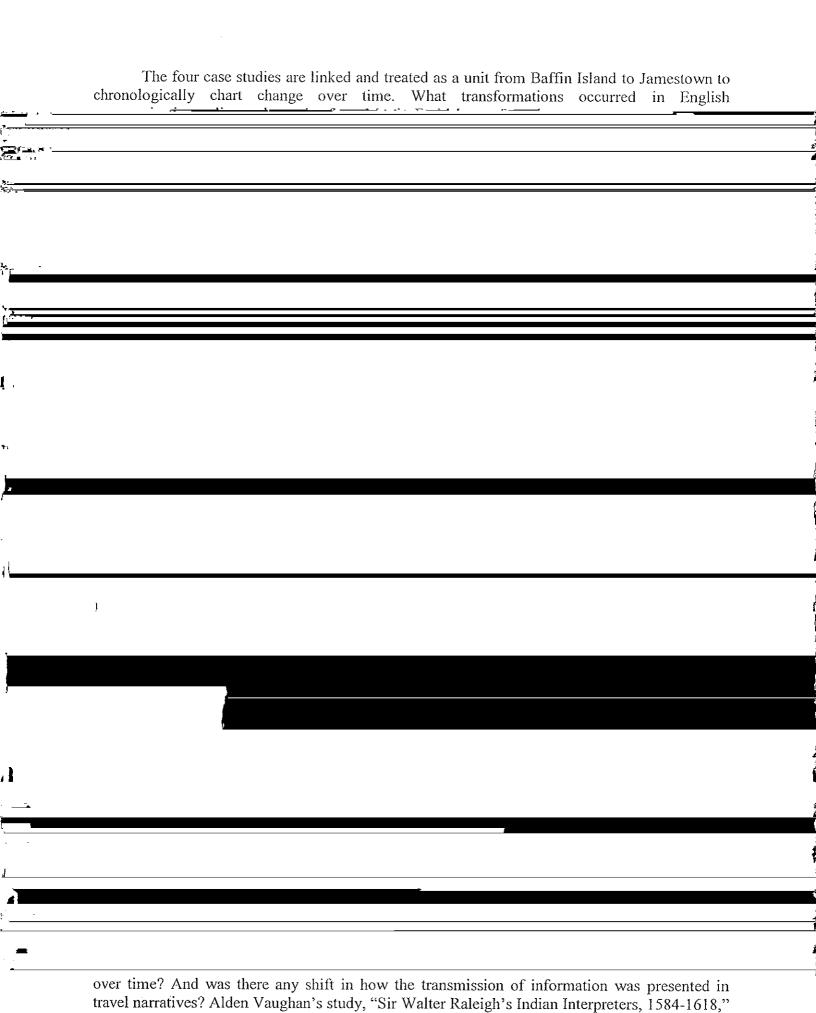
My contribution to this article was as a research assistant to Professor Joseph Scanlon, compiling and analyzing the relevant primary sources from St. Thomas, Ontario, and investigating the existing literature on voluntarism in Canadian history, specifically with regard to medical volunteers.

.....authors name...., "Dealing with Mass Death in Disasters and Pandemics: Some Key Differences but Many Similarities," in *Disaster Prevention and Management* Vol. 20 No. 1 (February 2011): IN PRESS, 30 pages.

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