

## Book Review

**The Spirit of Global Health: The World Health Organization and the “Spiritual Dimension” of Health, 1946–2021.** By Simon Peng-Keller, Fabian Winiger, and Raphael Rauch. New York: Oxford University Press, 2022. 230pp. \$100.00.

In *The Spirit of Global Health*, the authors narrate the fascinating, complex, and perhaps a bit inscrutable history of how the World Health Organization (WHO) has engaged the concept of “spirituality” over the past four decades. They do a marvelous job of unpacking the details of this history while at the same time conveying the daunting politicization of both the term spirituality and the institutional response to those advocating for its inclusion in global health planning strategies and documents.

The ten chapters trace this history chronologically, from early debates over the idea of a spiritual dimension in health, which began not long after the WHO’s constitution in 1946 posited the famous definition of health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” Should “spiritual” be a part of this definition? The authors note that in early discussions this idea was “mentioned casually,” but only by the 34th World Health Assembly in 1984 did a formal resolution acknowledge the importance of the “spiritual dimension” in formulating health policy and in “promoting more equitable health services worldwide” (p. 42).

What happens next makes for something akin to a detective story, with twists and turns too discrete to capture in a brief book review. Over the subsequent decades, major players—people and organizations—float in and out of the story. These include the WHO’s Eastern Mediterranean Office, their unit on traditional medicine, the developers of the popular WHO Quality of Life Measurement Instrument, and initiatives related to palliative care for HIV/AIDS, redefining health, and, more recently, addressing the COVID-19 pandemic. Each of these episodes is captured lucidly, with emphasis placed on the continuing debate over the pros and cons of acknowledging a spiritual dimension in health and healthcare, a decision that the authors constantly emphasize “is a political one” (p. 211). Yet the authors do more than document; they advocate. For example: “Commitment to the common good of global health itself draws on spiritual sources” (p. 218). This is a theme that one still hears today from some—but not all—among the WHO hierarchy.

Something that comes out clearly throughout the narrative is the WHO’s uncertainty and unease about the direction and desired endpoints for this larger initiative, if indeed that is the right word to use here. In their introduction, the authors note that “the ‘spiritual dimension’ of health may be better understood as a ‘ghost’ (or ‘spirit’) that has haunted—and continues to haunt—the WHO as it comes to terms with its constitutional mandate to advance health” (p. 1). Even after reading this excellent account, one is still unclear about the WHO’s motives, and perhaps the WHO itself was never clear about the how and why of their engagement with spirituality. Certainly, as noted, not everyone in power in the organization was or is all on the same page.

I have my own anecdote to add to this history. In the mid-2000s, I was contacted by an administrator in the WHO’s mental health branch in Geneva, Switzerland. He was interested in—and here I am a bit unclear as to the precise details, nor was I any clearer at the time—perhaps

commissioning a report from me or having me lead a working group or inviting me to contribute to or chair something that would make the case for “spirituality” in public health and the mission of the WHO. The administrator—I have forgotten his name—was candid in alerting me that this plan was quite politically charged within the organization. I expressed a strong interest; he said he would follow up soon. When I did not hear back, I tried to make contact and failed, and, to this day, I have never heard back from him or the WHO ever again.

This book has many strengths. The authors are commended for their deep dig into the history and clouded backstory of how the WHO has confronted the concept of spirituality. Indeed, they did an exceptional job of documentation. However, the book is written almost orthogonally to the work of religion and health researchers and the contemporary scholarly literature on religion and public health. Few citations of this work appear here—perhaps the authors are unaware of it. This work has gone on for decades, entirely separate from any WHO imprimatur, funding, or initiatives. Religion, and “spirituality” for that matter, have a long and interesting history in public health that extends beyond the work of the WHO and includes volumes of empirical research, community interventions, and policy statements. It might have been worthwhile to have seen this work summarized and reflected upon.

No matter, *The Spirit of Global Health* can take its place alongside Holman’s *Beholden*, Gunderson and Cochrane’s *Religion and the Health of the Public*, Oman’s *Why Religion and Spirituality Matter for Public Health*, and Idler’s *Religion as a Social Determinant of Public Health* as among the finest and most comprehensive English-language contributions to the literature on religious dimensions of global population health. The authors have crafted a fascinating and readable account of a piece of history that has been mostly overlooked. This excellent book is essential reading for anyone working in this area, and is highly recommended for medical historians, public health professionals, political scientists, and anyone else fascinated by how NGOs continue to negotiate the contentious and complex terrain at the intersection of medicine, religion, and global governance.

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