

DYNAMIS

*Acta Hispanica ad Medicinae Scientiarumque
Historiam Illustrandam*

Vol. 25

2005

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Abstract

This essay sketches the fundamental characteristics of state medicine and public health in Central America, with an emphasis on the 20th century. The picture is variable, given the distinct configurations of political regime, ethnic division, and social conflict, some of them quite extreme. A high degree of historical continuity is noted in the way these factors have

influenced the formation or deformation of public health and state medicine systems. Although external agents have had a strong presence in the health sector of most Central American countries, the paper argues that the historical forces that determine the nature of state medical systems in the isthmus are internal rather than external. Despite the historically weak development of state medicine in most countries, the question of public access to medicine has played an important and often highly charged role in the political life of most Central American countries.

The shaping of the Argentina health system: the case of Cordoba province, 1917-1926

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Abstract

This article describes the construction of the health system in Cordoba province between the end of the 19th century and the second half of the 1920s, placing particular emphasis in the national institutions and private charity associations created during this period. The hypothesis of this article is that the Cordoba health system was developed from the initiative of private charity associations and at the level of the nation or municipality, whereas the provincial state had a limited role. These developments occurred despite the hegemony of a liberal discourse that reinforced the role of the state as the main agent in public health care.

Health dictatorship, education and hygiene promotion in Revolutionary Mexico, 1917-1934

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Abstract

This work aims to study the so-called Mexican «health dictatorship», whose legal basis was established with the promulgation of the Political Constitution in 1917, but which maintained itself more as a discourse than as a practice. Instead of authoritarian politics, hygiene education and promotion were used as means of «regenerating» the Mexican people and leading the nation along the path of progress and civilization. This

paper intends to show the importance given to hygiene campaigns between 1917 and 1934 by the regime that emerged from the Mexican Revolution (1910-1917).

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Abstract

Historians have identified three stages in the government of Lázaro Cárdenas (1934-1940): consolidation of the power of Cárdenas; a nationalist and reformist policy (including agrarian reform and nationalisation of the railway system and oil industry); and withdrawal of the reforms due to the reaction of conservative sectors and imperialist countries. This article attempts to reveal the impact of each stage on the Mexican public health system and to demonstrate that the first systematic attempt to establish permanent rural health units was developed during this period.

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Abstract

In this article, the authors uncover the key role of photographic activity in the institutionalizing and validating of the *Instituto Oswaldo Cruz* (IOC) during the first half of the twentieth century. Photographic images not only increasingly accompanied their scientific work, but also became a central tool for promoting the activities of the IOC. The images included in this article reveal the importance of photographic activity in the institutional construction of the IOC.

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(1930-1945)

Abstract

The goal of this article is to describe and analyze the institutional and public health policy changes produced in Brazil during the government of Getúlio Vargas between 1930 and 1945. This article intends to cover a regrettable historiographical void regarding public health policies during this crucial period of 20th century Brazilian history. A key issue of this article is the relation established between the public health reforms and the political and ideological changes that occurred under the political regime installed in 1930, signalling both the transformations and the continuities with past regimes and the impact of these transformations in the contemporary Brazilian public health system.

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Abstract

The Special Public Health Service (*Servicio Especial de Salud Pública*-SESP) was created in 1942 as a bilateral agency between Brazil and the United States, thanks to an agreement signed by the Brazilian Ministry of Education and Health and the Institute for Inter-American Affairs. Although it was originally conceived by the Americans as a temporary agency with the military purposes of «cleaning the Amazon» and stimulating rubber production, the *SESP* contributed from its beginnings to an expansion of the presence of the Brazilian state. In the context of the «Cold War» and the «discovery of underdevelopment», the *SESP* reoriented its goals towards the formation of a district model of health care, based on the construction of a horizontal and permanent network of sanitary units. Despite its international constitution and its inspiration on an American model, the health policies of the *SESP* in Brazil never resulted from a one-way process. On the contrary, they were the result of a process of conflict, negotiation, resistance and adaptation. The combination of American influences and local responses shaped the history of the *SESP* in Brazil.

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Abstract

This article studies the impact on the Cuban public health system of the political, economical and social changes that occurred after the 1959 Revolution, and the main transformations that occurred in the Cuban public health system during the 1960s, such as the creation of a new public health ministry, the nationalization of the pharmaceutical industry, the massive emigration of health professionals, a reform of medical studies, the creation of a Medical Rural Service, the incorporation of socialist principles in public health and the development of primary health care. As this article intends to demonstrate, these measures guided Cuban public health reform towards the construction of a state monopolized National Health System in 1970.

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Abstract

This article compares public health policy reforms in Mexico during the 1920s and 1930s with subsequent reforms initiated in the 1980s. The attempts at decentralization in the 1920s-30s were supported by the Rockefeller Foundation, which was interested in the formation of local cooperative health units. In the 1980s, the aim of the Mexican government and international financial agencies, such as the Inter-American Development Bank, was to reduce public spending (as part of «structural adjustment» policies). One of the hypotheses of this article is that, in the end, the public health reforms were unable to overcome the limitations imposed by Mexico's political centralization and longstanding inequities in public spending. At the same time, one of the unforeseen achievements of these reforms was an increase in local capabilities to demand a better distribution of social services.

HEALTH IN PALESTINE AND THE MIDDLE EASTERN CONTEXT

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Abstract

This paper discusses the history of an 1845 Ottoman hospital founded by Bezm-i Alem, mother of the reigning sultan Abdülmecit I (reigned 1839-1856), embedded in the medical and political contexts of the Middle East in the nineteenth century. The main focus of this paper is the Ottoman discourse of modernization, which identified progress with modernization and westernization and included a belief in the positive character of progress, with a high degree of optimism regarding the success of the process. The Bezm-i Alem hospital illustrates the medical reality of the 19th century, reconstructed through Ottoman eyes rather than from the perspective of foreigners with their own agenda and biases. In many respects it continued previous medical traditions; other aspects reveal brand new developments in Ottoman medicine and hospital management. Ottoman medical reality was one of coexistence and rivalry: traditional conceptions of medicine and health were believed and practiced side-by-side with new western-like concepts and techniques.

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Abstract

Placing scientific knowledge onto a visual grid through malaria maps became a way of re-envisioning the landscape of Palestine during the period of British rule. Malaria maps were not only used by scientists to effect practical results in swamp drainage and in other efforts to decrease malaria morbidity, but they were also co-opted by political organizations and the Palestine Government as tools in a general debate over the development of Palestine. Furthermore, Zionist scientists and settlement officials used malaria surveys and maps to help determine future sites for Jewish settlement and to legitimate previous settlement operations. The anti-malaria programs that resulted from gathering this scientific knowledge had concrete ramifications for the topographical, ecological and demographic transformation of Palestine.

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Abstract

This paper briefly describes state health services in general and eye care in particular for Palestinian Arabs under the British Mandate (1917-1948). The paper will also discuss the environmental and cultural origins of the prevalence of eye diseases among Palestinian Arabs. The second part of the research describes in detail indigenous practices of traditional medicine for healing trachoma and other eye diseases, inflammations that were prevalent in Mandatory Palestine.

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Abstract

The aim of the paper is to explore the development of psychiatry in Palestine from two main perspectives ethnicity and immigration. In Palestine, the issues of immigration and psychiatry were highly complicated and had unique features. Thus, both psychiatrists and patients were immigrants who

belonged to the same ethnic group and shared the same ideology and objectives. The examination will uncover the social construction of mental diseases among Jewish immigrants in Palestine —patients and psychiatrists— and elucidate another layer in the development of Zionist Jewish society in Palestine up to the establishment of the State of Israel.

Health in interwar Palestine: Ethnic realities and international views

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Abstract

This paper analyses the developments of the separate Jewish and Arab health systems and health realities. It is found that the activities of charitable institutions, the attitude of the British mandate government and different traditions of medical policy all played a part in the emergence of two separate health worlds. The influx of foreign funding for private health institutions, in particular, played a prominent part in establishing different levels of healthcare for Jewish, Arab Christian and Arab Moslem communities. Thus, the medical sphere both reflected and interacted with wider political events.

Disease dynamics across political borders: The case of rabies in Israel and the surrounding countries

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Abstract

An eco-historical analysis facilitated the identification of the socio-political, demographical and environmental changes that have affected the distribution and abundance of vertebrates living in Israeli and Palestinian territories, their pathogens and the extent of human-animal contacts, all contributing to the risk of rabies, leading to three deaths in the late 90's. There are indications that the implementation of uncoordinated control strategies with a lack of an ecological perspective on one side of the border, such as the destruction of the main rabies reservoirs, led to the emergence of a more potent reservoir entering from the other side and the creation of an additional as yet unidentified reservoir. We analyze the lessons of historical mistakes, aiming at future regional control of the disease.

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Abstract

Transformations in the Spanish public discourse on the link between genes and disease are analysed by an attentive reading of the journalistic texts published in *El País* between 1976 and 2002, and the newspaper's model of popularisation is explored. Whereas in the seventies a social and complex vision of disease was favoured, by the nineties the genetic approach was predominant. *El País* supported this «geneticisation» and fostered an increasingly neutral and apolitical image of science.

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