

«Arm and brain»: Inclusion-exclusion dynamics related to medical professional within Spanish anarcho-syndicalism in the first third of the 20th century

Jorge Molero-Mesa (*) and Isabel Jiménez-Lucena ()**

(*) Centre d'Història de la Ciència. Unitat d'Història de la Medicina. Facultat de Medicina, Universitat Autònoma de Barcelona.

Jorge.Molero@uab.cat

(**) Unidad de Historia de la Medicina. Facultat de Medicina. Universidad de Málaga.

isajimenez@uma.es

Dynamis

[0211-9536] 2013; 33 (1): 19-41

Submitted: 30 June 2012

Accepted: 15 November 2012

CONTENTS: 1.—Inclusion and exclusion of technicians and intellectuals in anarcho-syndicalism. 2.—The Single Health Unions and the National Confederation of Labour. 3.—Inclusion-exclusion of physicians in anarcho-syndicalism. Strategies, resistances and limitations. 4.—Epilogue.

ABSTRACT: The aim of this paper is to analyze the dynamics within Spanish anarcho-syndicalism between manual workers and medical professionals who shared the anarchist ideology. The incorporation of technicians into the labour movement was a common feature in the Western world; however, while socialist organizations left health policies in the hands of physicians, anarchist Contents unions did not accept these technocratic principles, given that they did not consider intellectuals as the best suited to take decisions concerning the whole community. In this context, we can see how medical professionals developed diverse strategies to be accepted by anarcho-syndicalist militants, who in turn showed different levels of acceptance according to the distinct lines of thought within the union.

KEY WORDS: anarcho-syndicalism, medicine and the working class, Spain, 20th century, inclusion/exclusion, intellectual workers, science and ideology, technocracy.

«Nature makes no distinction between the wise and the ignorant, the refined and the uncouth. Everybody is the same, animals that eat and defecate. Intellectual and emotional development may constitute a personal advantage and become a common good, but should never establish privilege over everyone else»

Ricardo Mella. *El cerebro y el brazo*. Acción Libertaria. 1913; 8: 7.

1. Inclusion and exclusion of technicians and intellectuals in anarcho-syndicalism (*)

The consolidation in the early 20th century of the anarcho-syndicalist model depended upon the independence of workers' unions in their apolitical strategy and direct action against capital being guaranteed. In this period, in which a kind of syndicalism that would eventually predominate in Spanish libertarian circles was being configured, efforts were made to prevent intellectuals of any political or ideological persuasion from imposing a particular line of action which might go against manual workers' interests. Hence, at the congress held to constitute the *Confederación Regional de Sociedades de Resistencia-Solidaridad Obrera* (Regional Confederation of Societies of Workers' Resistance-Solidarity) in Barcelona in September 1908, figuring amongst the Confederation's statutes was an article which accepted the cooperation of «so-called intellectuals» in the Confederation but «without any intervention in its administration or management»¹.

This line of thought, as would later be confirmed at the founding congress of the *Confederación Nacional del Trabajo* (National Confederation of Labour, henceforth referred to as CNT) in 1910, was the result of a special interpretation of the axiom from the First International which stated that the «emancipation of the workers must be the task of the working class itself» and would become one of the

(*) Translated by Phil Grayston. This research forms part of the HAR2009-13389-C03-01 and HAR2009-13389-C03-03 projects, funded by the Ministerio de Economía y Competitividad.

1. Bar, Antonio. *La CNT en los años rojos: del sindicalismo revolucionario al anarcosindicalismo, 1910-1926*. Barcelona: Akal; 1981, p. 128-129. In the first manifesto of *Solidaridad Obrera*, in 1907, the affiliation of intellectuals was expressly called for. This radical policy shift can be explained by the reduced influence of socialists in the unions and the populist policies of Lerrouxism, which removed many Catalan workers from revolutionary syndicalism. For information on the differences with the socialists in this issue, see Jiménez-Lucena, Isabel. *Cambio político y alternativas sanitarias: El debate sanitario durante la Segunda República*. Málaga: Universidad de Málaga; 1995; Jiménez-Lucena, Isabel. *La cuestión del regeneracionismo sanitario y su debate durante la Segunda República: elementos de clase e ideología*. *Dynamis*. 1998; 18: 285-314.

bases of revolutionary syndicalism. The ruling on point eight of this conference was that the position of privilege enjoyed by intellectuals led them to act in a way that consolidated the capitalist system «and even try to use manual [workers] for those elevations which make life agreeable and pleasant for them»². The contribution to the debate by José Negre (1875-1939), Secretary General of the CNT until 1914, reflected the opinion of a broad sector of anarcho-syndicalism opposed to the unionisation of intellectuals:

«intellectuals may be considered to be workers, but as long as they remain outside the unions, not inside them, for as interests are not the same they cannot go together either, without going so far as to repudiate them, as we can use their intellectual skills to take what might be of use to us, but always rejecting their interference in our affairs»³.

Nonetheless, there were a large number of intellectual workers who, although organically alienated from the unions, were able to develop their anarchist ideals in the so-called affinity groups or through their participation in libertarian cultural societies⁴. The possibility that these kindred organisations might intervene directly in the unions was discussed at the *Congreso de la Confederación Regional del Trabajo de Cataluña* (Congress of the Regional Confederation of Labour of Catalonia, henceforth referred to as CRTC), held in Barcelona in June 1918 (Sans Congress). In line with union principles and maintaining the position laid down in previous congresses, the final resolution was to reject the direct intervention of «purely ideological entities» on the grounds that such associations did not belong to «professions or trades for resistance against capital». Their role, however, was welcome as long as they worked «outside the unions for the emancipation of the productive class»⁵.

2. Bar, n. 1, p. 547.

3. Bar, n. 1, p. 183.

4. Navarro Navarro, Javier. *A la revolución por la cultura: prácticas culturales y sociabilidad libertarias en el País Valenciano (1931-1939)*. València: Universitat de València; 2004. For further information on the role of intellectuals in non-syndicalist anarchism, see Girón, Álvaro. *En la mesa con Darwin. Evolución y revolución en el movimiento libertario en España (1869-1910)*. Madrid: CSIC; 2005. Díez, Xavier. *El anarquismo individualista en España (1923-1938)*. Girona: Virus ed.; 2007.

5. Bar, n. 1, p. 382.

This decision created a peculiar situation for teachers in rationalist schools, most of which had been set up by the same unions who rejected their affiliation. In response, an addition to the previous resolution approved the inclusion in the Catalan Confederation of these professionals on the grounds that they were «a necessary element in the struggle for emancipation»⁶. From this point on, a radical shift in favour of the unionisation of intellectuals can be seen, supported in the pages of *Solidaridad Obrera*⁷, which would culminate in October 1919 in the creation of the *Sindicato Único de Profesiones Liberales* (Single Union of Liberal Professions), attached to the Local Federation of Barcelona.

This strategic u-turn was confirmed at national level at the second CNT Congress held two months later in Madrid (December, 1919). With a clear post-revolutionary aim in mind, one of the measures agreed was to unionise all workers, by organizing «quickly the Unions of distribution and technical and non-manual professions»⁸.

We may observe in this strategy an exclusive inclusion process⁹ which moulded the participation of intellectual workers to fit the needs of anarcho-sindicalism at that time. The move to unionise specialists and other intellectuals was in contradiction with the organic reform that had just been made at the Sans Congress and would later extend to the whole CNT, and which involved grouping together the various trade unions into branch or industry unions. This grouping together of intellectuals in a single union was thought to prevent the constantly feared risk of manual workers becoming dominated by intellectuals if the latter were to join the individual union corresponding to their area of specialisation. Ever since the founding congress of the CNT, moreover, the possibility had been considered of expelling from the Confederation

6. Bar, n. 1, p. 383.

7. Trujillo, M. Orientaciones para el movimiento obrero en la actualidad. *Solidaridad Obrera*. 5 Jan 1919. The success of the Soviet Revolution and the absolute intransigence of employers helped push the CNT towards short-term revolutionary solutions, which made necessary the help of specialists in the unions capable of maintaining a possible libertarian regime. Bar, n. 1, p. 546.

8. Bar, n. 1, p. 546.

9. Bohn, Cornelia. Inclusion and exclusion: Theories and findings. From exclusion from the community to including exclusion. In: Gestrich, A.; Raphael, L.; Uerlings, H., eds. *Strangers and poor people. Changing patterns of inclusion and exclusion in Europe and the Mediterranean world from Classical antiquity to the present day*. Frankfurt: Peter Lang; 2009, p. 35-53.

those workers who «because of their work» might do direct harm to union organisation. In consequence, when the Union of Liberal Professions was founded in Barcelona, the editors of the newspaper *La Publicidad*, from which Andreu Nin (1892-1937) had recently been fired, were refused affiliation, as were members of the body of armed citizens known as the 'somatén', who were the *bête noire* of anarcho-sindicalism together with the gunmen of the free unions¹⁰.

After the parenthesis forced upon anarcho-sindicalism by the Primo de Rivera dictatorship, the debate over intellectuals returned to the CNT with renewed intensity when the organisation was legalized in the spring of 1930. During the dictatorship, several intellectuals had continued to collaborate with those anarchist-minded publications which managed to keep going, while a few took part in subversive militancy in the outlawed CNT¹¹. With the legalisation of the Confederation in 1930, the number of intellectual workers joining it rose slowly but not significantly. In early June 1931, however, the *Sindicato de Obreros Intelectuales y Profesiones Liberales de Barcelona* (Union of Intellectual Workers and Liberal Professions of Barcelona) was created, with the immediate aim of allowing their participation in the extraordinary congress which the CNT was to organise in Madrid a few days later. When the congress was held, not only was the inclusion of intellectuals confirmed, but they were recognised for the first time as being necessary to make a future libertarian society work and even essential to the preparation of the revolution¹².

This union, referred to in the language of the Confederation as «intellectuals», was encouraged by the results of the extraordinary congress, and published several articles in *Solidaridad Obrera* which only helped increase the tensions between the different factions operating within the CNT. As well as publishing a rather unfortunate letter to the Confederation's newspaper requesting greater prominence because of manual workers' poor writing skills¹³, they stated their intention to capture «that whole

10. Las profesiones liberales. La Correspondencia de España. 16 Oct 1919.

11. Christie, Stuart. *Nosotros los anarquistas: Un estudio de la Federación Anarquista Ibérica (FAI)*. Valencia: Universitat de València; 2010, p. 65.

12. Talk on the CNT's position regarding the Constituent Cortes. *Solidaridad Obrera*. 5 Jul 1931. For more information on the functions which specialists would perform in the unions for preparing the revolution, see: *Los técnicos en nuestra organización*. *Solidaridad Obrera*. 4 Jul 1931.

13. Tarrega, Enrique. A los delegados del pleno regional. Los intelectuales piden actuar. *Solidaridad Obrera*. 13 Oct 1931. The commotion was such that the *Junta del Sindicato de Intelectuales*

cloud of intellectuals hovering around the CNT, who needed a membership card to be entitled to show their sympathy for our organisation». They even went so far as to offer affiliation to all intellectuals regardless of their residence «as this was the only Union of its type existing in Spain, a circumstance which therefore made it national in character»¹⁴.

The fear that the Union of Intellectuals would become an open door beyond the control of manual workers, because of the organisational self-management granted to it, led the more radical sectors to opt for so-called «class synthesis»¹⁵ and defend a new strategy of exclusive inclusion which would now integrate intellectuals and specialists in their respective industry unions.

The *Federación Nacional de Sindicatos Únicos de las Industrias del Gas, Agua y Electricidad* (National Federation of Single Unions of the Gas, Water and Electricity Industries) immediately issued a manifesto calling for the dissolution of the Union of Intellectuals and the integration of its members in the industry unions which corresponded to them, before «they might start believing themselves to be morally invested with a pedagogic and guiding, and therefore governing, mission in the confederation's constructive concerns »¹⁶. The *Junta del Sindicato de Intelectuales* (The Committee of the Union of Intellectuals) defended itself by stating that they did not live «defiantly or anti-federally» and that it was precisely in the industry unions where they would indeed find the right conditions in which «to take advantage of their superior education and try to dominate, becoming 'caudillos' or leaders»¹⁷.

The old fear re-surfaced that specific anarchists within the CNT might come to dominate, a process termed «*dirigism*», this time accompanied by the suspicion that groups of intellectuals might evolve into radical left-wing political organisations or even fascist groups, where many left-leaning intellectuals had ended up. A group of intellectuals belonging to the *Sindicato de Sanidad* (Healthcare Union) had recently been expelled from

(Committee of the Union of Intellectuals) moved quickly to deny authorship of the letter. La Junta. Aclaración. Solidaridad Obrera. 23 Oct 1931.

14. El Comité. Los intelectuales responden. Solidaridad Obrera. 14 Jun 1932.

15. This was the term given to the union between manual and intellectual workers to increase the effectiveness of the fight against capital. The necessary balance in each person between manual and intellectual activity was also defended. Both aims were the guiding principles of the journal *Brazo y cerebro*, founded in 1932 as the organ of the unions in the region of Terrassa.

16. Los intelectuales y la CNT. Solidaridad Obrera. 29 Jun 1932.

17. La Junta. Los intelectuales y la CNT. Solidaridad Obrera. 17 Jul 1932.

the Madrid Federation for setting up a parallel organisation called «Technique and Work» (*Tecnica y Trabajo*, TECTRA), which displayed shades of fascism and Masonic ritualism¹⁸. Elsewhere, recognised communists belonging to the *Bloque Obrero y Campesino* (Workers and Peasants' Bloc) and the *Extrema Izquierda Federal* party (Extreme Federal Left), organisations whose strategy was to attract the anarcho-syndicalist masses, were active in the *Sindicato de Intelectuales de Barcelona* (Union of Intellectuals of Barcelona)¹⁹.

The controversy was not cleared up in the period studied²⁰. As a result of their rejection by workers, the intellectuals adopted a series of strategies which might be definitively acceptable to anarcho-syndicalism, and which will be explored in the following sections, with the spotlight on the medical profession. Constantly questioned, intellectuals were in a permanent minority to manual workers. Given the CNT's internal structure, it is difficult to know the exact number and origin of the intellectuals affiliated in this body. Despite the fact that there was no other specific union outside Barcelona, it could admit intellectuals from other places. As manual workers' unions could also accept these workers as members, it is to be hoped that local studies might shed light on this question²¹.

-
18. Federación Local de Sindicatos Únicos de Madrid. *La Libertad*. 6 Feb 1932. Urrutia, Federico de. Las divergencias entra la FAI y la CNT ¿Qué es la «Tectra»? *Heraldo de Madrid*. 23 Feb 1932.
 19. Expelled in 1932 from the *Sindicato de Intelectuales* were the teacher Víctor Colomer i Nadal (1896-1960) and the military officer José García Miranda (b. 1897), both of whom were «*Bloque Obrero y Campesino* candidates», as well as the doctor Diego Ruiz Rodríguez (1881-1959) for being a «candidate for *Extrema Izquierda Federal*». *Sindicato de Obreros Intelectuales. Solidaridad Obrera*. 16 Nov 1932.
 20. For further information of this issue during the Civil War see: Fernández Soria, Juan Manuel. *Cultura y Libertad. La educación en las Juventudes Libertarias (1936-1939)*. Valencia: Universidad de Valencia; 1996, p. 189-205.
 21. In 1919, the *Sindicato de Profesiones Liberales de Barcelona* had 150 members in total, which amounted to a mere 0.18% of the total number of affiliated members of the CRTC. In April 1931, now as the *Sindicato de Obreros Intelectuales y Profesiones Liberales*, the number rose to 200 but, given that workers were joining in much greater numbers that year, the percentage actually fell to 0.07%. In April 1932, the 300 affiliated members represented 0.13% of the total membership. In March 1933, this percentage rose to 0.15% (315 affiliated members). In 1936, the number of intellectuals attached to the CRTC fell to 230, or 0.17% of the membership. For these figures, see: *El Congreso Confederado de la Comedia. Revista de Trabajo*. 1975; 49-50: 205-506; Vega, Eulalia. *Entre revolució i reforma. La CNT a Catalunya (1930-1936)*. Lleida: Pagès; 2004, p. 140.

2. The Single Health Unions and the National Confederation of Labour

The regular presence of male and female doctors in European anarchist movements, and in the labour movement in general, has traditionally been justified by the supposed «social conscience» that some of these professionals acquired through having witnessed directly and at first hand the impact that the industrial revolution and the rise of capitalism was having on workers' health²². The «medical class» in general, however, was no better regarded than any of the other groups of specialists or intellectuals that, for one reason or another, sought anarcho-syndicalist affiliation. The forever controversial issue of admittance depended more on doctors' revolutionary activism within the organisation than on their professional skills, which eliminated any possible advantage they might have over a manual worker inside the union. Likewise, just being militant specialists did not release doctors from the ideological censure of anarcho-syndicalist publications²³.

Together with the rejection of technocratic principles, the peculiarities of the anarcho-syndicalist struggle based on direct action and apoliticism left medical professionals without any possibility of gaining political leadership or any chance of using their expertise to negotiate in circles of power, gain social influence, or rub shoulders with power elites. Those who defended the unionisation of specialists believed that if any of them attempted to use the CNT as a platform for their «personal advancement», they would fail miserably «because of the lack of atmosphere», and that there would also be ample opportunity to «make them see that they had chosen the wrong path; by taking the UGT route, they had taken that of the CNT»²⁴. Indeed, the case of the socialist doctors who, during the last years

22. Martí Boscà, José Vicente. La sanidad libertaria en España. *Solidaridad Obrera*. [Centenario de la CNT] Feb 2010: 52.

23. In March 1932, the editorial office of *Solidaridad Obrera* rejected the publication of an article by Augusto M. Alcrudo (1892-1936), warning him that «we cannot follow you down that path». Redacción. *Solidaridad Obrera*. 15 Mar 1932. Even Isaac Puente (1896-1936) was the object of occasional reproval, see Jiménez Lucena, Isabel. Asistencia sanitaria de, por y para los trabajadores: sanidad y anarquismo durante la Segunda República. In: Martí, J.V.; Rey, A., eds. *Actas del I Simposium Félix Martí Ibáñez: medicina, historia e ideología*. Valencia: Generalitat Valenciana; 2004, p. 141-159.

24. Urbinaga, Juan de. Hacia la sindicación de los técnicos. *Solidaridad Obrera*. 13 Oct 1931.

of the Primo de Rivera dictatorship, had taken a leading role in the shaping of the respective health policies of the *Unión General de Trabajadores* (UGT- General Union of Workers) and the *Partido Socialista Obrero Español* (PSOE- Spanish Socialist Workers' Party) was very different²⁵. They rose to prominence in the Republican Parliament, occasionally forming pressure groups with other non-socialist deputies to defend their «class»²⁶.

In this period, corporate struggles occupied most doctors who aspired to greater power in the liberal system and the establishment of a medical technocracy in the bosom of the State²⁷. In this sense, among the campaigns led by different groups within predominant medical circles, we may highlight those which were carried out to create a Health Ministry in Spain, and another by doctors in the public health system to become State civil servants²⁸. In this course of action, we should point to the mobilisations by doctors who took part in the privately-led anti-tuberculosis campaign to get the State to take full responsibility for it, and to integrate them in the corresponding organisational structure²⁹.

In any case, the CNT never managed to attract doctors in significant numbers in the period studied, even though from 1930 on various health unions were set up in several provincial capitals³⁰. To coordinate their activities, the *Sindicato Único de Sanidad de Madrid* (Single Healthcare Union of Madrid) convened a national congress (Madrid, November 8 to 14, 1931) to create a *Federación de Sindicatos Únicos de Sanidad* (Federation of Single Healthcare Unions) a few months after the CNT extraordinary congress

25. Molero-Mesa, Jorge. Clase obrera, Medicina y Estado en la España del Siglo XX. Bases socio-políticas de las campañas antituberculosas entre 1889 y 1950. In: Castellanos, Jesús et al., eds. La medicina en el siglo XX. Estudios Históricos sobre Medicina, Sociedad y Estado. Málaga: SEHM; 1998, p. 221-228.

26. Jiménez-Lucena, 1998, n. 1.

27. Jiménez-Lucena, Isabel. El Estado como aliado. Los médicos y el proceso de estatalización de los servicios sanitarios en la Segunda República española. *Asclepio*. 1997; 14: 193-216.

28. Huertas, Rafael. Organización sanitaria y crisis social en España. La discusión sobre el modelo de servicios sanitarios públicos en el primer tercio del siglo XX. Madrid: Fundación de Investigaciones Marxistas; 1994.

29. Molero-Mesa, Jorge. Historia Social de la Tuberculosis en España (1889-1936). Granada: Universidad de Granada; 1989.

30. In Catalonia, we should remark on the existence, from 1920, of the *Sindicat de Metges de Catalunya* (Physicians Union of Catalonia). Unique in Europe, this organisation provided corporate affiliation to most Catalan doctors, independently of official schools.

had included this level in its organisational structure. Although the announcement of the congress requested the attendance of «the greatest number of delegates that each union could afford», only fifteen turned up, representing the unions of Madrid, Zaragoza, Álava and Teruel. The Santiago de Compostela delegation, who had announced they would attend, failed to show³¹, and the adhesions of Seville and Huelva were accepted³². Members of the Barcelona union, the biggest at the time, failed to turn up in significant numbers³³.

The extraordinary congress of the CNT held a few months earlier had only been attended by delegates of the *Sindicato de Sanidad de Madrid* (Healthcare Union of Madrid) (195 affiliated members), Zaragoza (10) and Barcelona (1,460), the last union being the only one not to include a doctor among its delegates³⁴. By the time of the 1936 CNT congress, some of these unions had disappeared. Only delegations from Zaragoza (50 members), Madrid (95) and the *Sindicato de Sanidad Marítima de La Coruña* (Maritime Health Union of La Coruña) (284) attended³⁵. In the announcement of its constitution made by the *Sindicato de Sanidad de Madrid* in October 1930, we may see the list of candidates to join the union and the reasons they had for doing so:

«The doctor, exploited and trampled on by the Insurance Companies, the Medical Assistance Associations, the shameful *caciquismo* [dominance by interested, powerful agents] and even by fellow professionals who enjoy favourable treatment. The medical assistant, harassed and badly paid. The male nurse and female hospital assistant, treated worse than any other worker. The pharmacist, relegated to the status of vulgar

-
31. The Union in Santiago de Compostela was primarily formed at that momento by students of medicine. Martí Boscà, José Vicente. Isaac Puente, el médico que quiso curar al pueblo. In: Fernández de Mendiola, Francisco, ed. Isaac Puente. El médico anarquista. Tafalla: Txalaparta; 2007, p. 113-146.
 32. The *Sindicato Único de Sanidad de Huelva* (Single Healthcare Union of Huelva) was then being organised by several medical assistants who were keen to join the CNT. Blanca, Benito. Desde Huelva. Los practicantes. Solidaridad Obrera. 7 Jun 1931. It should be noted that in some places where the number of health workers was too low, affiliation to the *Sindicato de Oficios Varios* (Union of Miscellaneous Trades) or the local *Sindicato Único de Trabajadores* (Single Union of Workers) was allowed.
 33. Congreso de Sindicatos Únicos de Sanidad. Solidaridad Obrera. 22 Nov 1931.
 34. Assistents al Tercer Congr es Confederado de la CNT. [cited 10 Jun 2012]. Available at: <http://www.veuobrera.org/00finest/931assis.htm>. Among the unions delegates were: from Madrid, Antonio Gasca ana Mart n (1907-1933), a doctor working for *Beneficencia Provincial* (Madrid's Provincial Charity), Nicasio  lvarez de Sotomayor (1900-1936), a doctor, and Francisco Trigo Dom nguez, a chemical specialist; from Zaragoza, Augusto Mois s Alcrudo, a doctor; and from Barcelona, Juan Antonio Lorenzo Benito (1878-1938), a qualified medical assistant.
 35. Calero, Juan Pablo. V speras de la revoluci n. El congreso de la CNT (1936). Germinal. 2009; (7): 97-132.l

shop-keeper. The pharmacy assistant, victim of greedy commercialism. The dental surgeon, abandoned to a fratricidal struggle. The veterinary surgeon, stripped of the profession's healthcare role. Prosthetists and disinfectors, suffering the consequences of the confusion in their profession»³⁶.

As, however, the members of health unions represented at these congresses were mostly medical assistants, «nurses» (men and women), all kinds of health assistants and doctors' subordinates in clinics and dispensaries, they almost inevitably met the suspicion and mistrust of fellow union members from hierarchically-dominated social groups. Suspicions about the potential «dirigism» by specialists within the union must have intensified at the founding congress of the *Federación de Sindicatos de Sanidad* (Federation of Healthcare Unions). Here, two professional groups were formed inside these unions, based on workers' levels of training and with the distinction between qualified and unqualified professionals³⁷, something unheard of in the bosom of the CNT and which was in some ways reminiscent of the existing hierarchical division in the health system³⁸. It was not for nothing that one of the conceptions of anarcho-syndicalism was the differentiation between training and professional category, the latter being one of the issues which most divided workers. According to an opinion article published in *Solidaridad Obrera* in 1931, professional category was «simply, an expression of the capitalist organisation of production» in which «it is not always those most capable or decent who run things at work»; their

36. A los trabajadores del ramo de la sanidad. *Solidaridad Obrera*. 8 Oct 1930.

37. «Belonging to the group of qualified professionals will be doctors, pharmacists, veterinary surgeons, assistants in Medicine, midwives, dental surgeons, physical culture teachers and qualified nurses. Affiliated to the second group will be prosthetists, pharmacy assistants, unqualified nurses, porters in hospitals, clinics and laboratories or biological or clinical institutes, stretcher-bearers, masseurs, chiropodists and, as there is a *Sindicato de Aseo e Higiene* (Cleaning and Hygiene Union), the right of hairdressers to self-determination will be respected». Congreso de Sindicatos Únicos de Sanidad. *Solidaridad Obrera*. 22 Nov 1931.

38. Behind this separation also lay the fierce professional struggle of dental surgeons, matrons and qualified assistants against a long list of new unqualified health professionals, who they accused of professional encroachment. All this set against the background of the frequent corporate struggles among health professionals from the mid-19th century, and which were particularly fierce at the time. Montesinos Vicente, Fernando. *Practicantes, matronas y cirujanos dentistas en la España contemporánea (1855-1932)*. Girona: Universitat de Girona; 2011.

authority placed professional «categories» on the side of capitalism against the rest of the workers³⁹.

After the November 1931 congress, the health unions were hampered by internal struggles, among both the health professionals who constituted their membership and the anarcho-syndicalist tendencies which disagreed about the strategy to follow on the path to social revolution. The *Federación de Sindicatos de Sanidad (Federation of Healthcare Unions)* failed, and never gathered again. It should be remembered that the most radical sectors of anarcho-syndicalism were opposed to the existence of these centralising bodies, which they regarded as being closer to Marxist power-struggle strategies than anarchist tactics and principles, in which the autonomy of local unions was fundamental.

Indeed, coinciding with the loss of influence of the reformist sector within the CNT, problems grew in the two main health unions. In Madrid, as we saw in the previous section, a group of intellectuals headed by the doctors Nicasio Álvarez de Sotomayor and Miguel Palacios Martínez (1895-1979) was expelled from the *Sindicato de Sanidad (Healthcare Union)* in February 1932. The reason was that they had formed the organisation TECTRA outside the union⁴⁰. The Madrid press interpreted these expulsions as the result of divergences between the FAI and the CNT⁴¹. The truth is that Nicasio Álvarez would end up as an active member of the *Juventudes de Ofensiva Nacional Sindicalista (Youth of the National Syndicalist Offensive)*, and helped to create the *Central Obrera Nacional-Sindicalista (National Syndicalist Workers' Central)*⁴². Medical professionals were always in a very small minority in the membership of the Madrid union, as Juan Morata Cantón, a doctor and one of its founders, bore witness to (1899-1994)⁴³.

The case of Barcelona was made special by the sharp contrast created by, on the one hand, the anarcho-syndicalist strength and tradition in Catalonia and, on the other, the presence of a corporatist union which catered

39. Las categorías profesionales. *Solidaridad Obrera*. 28 Jun 1931.

40. *Federación*, n. 18. Nicasio Álvarez was Secretary of the *Federación Local de Sindicatos Únicos de Madrid (Local Federation of Single Unions of Madrid)*. Miguel Palacios was a Captain Doctor, which might have influenced the view that this group could represent a risk for CNT interests.

41. *Urrutia*, n. 18.

42. Rodríguez Arroyo, J. Carlos. Nicasio Álvarez de Sotomayor Gordillo y Aguilar «Ángel Aguilar»: del anarcosindicalismo al nacional-sindicalismo. *Revista de Estudios Extremeños*. 2010; 56 (3): 1257-1308.

43. Cited by Martí Boscà, n. 31, p. 144.

for most Catalan doctors. It is no coincidence, therefore, that the first call for the creation of a Healthcare Union attached to the CNT in Barcelona should come from a medical assistant, Juan Antonio Lorenzo Benito, in an article titled «The proletarianisation of the doctor»⁴⁴. The journal which published this article, *Unión Sanitaria Nacional*, was owned by a doctor called Alfredo Royo Lloris, and had been set up in 1928 to provide a voice for doctors employed as medical officer in municipal health services, a group which was heavily involved in trade unionist activity. If the aim of this campaign was to attract doctors, it failed. According to the account published in *Solidaridad Obrera*, the assembly at which the union was founded in December 1930 had «a very poor attendance» and «most of the audience (...) were the nice women who (...) enlivened the hours that we spent with them, which slipped by painlessly». Juan Antonio Benito was elected union president and Alfredo Royo, «accountant»⁴⁵. The section for nurses, who were opposed to the work regime imposed on them in the hospitals of Barcelona, only survived a few months in the union⁴⁶. The union was dissolved in September 1932, when this section was integrated in the *Sindicato de Productos Químicos* (Chemical Products Union)⁴⁷, where the nurses stayed until after the outbreak of the Civil War and the creation of the *Sindicato de Sanidad* (Healthcare union)⁴⁸.

The failure of the Healthcare union reveals the complexity in the dynamics of inclusion- exclusion which were developing in the heart of anarcho-syndicalism among manual workers and intellectuals. In addition to the usual misgivings and mistrust of manual workers with regard to intellectuals and the traditional professional hierarchy which was a feature of the health sector, there was the individualistic anarchist ideology of many doctors close to the CNT, convinced that the support of the great body of workers among its members was vital to the

-
44. Lorenzo Benito, J. La proletarianización del médico. *Unión Sanitaria Nacional*, Oct 1930: 2-4.
 45. Asamblea del Sindicato de Sanidad e Higiene. *Solidaridad Obrera*. 11 Dic 1930. The other posts were: Secretary: Nieves Berges and Treasurer: Pedro Sáez López.
 46. Un enfermero. Crítica situación de los enfermeros en los hospitales de Barcelona. *Solidaridad Obrera*. 5 Abr 1931. Monier, Daniel ¿Qué pasa en la Quinta de Salud «La Alianza»? *Solidaridad Obrera*. 17 Abril 1932. Lo que pasa en el Hospital de San Pablo. *Solidaridad Obrera*. 18 Ene 1935.
 47. Llamamiento a nuestros compañeros de Sanidad. *Solidaridad Obrera*. 25 Sep 1932.
 48. We are unaware of what happened to the other members, but we may reasonably suspect, as we have seen previously, the negative influence of the professional corporativism of medical assistants, matrons and dental surgeons. Montesinos Vicente, n. 38.

construction of a libertarian future. This phenomenon explains the strategy adopted by anarchist doctors, and in general by all the intellectuals, to gain full acceptance in this union movement and to enjoy direct participation in it, rather than remaining forever in the cultural margins of the revolutionary movement⁴⁹. The arguments put forward by the *Junta del Sindicato de Intelectuales* (The Committee of the Union of Intellectuals) for not joining their industry unions, as manual unionists were calling for, were based on the very failure of the healthcare unions to attract medical professionals. In the opinion of the committee (the intellectuals), they found themselves «disoriented» in the manual trade union because of their « [cultural] heterogeneity », whereas in the *Sindicato de Intelectuales* (Intellectuals' Union),

«being gathered in it numerous people from different professions, but of similar educational and cultural backgrounds, discussion springs spontaneously, and ideas are refined and strengthened, while those who come to us full of preconceptions born of their former gentrified activities, find in our Union the right pedagogy to plant in their breasts the seeds of a greater comradeship towards our manual brothers»⁵⁰.

The strategy was completed with the demonstration of their communion with anarchist principles based on apoliticism and direct action, referring to the example of «colleagues who were quite well-known in all union circles»⁵¹ in order that the «the fear that we could ever aspire to dominate by means of our intellectuality» should be cast aside.

49. For more information on the work of anarchist doctors in these circles, see: Barona, Josep Lluís. Ciencia y revolución en la España de Martí Ibáñez. In: Martí; Rey, eds., n. 23, p. 17-38.

50. La Junta, n. 17.

51. The reference was clearly to those intellectuals who were also active in the FAI and who were contributing to the theoretical development of anarchism and the revolutionary praxis of the CNT. In our case, the doctor, Isaac Puente, in addition to his active militancy and his presence on various revolutionary committees, wrote an extensive theoretical work on anarchism disseminated in the anarcho-syndicalist press; this press was also taking part in the dynamics of the inclusion-exclusion of doctors in the CNT, but does not fall within the scope of this study. His work *El Comunismo libertario*, published in 1933, reached one thousand copies in three years and has recently been reprinted in: Puente, Isaac. El comunismo libertario y otras proclamas insurreccionales y naturistas. Bilbao: Likiniano Elkarte; 2003. For details of his militancy and theoretical contributions to anarchism, see: Fernández de Mendiola, n. 31, p. 113-146 and Reboredo Olivenza, José Daniel. Teoría política y praxis social de un anarquista vasco: Isaac Puente (1896-1936). Vitoria: ed. del autor; 1995.

They also offered as proof «several cases known to everybody» of the expulsion or change in attitudes of intellectuals who had approached the union «believing that they are coming to lead the Confederation's movements, motivated either by ignorance or natural ambition»⁵².

The failure of the health unions is a clear example of the gulf that had opened between intellectuals and manual workers within anarcho-syndicalism. If most doctors declined to join the CNT for the reasons outlined earlier, the few doctors who found anarchist ideas appealing preferred to join the *Sindicato de Intelectuales* (Intellectuals' Union) because they found themselves unable to function satisfactorily in the health unions. Apart from being in a minority, the liberal nature of their medical practice did not fit in with the economic struggle of proletarian health workers.

Faced with this situation, anarchist doctors opted for an inclusive strategy which would give them direct influence as intellectuals on the key policy lines which would lead the CNT to revolutionary triumph. Independently of the union group they belonged to, medical professionals proved willing to put their expertise at the service of manual workers, as we shall now see.

3. Inclusion-exclusion of physicians in anarcho-syndicalism. Strategies, resistances and limitations

We may identify a first course of action taken by medical professionals in anarcho-syndicalism, which involved the reformulation of medical knowledge based on the principles of libertarian egalitarianism and radical environmentalism⁵³. This conveniently re-signified medical knowledge could be used as a scientifically-legitimized tool against official medicine and the way doctors operated within it⁵⁴.

52. La Junta, n. 17.

53. Jiménez Lucena, n. 23. Molero-Mesa, Jorge; Jiménez-Lucena, Isabel. «Otra manera de ver las cosas». Microbios, eugenesia y ambientalismo radical en el anarquismo español del siglo XX. In: Miranda, M.; Vallejo, G., eds. Darwinismo social y eugenesia. Derivas de Darwin: cultura y política en clave biológica. Buenos Aires: Siglo XXI; 2010, p. 143-164.

54. Jiménez-Lucena, Isabel; Molero-Mesa, Jorge. Good birth and good living. The (de)medicalizing key to sexual reform in the anarchist media of inter-war Spain. *International Journal of Iberian Studies*. 2011; 24 (3): 219-241.

At the same time, a definition was provided of what medicine and libertarian healthcare should be.

In May 1930, the new monthly journal *Mañana*, edited by a group inspired by CNT syndicalism called «Solidaridad», published an article by Isaac Puente titled «Social medicine»⁵⁵, the first in a series which was seen by *Solidaridad Obrera* as an «anti-medical social campaign», and which was supported by Augusto Moisés Alcrudo in the pages of the newspaper⁵⁶. These two anarchist doctors' articles helped shape a cohesive and radical discourse against the capitalist system, using medicine as a basis for denouncing its social relations and proposing alternatives based on libertarian thought.

Puente worked on the assumption that medical knowledge was the patrimony of humanity and the fruit of accumulated experience, received in inheritance from past generations, reformed or improved by them, and could not, therefore, be regarded as anybody's exclusive property⁵⁷. This knowledge was not limited to curing disease but was also capable of revealing its social origins and, in consequence, its prophylaxis. Under these premises, Isaac Puente declared that:

«Laying people off is the morbid action of the capitalist regime. And forced unemployment, for me "a doctor first and foremost", is a hovel, defencelessness against the cold, impoverishment, chronic hunger, racial degeneration and the development of all infectious diseases (...) As a doctor above all, I can only condemn capitalism and its social organisation, as enemies of the mission of Medicine»⁵⁸.

This commitment from doctors, aware of social injustice, had to involve medical assistance which gave priority to the underprivileged, as they must not consent to people encountering differences in health and in life «for reasons unrelated to physiopathology». A situation in which some lived because they had everything while others died because they lacked the basic needs of life would be «tantamount to justifying theft to enjoy health»⁵⁹. The choice was, therefore, for

55. Puente, Isaac. Medicina social. *Mañana*. 1930; 1: 7.

56. Alcrudo, Augusto M. La farsa sanitaria. *Solidaridad Obrera*. 4 Sep 1930.

57. Puente, n. 55.

58. Puente, Isaac. Inconformismo de un médico. La medicina ante el régimen capitalista. *Solidaridad Obrera*. 20 Sep 1931.

59. Alcrudo, Augusto M. La Internacional de la Sanidad. *Mañana*. 1930; 5.

non-commercial medical assistance, as opposed to what was the norm in the capitalist system.

In consequence, another course of action of anarchist doctors in CNT circles was the continuous denouncement of the mercantilist web which characterized doctor-patient relations under the capitalist system. When providing details of the hidden mechanisms of their profession, doctors would use a pseudonym to protect themselves from governing authorities and circles which did not sympathise with anarcho-syndicalism.

«A rural doctor» [Isaac Puente], in an article titled «Medical commercialism», denounced the frequency with which doctors applied diagnostic techniques and therapeutic procedures with the sole aim of inflating the price of the bill⁶⁰. In March 1932, «*Dr. Fantasma* (Dr. Phantom)» [Javier Serrano Coello (1897-1974)] opened a series of articles in *Solidaridad Obrera* under the title «Health Campaigns» which set out to uncover the hidden mechanisms of the medical profession, starting with the educational flaws of the faculties of medicine⁶¹. The mercantilist corruption of medicine was the cause of corporate selfishness, which would also explain the difficulty of establishing healthcare unions in Spain⁶². Of course, the role of public servant doctors as mainstays of the State and defenders of official health did not escape the criticism of these militants either⁶³.

The evident social etiology of disease, resulting from human inequality, and the perversion of the aims of medicine legitimized the strategy of direct action adopted by anarcho-syndicalism in its fight against capital; hence the claim that there was «nothing more legitimately revolutionary than health»⁶⁴. This legitimacy also rested on another of the pillars of this thought: the right to health understood as the right to life. To put this in terms more in tune with historical moment, the right not to suffer from diseases with known and therefore avoidable social origins. This right also included being able to fight for these aims, in other words, the right to «fight for life». The «right to health» also came, therefore, with the right

60. Un médico rural [Isaac Puente]. El comercialismo médico. *Solidaridad Obrera*. 28 Jul 1932.

61. Dr. Fantasma [Javier Serrano]. Campañas Sanitarias. *Solidaridad Obrera*. 26 Mar 1932.

62. Puente, Isaac. Los llamamientos a los intelectuales. *Solidaridad Obrera*. 6 Jul 1932.

63. Puente, Isaac. El médico funcionario. *Solidaridad Obrera*. 11 Mar 1931.

64. Alcrudo, n. 56.

«to the means of conserving it and the means of restoring it in case of an imbalance occurring»⁶⁵. Alcrudo even requested the «codification of biology» in libertarian terms so that doctors could not act at their own discretion because, he declared, «metabolic rights come above all others»⁶⁶.

Once the right to health had been erected as the most important right of workers, anarchist doctors, given legitimacy by their technical expertise, offered manual workers a new tool which was capable of scientifically legitimising the political and economic emancipation of the proletariat. At the congress of the *Federación de Sindicatos Únicos de Sanidad* (Single Healthcare Unions Federation), we may see the degree of influence that medical professionals aspired to in the CNT, presenting a programme of total (de)medicalization of the working masses, even going so far as to propose that the CNT should replace the tactics of economic struggle with those of health struggle:

«Taking as basic to the effectiveness of healthcare, the guarantee to all of the right to life and the means and knowledge essential to maintain and conserve health. The ideals of health are equal to libertarian ideals, and it is suggested to the CNT that the tactics of economic struggle should be replaced with those of health struggle; making health figure among the demands of the proletariat»⁶⁷.

Among the motions approved at this congress were a whole series of initiatives to be carried out by local *Comités de Defensa Sanitaria* (Healthcare Defence Committees), which would be responsible for developing them within the CNT. Of them, we would highlight propaganda and health education, the preparation of a census of producers for planning the future health system or monitoring health and hygiene conditions at work.

In accordance with the inclusion-exclusion relations which are the subject of our analysis, and which were also conditioned by union priorities,

65. Alcrudo, Augusto M. Sanidad de vanguardia. El derecho a la salud. Mañana. 1931; 8.

66. Alcrudo, n. 59. For more information on the anarchist conception of health, see: Molero-Mesa, Jiménez-Lucena, n. 54; Jiménez-Lucena, Isabel; Molero-Mesa, Jorge. Problematizando el proceso de (des)medicalización. Mecanismos de sometimiento/autogestión del cuerpo en los medios libertarios españoles del primer tercio del siglo XX. In: Miranda, M.; Girón Sierra, A. eds. Cuerpo, biopolítica y control social: América Latina y Europa en los siglos XIX y XX. Buenos Aires: Siglo XXI; 2009, p. 69-93.

67. Congreso de Sindicatos Únicos de Sanidad. Solidaridad Obrera. 22 Nov 1931.

in turn limited by the harsh repressive measures that the different republican governments progressively took against the libertarian movement, we may take it that none of these proposals were discussed in local unions or taken into account at the various CNT congresses which took place in this period. They were not a priority. This being said, the references of libertarian analysis to doctor-patient relations were seen to be highly relevant to the way in which healthcare was established in the capitalist system. Charity organisations, private benefit societies, or even compulsory state insurance schemes such as for maternity, were regarded as being elements for maintaining social inequality and obstacles in the path to revolution⁶⁸.

Thus, complaints against sickness insurance companies, which appeared constantly in the anarchist press⁶⁹, were given a scientific basis by anarchist doctors, and another path to inclusion was opened on the back of an issue that was particularly sensitive for workers, namely the consequences of work accidents. Together with the abuse of authority on the part of the benefit societies, the humiliation of workers who came to claim their rights, and the use of small print to refuse assistance to insurance policy holders, doctors were accused of acting against workers' interests, sacrificing «the nobility of their profession» and becoming «a science bureaucrat without a conscience»⁷⁰. In his section in *Solidaridad Obrera* called «*Folleto sanitario* (Health Feuilleton)», Javier Serrano announced that the benefit societies had made «a marvellous discovery»: an abdominal hernia was not caused by a worker suffering a blow in a work accident, but came about because «the worker has weak abdominal walls». The logic applied by the bourgeois system covered all other social relations, in which he included himself as an affected party:

«One of these days, one of these bourgeois motor cars which go speeding around will crush us under its weight and the opulent bourgeois driver will sue us for damages for having speckled the wheels with our blood »⁷¹.

68. Jiménez Lucena, n. 23.

69. Jiménez Lucena, Isabel; Molero Mesa, Jorge. Per una «sanitat proletària». L'Organització Sanitària Obrera de la Confederació Nacional del Treball a la Barcelona republicana, (1935-1936). Gimbernat. 2003; 39: 211-221.

70. Notas del día. Solidaridad Obrera. 2 Jul 1931.

71. Serrano, Javier. Folleto sanitario. Las mutuas de seguros. Solidaridad Obrera. 17 Feb 1933.

The complicity of official justice with the benefit societies was also denounced by Serrano, who acknowledged having acted as an expert in several lawsuits filed by workers and having lost them because of existing legislation and judges' attitudes.

The strategy to be taken against such problems originating from human inequality in capitalist society caused a split in early 20th century unionism between those who considered cooperation «in the areas of consumer goods, aid and education» to be feasible, the so-called «*sindicalismo a base multiple*», and those who rejected this «reformist» option, preferring instead «direct action against capital». The CNT, as we have seen, opted for the latter path at its founding congress in 1910, a decision which entailed not carrying out any activity in the unions which diverted them from their short-term revolutionary goals. They even renounced the «credit unions» set up to support striking workers, as they were convinced that the accumulation of union money would never exceed that possessed by capital⁷². It was up to the members of the Confederation, therefore, to arrange their membership of welfare societies, whether they were of a self-help or commercial nature, but in any case outside the CNT.

The combination of this union strategy and the previously mentioned consequences of libertarian apoliticism prevented doctors from establishing any kind of commercial or political interdependence with the anarcho-sindicalist unions. In this sense, the anarchist doctors who supported direct action helped frustrate the efforts of the reformist sectors of the CNT to finalise, in 1931, the creation of a benefit society devoted to the treatment of tuberculosis called *Obra Popular Antituberculosa de Cataluña* (Popular Anti-tuberculosis Service of Catalonia)⁷³. Militant doctors like Isaac Puente had an important hand in the failure of the benefit society⁷⁴, which, despite the support of key members of the union's leadership and the editorial board of *Solidaridad Obrera*⁷⁵, was ruled out

72. This trait set them radically apart from the UGT, which had created «*La Mutualidad Obrera Cooperativa médico-farmacéutica y de enterramientos de trabajadores asociados* (The medical-pharmaceutical, burials and associated workers Co-operative Benefit Society for Workers)» in 1904. This socialist union officially adopted multi-base unionism at its 1907 congress. Castillo, Santiago. El socialismo madrileño hace un siglo: Un anhelo de reformas. Arbor. 2001; 159 (666): 411-429.

73. Farreras. Una iniciativa. La tuberculosis y el obrero I. Solidaridad Obrera. 26 Feb 1931.

74. Puente, Isaac. Ante una iniciativa. Inquietudes proletarias. Solidaridad Obrera. 6 Mar 1931.

75. The Project was backed by a significant part of the union's leadership, starting with Ángel Pestaña and several members of the editorial office of *Solidaridad Obrera*, headed by its di-

at the Plenary Session of local unions of Badalona in October 1931, after eight months of campaigning⁷⁶. The negative impact of its support for the campaign accounted in large part for the reformist sector's breakaway from the CNT a few months later⁷⁷.

Once the strategy of direct action at the level of mutual societies had been ratified, the response of militant doctors was to make disinterested use of their healthcare facilities by granting free medical consultation to CNT workers. To provide conclusive proof of their adhesion to the anarcho-syndicalist movement, to which they already made periodical financial donations to maintain the press or support prisoners, they opened their private practices to offer free treatment to sick union members who were without work or had been wronged by insurance companies. Having had several ill-fated experiences with the extinct Healthcare Unions⁷⁸, Alfredo Royo and Javier Serrano began to offer this possibility in *Solidaridad Obrera* in October 1932. The response from members was very positive, prompting the editorial office of *Solidaridad Obrera* to appeal to other affiliated intellectuals to take the initiative as an example to follow⁷⁹. Serrano's «humanitarian gesture» was also praised by *Solidaridad Obrera*, and contrasted with the attitude of those doctors who, on account of their mercantilism, had turned their profession into «something denigrating»⁸⁰. For the first time, anarcho-syndicalism saw something worthwhile in achieving «the union of arm and brain», not only in the case of militant doctors but also in that of other healthcare specialists, be they members or mere sympathisers.

Over several years, in which affiliation to the CNT was persecuted by Republican governments and different revolutionary movements failed, articles in the anarcho-syndicalist press

rector, Juan Peiró (1887-1942) and the editor Ramón Magré (b. 1899). Una obra humanitaria. *Solidaridad Obrera*. 30 Abr 1931. Aprobados los estatutos. *La Vanguardia*. 26 Ago 1931.

76. Farreras Munner, Dr. La tuberculosis y el obrero II. *Solidaridad Obrera*. 10 Ago 1932.

77. In Novembre 1931, a «*Mutua Obrero-sanitaria* (Healthcare Society for Workers)» was set up in Madrid. Sindicato Único de Sanidad de Madrid. *El Sol*. 3 Nov 1931. However, we can find no evidence that it started to operate after the purges against *Sindicato de Sanidad* (Healthcare Union) militants.

78. El Sindicato de Sanidad. *Solidaridad Obrera*. 9 Oct 1931.

79. Importante. *Solidaridad Obrera*. 16 Oct 1932.

80. Rasgo humanitario. *Solidaridad Obrera*. 29 Oct 1932.

reflect the positive and rising evolution of this strategic relationship between doctors and workers, which culminated in the creation of the *Organización Sanitaria Obrera* (Workers' Healthcare Organisation, henceforth referred to as OSO) in May 1935. The scope of the organisation's aims grew very significantly. It started out organising a series of doctors' surgeries which were free for workers without means, and ended up becoming a healthcare society with highly ambitious plans⁸¹. The reality of the OSO was, however, that the money raised through union subscriptions, stamp sales and other activities was immediately eaten up, as although doctors did not charge for consultancy, medicine was dispensed free of charge. The result was that it became impossible to improve efficiency and get a project proposed by OSO doctors off the ground: the construction of a proletarian hospital. The need for money eventually turned the OSO into a fee-paying healthcare society which, though very special, went against the principle of direct action, in the eyes of some militants. These developments must be seen in the context of the new circumstances in which the CNT found itself after the erosion caused by the various revolutionary failures, the rise of fascism and the pressure to form a united workers' front with the UGT. With the reunification of anarcho-sindicalist sectors in 1936 and the belief in an imminent social revolution, the OSO came to be seen as the seed for a possible healthcare organization to replace the bourgeois health service⁸².

4. Epilogue

The outbreak of the Civil War completely changed the panorama in which the strategies of inclusion-exclusion analysed here were being developed. Straight away, the single healthcare unions were reactivated or organised once again in various provinces in the Republican zone, now in the push towards a future «collectivisation of medicine». The new *Sindicato Único de Sanidad de Barcelona* (Single Healthcare Union of Barcelona) was founded on August 16, 1936⁸³, when the *Consejería de Sanidad y Asistencia Social de la Generalitat* (Department of Health and Social Assistance of the Generalitat) had already started the process of

81. Jiménez Lucena, Molero Mesa, n. 69.

82. Jiménez Lucena, Molero Mesa, n. 69; Jiménez Lucena, n. 23.

83. Sindicato Único de Sanidad. Solidaridad Obrera, 16 Ago 1936: 15.

seizing health centres run by the church and private healthcare societies. In parallel, the *Comité Sanitario de Milicias Antifascistas* (Anti-fascist Militias Healthcare Committee) already controlled the medical organisations which were grouped in the *Casal del Metge: Sindicat de Metges de Catalunya* (Physicians Doctors' Union of Catalonia) and its *Mutual Mèdica de Catalunya i Balears* (Medical Mutual Society of Catalonia and the Balearic Islands), the *Col·legi de Metges de Barcelona* (Medical College of Barcelona) and the *Acadèmia de Ciències Mèdiques de Catalunya i Balears* (Academy of Medical Sciences of Catalonia and the Balearic Islands). The result of all these events was that doctors and professionals from all areas of healthcare joined the *Sindicato Único de Sanidad* (Single Healthcare Union) in huge numbers⁸⁴. The organisation of anarcho-syndicalist healthcare culminated in March 1937 in the creation of the *Federación Nacional de Sindicatos Únicos de Sanidad* (National Federation of Single Healthcare Unions) at the *Primer Congreso Nacional de Sanidad* (First National Health Congress) held in Valencia. On this occasion, the final motion of the section devoted to Medical Assistants stated that «all internal struggles among healthcare professionals, which have existed so far, disappear once the Congress has laid down two revolutionary principles: the socialisation of healthcare and free access to education with the only requisite of training»⁸⁵. A new era was dawning, which will be the subject of our forthcoming research. ■

84. Hervas Puyal, Carlos. *Sanitat a Catalunya durant la República i la Guerra Civil*. Barcelona, Universitat Pompeu Fabra; 2005.

85. *Memorias del Primer Congreso Nacional de Sanidad, CNT-AIT*. Valencia: Ed. Guerri colectivizada; 1937, p. 44.

