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Health Workforce and Infectious Disease Control in Post-World War II Okinawa

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Although Okinawa’s economy and infrastructure were in ruins after the U.S. invasion in 1945, infectious diseases such as malaria and diarrhea were quickly suppressed. In the years and decades following World War II, the islands’ people, health workers and health system leaders were able to effectively control tuberculosis and major parasitic diseases, all of which earlier had reached high levels. This presentation first analyzes how health workforce policies, decisions, programs, and effective leadership played key roles in those accomplishments, then suggests specific lessons learned that could be of use now, in the 21st Century, in Pacific countries. The analysis and lessons also consider, as an example of transfer of technology (with significant adaptation and innovation), the interplay between Okinawan health leaders and U.S. government representatives until 1972 when Okinawa once again became a Japanese prefecture after 27 years of post-war occupation by the U.S. The concluding section will briefly summarize points raised by health officials and staff of various Pacific Island countries who have reviewed several aspects of the research, with particular attention to the importance of mid-level health workers, the accelerated epidemiological transition that took place in Okinawa and the adjustments made to deal with those changes, and the implications for countries that, like Okinawa today, need to deal with increasingly complex mixtures of infectious and other diseases, plus new disease threats, aging populations, changing lifestyles, and health workforce shortages, changes and maldistribution, in a globalized context.

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