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LAST 400-02  
Core Seminar

Public Health as a Battleground: Imperialism, Health and State Legitimacy  
in Cuba (1868-1934)

**Introduction:**

In 1987, in an article from the Cuban Periodical *Granma*, Fidel Castro wrote: “Public health became a challenge and a battleground between imperialism [the United States] and ourselves [...] and this multiplied our efforts. That is why we have developed this field and are striving to become a medical power with the best possible health indices.”<sup>1</sup> With this quote and even a cursory examination of the governmental importance placed on Cuban healthcare policies, one realizes how politicized medicine has become on the island. For a country in a geopolitical position of inferiority due to its economic status and communist regime, measures of public wellbeing have become a means for the Cuban government to legitimize itself and the Revolution on a global scale; Castro even mentions health as a way to combat imperialist powers. However, beginning with the wars for independence in 1868, Cuba has had a long tradition of unstable governments that required some type of legitimization, whether it be the Spanish Crown, the U.S., or Cuban *caudillo* regimes. With this history, one may ask if the Cuban government’s political use of health is specifically linked to legitimizing the 1959 Revolution and socialism as suggested by Castro’s words, or if his regime is merely continuing a long Cuban tradition of state justification? In this paper I contend that Cuba’s prerevolutionary history has created an ideologically-independent precedent for

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<sup>1</sup> Fidel Castro as quoted in Julie M. Feinsilver, “‘World Medical Power’: The Politics of Symbolism,” *Latin American Research Review* 24:2 (1989): 24.

the politicization of health as a means of legitimizing authority and promoting the success of the state. Too often we remove the events following the 1959 Revolution from its historical context, viewing 1959 as a starting point in modern Cuban history. An exploration into Cuba's past will take a much-needed look at the continuity that exists throughout twentieth century Cuban politics regardless of ideology. Furthermore, in demonstrating the strong tradition of linking health success with a successful government, this analysis can potentially provide us with reasoning to rethink the way in which we evaluate the current healthcare system in Cuba, which is more often than not exceedingly praised.

In order to explain the historic political use of Cuban health by national governments, this paper will chronologically address the colonial and neocolonial time period, from 1868 to 1934. The analysis of the colonial era will primarily center on Spain's dismissal of Dr. Carlos Finlay's findings of poor health in Cuba to protect the crown's authority. Following this discussion is the examination of the neocolonial era in Cuba. While encompassing a shorter amount of time, this will occupy the larger part of the paper, showing how both the U.S. and Cuba use health as a means to establish government authority. In this investigation, Katherine Hirschfeld's and Ross Danielson's thorough analyses of Cuban healthcare history provide invaluable descriptions of the development of medicine and public health on the island, helping frame the connection between national welfare and politics.<sup>2</sup> Public health and medical journal reports on Cuban medicine from the time period also give unique historical perspective of the events that I will analyze. I will use these sources at length, allowing the reader to view the

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<sup>2</sup> Katherine Hirschfeld, *Health, Politics, and Revolution in Cuba since 1898* (New Brunswick, NJ: Transaction Publishers, 2007). Ross Danielson, *Cuban Medicine* (New Brunswick, NJ: Transaction Publishers, 1979).

discourse that arises from their respective authors. Lastly, statistical health data from Cuban government and international reports supply not only a basis for contextualizing the health status on the island, but also illustrate how states use health in general as a means for legitimizing their authority and international reputation.

The introductory quotation to this paper is cited in health policy analyst and researcher, Julie M. Feinsilver's discussion of the symbolic use of public health and medical success in Castro's Cuba. In this work, the author argues that the Cuban government utilizes achievement in health as a source of political prestige and influence. In making this assertion, Feinsilver analyzes Cuba's criteria for success in this field, which consists primarily of low mortality statistics, high healthcare worker-to-population ratios, and the giving of international medical aide. Although written before the collapse of the Soviet Union, which thrust Cuba into an economic crisis and forced its government to make policy adjustments, Feinsilver's argument that Castro uses health success to legitimize his administration and the Revolution on an international scale still holds true today. The author points out that in becoming a "world medical power," Cuba is able to associate itself with "socioeconomic development, scientific achievement, a model health system, and influence in the international arena."<sup>3</sup> Throughout the paper, she stresses how health is a more important indicator of government success for socialist states than it is for capitalist ones as the wellbeing of the citizens is the primary focus of socialist governments. Such reasoning is accurate in explaining why the Cuban government employs medicine to attain international prestige rather than success in other fields such as economic development or transportation infrastructure. However, Feinsilver removes this politicization of health from its historical context in Cuba. She points out that there

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<sup>3</sup>Feinsilver, "'World Medical Power': The Politics of Symbolism," 5.

is a prerevolutionary base in successful healthcare but does not mention how or if past governments used this in the same way that Castro's regime utilizes Cuba's contemporary achievements in health.<sup>4</sup>

Researcher and professor of medical anthropology Katherine Hirschfeld, on the other hand, intently focuses her book, *Health, Politics, and Revolution in Cuba since 1898*, on the historic political events that occurred alongside those of Cuba's history of medicine, beginning her analysis with Cuban independence in 1898 and ending with the date of publication in 2001. Throughout the book the author stresses the political continuity that has existed over the course of the twentieth century, pre and post Revolution. One of the major focal points of this incredibly thorough work is the history of *caudillo* leadership on the island, stating that Fidel Castro's dictatorial regime shows little break from this political tradition. Hirschfeld also discusses the development of a Cuban sense of inferiority surrounding the island's early difficulties in public health and how caudillos used the department of public health as a means of controlling their political opposition. However, she makes no argument for or against the use of national wellbeing to legitimize state authority or to advance the country's international influence. Furthermore, by beginning her analysis with Cuban independence in 1898, Hirschfeld leaves out significant colonial history. It is also important to note that the author reports unfortunate encounters with the Cuban government and medical system during her fieldwork, resulting in a largely negative assessment of the Cuban healthcare system. For this reason, we should critically read her analysis of Cuban public health, which she strongly and negatively connects to *caudillismo*.

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<sup>4</sup> Ibid., 5.

Cuban scholar Ross Danielson's *Cuban Medicine* is a comprehensive study of Cuban public health and medical practice from the mid nineteenth century to 1975. The author divides Cuban medical history into "revolutions," analyzing the time period surrounding each one and how they collectively lead up to the 1959 Revolution. This work focuses primarily on physicians, medical education, and private forms of healthcare, and how these compare with their post-Revolution counterparts, contextualizing his analysis along the way with the economic, political, and societal state of Cuba relevant to the time period being discussed. Due to the breadth of this work, it pays little attention to the state's use of medicine for political gain. However, it is valuable in that its analysis covers the time period from the mid-1800s to 1975. Again, as is often seen with work on Cuba, this book is politically biased in that it favors the Castro regime and dismisses prerevolutionary medical history as capitalistic and exclusionary. Therefore, we must approach Danielson's conclusions carefully and critically as well.

### **A Brief Cuban History:**

This paper will cover Cuban politics, historical events, and healthcare from 1868 to 1934. 1868 will serve as the starting point of this analysis as it is the year in which the first war for Cuban independence began, the year that Cuban insurgents started to truly challenge Spanish colonial power. As a result, during this time, Spanish authorities manipulated health information to maintain the crown's governing legitimacy. This first unsuccessful attempt for Cuban independence is appropriately known as the Ten Years War, as it lasted for ten years (1868-1878). In 1895, war broke out again, lasting until the United States intervened in 1898. Many reasons spurred U.S. intervention, some

economic due to the growing amount of sugar plantations owned by U.S. citizens, some humanitarian due to the surge of yellow journalism, which detailed Spanish atrocities committed against the Cuban people. Regardless of motive, once the United States decided to intervene, the war quickly ended, and the U.S. government saw itself as responsible for repairing the extensive damage and for organizing a Cuban republic. In 1902, U.S. occupation of the island formally ended, yet in 1901 President William McKinley signed the Platt Amendment, which allowed the U.S. government to militarily intervene in the future, if the need arose (i.e. Cuban independence being threatened, Cuba militarily allying itself with a nation of which the U.S. did not approve, governmental and civil unrest, etc.). For over thirty years, the U.S. used the Platt Amendment on numerous occasions to legitimize its interventions in Cuba (1906, 1912, 1917, 1921, 1933) until Cuban president Carlos Mendieta signed the Treaty of Relations in 1934, abrogating the Platt Amendment. Although technically a republic, Cuba suffered from severely corrupt leaders who throughout this era, participated gratuitously in patronage politics and graft. Managed elections and the disenfranchisement of political opposition helped to maintain this legacy of caudillismo. In addition to these practices, with the Platt Amendment many political leaders often clamored for U.S. intervention with the hopes that their powerful neighbor would remove opponents from power. These corrupt politics combined with neocolonial control of the U.S. provided a base for the politicization of health in the early twentieth century in Cuba.

### **Carlos Finlay and Spanish Opposition:**

While early 19<sup>th</sup> century physician Tomás Romay y Chacón may be known as the initiator of the scientific movement in Cuba for his efforts in promoting public health, it is Dr. Carlos Juan Finlay who truly begins the historic tradition of politicizing healthcare on the island.<sup>5</sup> Such involvement however, was not sought out actively by Finlay. His early work in epidemiology had pure intentions, aspiring only to improve the poor public health state in Cuba, yet events such as the Ten Years War and U.S. intervention led to the beginnings of government manipulation of this field.

The mid-nineteenth century saw a prosperous shift toward a sugar-based economy, but the public service sector severely lagged behind.<sup>6</sup> One obvious result of the inadequate infrastructure was epidemic, which Havana experienced in 1867 in the form of a cholera outbreak. At the time, the city received its water supply from a canal known as the Zanja Real. Inspired by British epidemiologist John Snow who had linked cholera transmission to water supply, Finlay discovered that incidence of illness was higher in those that lived further down the canal.<sup>7</sup> In 1868, Finlay sent a letter for publication to the *Diario de la Marina* detailing his findings and suggesting that public officials prohibit infected individuals from washing their clothing or other possessions in the river, which ran through the canal. As insightful as his results and advice were, the newspaper refused to publish the letter since the editor interpreted it as a critique of the Spanish government. In 1873, Finlay reported his results to a potentially more receptive audience at the Academy of Science. However, the scientists present concluded that the

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<sup>5</sup> José López Sánchez, *Tomás Romay and the Origins of Science in Cuba*. Trans. Mary Todd Haessler. (Havana: Book Institute, 1967): 53-131.

<sup>6</sup> Danielson, *Cuban Medicine*, 75.

<sup>7</sup> *Ibid* p. 85.

water from the Zanja Real was sanitary, believing that classifying it as unhealthy would damage the reputation of the Spanish administration and cause social instability.<sup>8</sup>

Collectively, these responses to Finlay's work in combating the cholera epidemic in Havana demonstrate the origins of the politicization of health in Cuba. With such a response to his work, politics were forced into the field of health research as his findings were denied legitimacy with the purpose of protecting the reputation of the Spanish administration. Not coincidentally, it is during this time that Spanish authority became seriously threatened with the first war for Cuban independence beginning in 1868. In this way, preserving the image of good public health was a means for preserving authority and governmental legitimacy. Unsurprisingly, Finlay denounced such corrupt scientific analysis in a speech to the Academy of Science in 1873:

Those who censure the use of hypotheses and preconceived ideas in the experimental method, have fallen in the error of confusing the invention of the experiment with the observation of its results [...] the idea is the beginning of all reasoning and of all invention, from which flows every kind of initiative. One must not suffocate nor reject it under the pretext that it might be harmful, for it only needs to be regulated and given criteria, which is very different.<sup>9</sup>

Finlay believed that science should be the unadulterated search for truth based on experimental evidence. However, working in Cuba during the wars for independence, it seemed unlikely that such well-intentioned science would prevail.

### **Finlay and U.S. Intervention:**

While his study of the cholera epidemic was significant, Finlay is most famous for his discovery of the mosquito vector in yellow fever transmission. Yellow fever was one

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<sup>8</sup> Ibid p.87.

<sup>9</sup> Quoted in ibid p.88-89.

of the most destructive forces in Cuba for non-natives, triggering the creation of private *casas de salud* or *quintas* due to the inadequate resources public hospitals provided in response to the epidemic.<sup>10</sup> In 1881, Finlay presented his groundbreaking work to the Academy of Science in “The Mosquito Hypothetically Considered as the Agent of Transmission of Yellow Fever.” His work was poorly received, though, and did not gain recognition until the U.S. Yellow Fever Commission confirmed his discovery in 1900, almost twenty years later. Four separate U.S. commissions had been sent to Cuba between 1879 and 1900 with the purpose of identifying the cause of the disease, which was also plaguing the Mississippi valley; however, only the last of these was dedicated to examining Finlay’s hypothesis as all other options had been exhausted.<sup>11</sup> When the commission finally committed itself to Finlay’s theory, it was experimentally validated with his help in the small span of two months. Yet once proven true by Dr. Walter Reed, who headed the commission, proper credit was not given to Finlay.<sup>12</sup> U.S. journals, textbooks and other written works addressing the discovery of the mosquito vector theory continued this dismissal of Finlay’s role in the research.<sup>13</sup> For instance, in a *Science Monthly* publication, Dr. Finlay’s role in the discovery of the mosquito vector theory is mentioned in passing:

Meanwhile, it had been assumed by J.C. Nott in 1848 and by Carlos Finlay in 1881-6 that mosquitoes are agents of the transmission of yellow

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<sup>10</sup> Individuals born in Cuba developed immunity to the disease through early exposure to mosquitoes carrying the illness. Yellow fever, therefore, only was a threat to immigrants and visitors. For information concerning *casas de salud*, see Danielson, *Cuban Medicine*, 76.

<sup>11</sup> Duvon C. Corbitt, “Carlos J. Finlay, Cuban Physician,” *The Hispanic American Historical Review* 45:3 (Aug 1965): 440.

<sup>12</sup> Ibid., p. 441 and Mario Sánchez Roig, “Capítulo I: Ciencias médicas,” in “Libro tercero: Las Ciencias” in *Historia de la nación cubana: Tomo X*, ed. Ramiro Guerra y Sánchez, José M. Pérez Cabrera, Juan J. Remos, and Emitterio S. Santovenia. (Havana: Editorial Historia de la Nación Cubana, S.A., 1952): 152-153.

<sup>13</sup> According to Corbitt, see James Ford Rhodes, *History of the United States from the Compromise of 1850 to the End of the Roosevelt Administration*, vol. IX. (New York, 1922), 68-98, 177-179, 181.

fever, and this theory had already been proved to be true in the case of malarial fever by the experimental demonstrations of Ross and others. Reed now proceeded to put this theory to the test, and, with his associates, was able to demonstrate in the most rigorous manner, that yellow fever is transmitted by a special variety of mosquito, the *Stegomyia fasciata*, [...] <sup>14</sup>

While this is only one example of the large body of work overlooking Finlay's scientifically significant contribution during this time, it illustrates well how he was portrayed merely as a source of inspiration for the work achieved by Dr. Walter Reed. In reality, it had been Finlay who first correctly identified the species of mosquito responsible for transmission of the illness after years of rigorous experimental work.

This denial of Carlos Finlay's scientific contribution by U.S. scholars shows again how success in the field of health in Cuba became a means for reinforcing authority, which in this case was the paternalistic role that the U.S. maintained over the island. With the U.S.'s aid, the final war for independence had ended within a few months, and the question remained as to what to do with an island that was ravaged by war and inhumane sanitary conditions. <sup>15</sup> Along with reasons surrounding the economic and political benefits of annexing the island, U.S. citizens and military men believed they had a paternalistic duty to bring progress and modernity to Cuba. <sup>16</sup> Stepan contends that primarily, "the occupation of the island in 1899, was rationalized in North America by the belief that the United States brought to Cuba a moral, political and technological superiority not to be found in a traditional colonizing power such as Spain; and in

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<sup>14</sup> Champe C. McCulloch, "The Scientific and Administrative Achievement of the Medical Corps of the United States Army," *The Scientific Monthly* 4:5 (May 1917): 419.

<sup>15</sup> The Commander of Spanish forces, General Weyler, also known as 'the Butcher', implemented a cruel policy that forced rural families into urban, concentration camp-style compounds where lack of sanitation, overcrowding, and starvation conditions plummeted Cuba into state of public health disaster. It is estimated that around 400,000 Cuban died from the war and Weyler's reconcentration policy. See Nancy Stepan "The Interplay between Socio-Economic Factors and Medical Science: Yellow Fever Research, Cuba and the United States," *Social Studies of Science* 8:4 (Nov. 1978): 409.

<sup>16</sup> Hirschfeld, *Health, Politics, and Revolution in Cuba since 1898*, 117-118.

[Military Governor] Wood's personal opinion, not to be found among Cubans either."<sup>17</sup>

Yet, the yellow fever epidemic posed a serious threat to this idea of superiority. How could the U.S. government fulfill its paternalistic role if it could not even take care of its own soldiers who were fighting a losing battle against the destructive yellow fever epidemic? The severity of the disease threatened both "the imperial rationale and the North American military presence."<sup>18</sup> Once the Commission, led by Dr. Walter Reed, experimentally validated and adopted Finlay's theory for the prophylaxis of yellow fever, the U.S. government could still retain this image of a "bringer of modernity" by crediting itself with solving this highly publicized problem. General Leonard Wood, military governor of Cuba during the first years of U.S. intervention (1898-1902) said of Reed:

I know of no other man of this side of the world who has done so much for humanity as Dr. Reed. His discovery results in the saving of more lives annually than were lost in the Cuban War, and saves the commercial interests of the world a greater financial loss each year than the cost of the Cuban War. In the months when the disease was ordinarily the worst, it was checked and driven from Havana. It was the first time in two hundred years that the city had been rid of it. [...] Future generations will appreciate fully the value of Reed's services.<sup>19</sup>

Here we see both the omission of Finlay's contribution and the exaggerated praise placed on Reed (and the U.S. Yellow Fever Commission) for solving the yellow fever problem. In this way, Cubans, U.S. citizens and a global audience could rationalize the United State's continued occupation of the island. While other factors mattered, solving the yellow fever epidemic was one way to justify U.S. military presence and authority. Here we see again the linkage in providing good health with legitimizing imperial control;

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<sup>17</sup> Stepan, "The Interplay between Socio-Economic Factors and Medical Science: Yellow Fever Research," 409.

<sup>18</sup> *Ibid.*, 410.

<sup>19</sup> Leonard Wood quoted in Edgar Erskine Hume, "The United States Army Medical Department and Its Relation to Public Health," *Science* 74:1924 (Nov. 1931): 470.

unfortunately for Finlay however, this meant further politicization of his meticulous, scientific work.

### **The Platt Amendment:**

The Platt Amendment, a document through which the U.S. formally ended its first occupation of Cuba in 1902, truly solidified the politicization of health on the island. The document essentially declared the U.S. able to intervene in Cuban governmental affairs when it saw fit, with the purpose of the “preservation of Cuban independence.” Article V of the Platt Amendment, however, is of most interest to us as it deemed the failure of the Cuban people to uphold the sanitation standards left by the U.S. military as grounds for intervention.<sup>20</sup>

During the first U.S. occupation, the military drastically improved the sanitary infrastructure of the island, which was in ruin after the war. The commander of occupation forces, Gen. John Brooke, describes Havana:

As has been stated elsewhere, the relief of the starving and destitute thousands in and about the city demanded instant attention. [Those placed in urban concentration camps] and other homeless and hopeless creatures thronged in such spaces and premises as could give them partial shelter, and were dying in the streets and alleys.<sup>21</sup>

The U.S. military issued food rations, instituted sanitation services, provided smallpox vaccinations, and experimented with mosquitoes control in a huge effort to remedy the poor situation General Brooke describes above.<sup>22</sup> With such improvements, it is easy to understand the importance placed on Cuba’s maintenance of the sanitation policies that

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<sup>20</sup> U.S. Government, “Transcript of Platt Amendment,” U.S. Government, <http://www.ourdocuments.gov/doc.php?flash=true&doc=55&page=transcript> (accessed Oct. 20, 2008).

<sup>21</sup> John R. Brooke, “Annual Report” in *Annual Report of Major General John R. Brooke, U.S. Army, Commanding the Division of Cuba*, (Havana: Department of Havana, 1899): 16.

<sup>22</sup> Hirschfeld, *Health Politics and Revolution in Cuba since 1898*, 121.

the U.S. military forces introduced. Whatever the U.S. government's intentions were in this particular provision of the Platt Amendment, Article V had a transformative effect on Cuban politics and health by reinforcing the concept that good health was a measure of a successful state. For the corrupt government leaders that followed after the removal of U.S. forces, Article V became a motive for the publication of reports manipulated to emphasize government-instigated improvements in health care. Hirschfeld goes so far as to recommend that data from such governmental publications be analyzed carefully due to the heavy push for positive health statistics that political leaders made.<sup>23</sup> In this way, the Platt Amendment, upheld until 1934, provides the foundation for the Cuban heads of state to follow in the footsteps of the Spanish authorities and U.S. scholars in using the farce of public health success as a means of legitimizing power and control.

### **The Origins of an Inferiority Complex: President Palma and Racism**

While the Spanish manipulated health findings to establish its colonial authority during the wars for independence and the U.S. government did the same to legitimize its occupation of the island, Cuban authorities propagated success in this field to battle a global and national inferiority complex. But where did this sense of inadequacy come from? The increased neocolonial control that the U.S. now maintained over Cuba with the Platt Amendment, combined with the already established superiority that U.S. citizens held over Cubans, were both contributing factors. However, it was the failure of the first

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<sup>23</sup> Ibid., p.152.

Cuban presidency that strongly amplified the sentiment of Cuban inferiority from both Cuban and U.S. perspectives.<sup>24</sup>

Following the end of U.S. occupation, corrupt caudillo leadership, which utilized patronage and graft extensively, became a Cuban political tradition that perpetuated the concept of Cuba's inability to be a civilized, democratic state. This legacy of corrupt government began with the first president Tomás Estrada Palma, who governed from 1902 to 1906. Due to the Palma administration's exclusion of other political parties from government affairs and due to overall corruption, revolution broke out in 1906, spurring a second U.S. military occupation of the island.<sup>25</sup> While the U.S. already held Cuba in low regard, the failure of this first presidency to govern and control the country reinforced and amplified the already present racist and paternalistic ideas that U.S. citizens held. Lieutenant Colonel Robert L. Bullard clearly displayed such attitudes in an essay written during the years of this second U.S. occupation (1906-1909). After romanticizing the Cuban citizen and mentioning the island's tropical climate as the source of his laziness, Bullard closed his argument on the fundamental differences between U.S. citizens and Cubans with the following paragraph:

A basic difference that accounts for much that we criticize in Cuban character, personality, government, politics and public life, that accounts for much deficiency, much weakness, is the fault of the Cuban's raising and training his children from birth to manhood to know not discipline [...] This accounts for the Cuban emotionality and impracticability, their excitability and anger when opposed in any way, their wild rushing into revolutions when everything does not go to suit them, their lack of poise in government and public affairs [...] It keeps them children. It makes it

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<sup>24</sup> In fact, political factions often advocated for U.S. intervention with the hope that the U.S. would expel their opponents from power.

<sup>25</sup> Charles E. Magoon, *Republic of Cuba: Report of Provisional Administration*, vol. 1 (Havana: Rambla and Bouza, Printers and Stationers, 1908): 7.

necessary for a neighbor to take them in hand, control, direct, and manage their government and public polity. It makes the Cuban a Cuban.<sup>26</sup>

This thinking was typical of the racism felt by many U.S. citizens toward Cubans. Those from the U.S. found Cubans to be uncivilized and in need of U.S. intervention to guide them toward modernity and democracy. The 1906 intervention and three-year occupation that followed only reinforced such thinking for U.S. citizens and helped establish an inferiority complex in Cuban minds. The Platt era saw four additional U.S. interventions in 1912, 1917, 1921 and 1933, which clearly did not help Cubans or U.S. citizens in viewing the island as a nation capable of governing itself.

#### **Foreign Accusations and Response:**

North American intolerant views toward Cubans did not solely revolve around their inability to govern themselves politically. With the Platt Amendment, the U.S. also took health matters into account as it viewed Cuba as incapable of remedying its own public health woes. Similar to the reasoning behind the U.S. government and media's dismissal of Carlos Finlay's contribution to the eradication of yellow fever, the U.S. viewed itself as the only source of civilization and sanitation to the island. Once its military forces were removed, the U.S. believed that Cuba could not help but fall into its fundamental state of disorganization and filth:

How quickly the people of the tropics drop back into conditions of apathy in matters of sanitation is shown in the case of Cuba, which supplies a striking illustration of the fact that the military system of sanitation employed by the American Army in the first and second occupations of the island was the only thing that would rid Cuba of the yellow fever and other diseases. As we contemplate Cuba to-day, and note its falling away from the high sanitary standards of the American Army, we may well doubt whether civil sanitary

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<sup>26</sup> Robert L. Bullard, "How Cubans Differ from Us," *North American Review*, 186 (Sept./Dec. 1907): 421.

control however energetic, could ever have succeeded in cleaning up the island, even temporarily.<sup>27</sup>

In the same way that success in public health is an indicator of a successful nation, failure in this field is an indicator of a state's failure to govern itself, a sentiment echoed by Article V of the Platt Amendment. These harsh statements, reproduced in the monthly bulletin from the Department of Public health and Sanitation, were followed by a scathing response from Dr. Juan Guiteras, Director of Public Health at the time: "The statements in your editorial, in so far as they refer to conditions in Cuba since the last intervention, are absolutely erroneous."<sup>28</sup> A listing of statistics demonstrating Cuba's state of good health follows this assertion along with a harsh question directed at why U.S. journals insist on publishing such written assaults on Cuban welfare: "Is it that we have managed to keep smallpox out of our territory, though we are in communication with your States, where the disease prevails?"<sup>29</sup> Here we see the first example of a Cuban leader boasting of the level of public health achieved on the island. This example shows how refuting claims of poor public health is related to refuting claims of an incapable government and people. It is also interesting to note the comparison made between Cuba and the U.S. in the last quotation. In demonstrating a case in which Cuba is held in a higher regard than the neocolonial power, Dr. Guiteras makes his strongest case for the success of the island's health system and echoes a sentiment similarly held by Fidel Castro in postrevolutionary Cuba.

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<sup>27</sup> Editorial from *Army and Navy Journal* (Oct. 1910) reproduced in Juan Guiteras, "Seccion Miscelanea," *Sanidad y Beneficencia*, 5:1 (Jan. 1911): 79.

<sup>28</sup> *Ibid.*, 80.

<sup>29</sup> *Ibid.*, 80.

Yet another source of the Cuban inferiority complex stemmed from claims that the island was simply uninhabitable, particularly to people of European descent. Again, a physician takes it upon himself to refute such claims against Cuba and its people:

[Professor Le Dantec] establishes the general law, which he considers applicable to all the colonies of the Antilles, which he expresses in the following terms. *The warm regions of America are not colonies fit for population by the white race. They are colonies for agricultural exploitation; but they are above all colonies for population by the negro race and half breeds.* The Learned professor of exotic pathology of the Medical School of Bordeaux, could not have imagined that, in the course of time, and as the result of sanitary measures which have not yet become general in his country, the island of Cuba would offer to the world an even lower death rate than that of France, and would furnish to white immigrants from all countries more certain guarantees of health than any of the French or other European colonies throughout the world, with the only exception of Australia.<sup>30</sup>

Dr. Barnet refutes international critique of Cuba's poor health status and mentions their superiority over these countries through statistical measures.

Another example of such literature can be seen in Dr. Le Roy's "Sanitary Improvement in Cuba as Demonstrated by Statistical Data." Although written almost ten years later in 1921, it is clear that these global perceptions of Cuba still persisted:

Through ignorance and other causes the island of Cuba and especially the capital, the city of Havana were considered unhealthy on account of the climate, and deadly to foreigners. The falsity of the 1<sup>st</sup> statement was completely shown by the climatological studies carried on, particularly by the one presented by the Rev. Mariano Cutierrez Lanza at the second scientific Pan-American Congress held in Washington in 1915. The injustice of the second is evidenced by the analysis of the vital statistics, particularly from the day that Gorgas put in execution Finlay's doctrines, which exiled the phantom of yellow fever.<sup>31</sup>

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<sup>30</sup> E. B. Barnet, "Tropical Diseases in Cuba," *American Journal of Public Health* 2:8 (Aug 1912): 637 (emphasis mine).

<sup>31</sup> Jorge Le Roy. "Sanitary Improvement in Cuba as Demonstrated by Statistical Data," *American Journal of Public Health* 11 (1921): 1048.

These two examples perfectly illustrate the usage of health statistics to establish Cuban legitimacy in the context of international dismissal of the island as uninhabitable for foreigners. With the Platt Amendment's equating a failure in public health to a failure in government, general racism toward Cuban citizens, and claims of the island's inability to maintain sanitary conditions, the Cuban inferiority complex was well founded. Furthermore, these emphases on health standards made asserting success in the field of public health a means for battling this sense of inadequacy.

**Conclusion:**

Whether it be a response to Cubans questioning the Spanish Crown's authority during the wars for independence, the U.S. questioning itself in its occupation of the island, or Cubans battling their global and national inferiority complex, there is a historical pattern of utilizing health to establish national legitimacy. Furthermore, we have seen that this pattern is independent of governing body and independent of political ideology. Although the examples with Spain and the United States show continuity across different countries' administrations, it is important to note that this role of health crescendos for the early Cuban Republic under the Platt Amendment. As the need for legitimization grew, so did the proclamations of good national wellbeing through health statistics.

With this history, we are able to see a historical context emerge that provides inspiration for the current Cuban government's political use of public health and medicine. Nations such as the U.S. often criticize Castro's regime for its dictatorial, anti-dissent nature; however, Castro's announcements of Cuban success in providing

healthcare for all and obtaining higher health standards than other world powers is a way to legitimize his administration. Again, this thinking can be linked to the past.

Hirschfeld sums up the historical use of public health on the island: “The ritual recitation of these sanitation accomplishments to visiting journalists and U.S. public health professionals served a dual purpose of discrediting the previous regime [...] and diverting attention away from the dictatorial exercise of power and personalism that typically characterized [the caudillos’] rule.”<sup>32</sup> While she is referring to caudillos using health to delegitimize the previous regime and emphasize the success of the current one, this statement is just as applicable to Fidel Castro’s government. For the current Cuban government, public health is not only for the benefit of the people but a way of legitimizing state authority despite an oppressive regime.

We can draw interesting parallels between the past and the present politicization of health. For example, the Cuban government’s response to the 1997 dengue fever epidemic mirrors Spain’s dismissal of Carlos Finlay’s findings and recommendations regarding the cholera epidemic. In 1997, an outbreak of dengue fever erupted; however the Cuban press, under governmental pressure, was slow and hesitant to report it.<sup>33</sup> Furthermore, physicians were prevented from formally diagnosing the disease, instead calling it simply a virus.<sup>34</sup> Once the epidemic reached an undeniable number of individuals, the Cuban government was forced to formally acknowledge the outbreak; however, this came after a considerable amount of deaths had occurred. Cuban physician Dr. Desi Mendoza Rivero publically criticized this dangerously latent acknowledgement

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<sup>32</sup> Hirschfeld, *Health, Politics, and Revolution in Cuba since 1898*, 151.

<sup>33</sup> *Ibid.*, 74-75.

<sup>34</sup> *Ibid.*, 73.

and state denial, which resulted in his arrest.<sup>35</sup> In these Spanish and Cuban cases, although separated by more than a century, the governmental power similarly dismisses any public statement that might indicate a weakness in public health to maintain a favorable state reputation.

The recitation of health statistics to establish governmental legitimacy and even supremacy is also a trend that extends across the pre and post-Revolution eras. In 1985, Castro officially declared that Cuba would cease comparing its health statistics with countries of similar, undeveloped states, and instead compare its statistics with the United States.<sup>36</sup> This statement is similar to Dr. Guitera's listing of Cuba's impressive health statistics and assertion that Cuba had a lower incidence of smallpox than the U.S. Dr. Barnet's claim that Cuba had better health standards than France and European colonies is also similar to Castro's words. With these examples, we see the similarity of not just using health statistics as objective measures of the success of a state, but as a means of exerting Cuba's place internationally among developed world powers.

An overarching theme that emerges from this analysis centers on this concept of continuity over the pre- and postrevolutionary eras. Too often we view 1959 as an ending point or starting point in Cuban history. Instead, we must keep in mind the historical context from which the Revolution evolved. This exploration of Cuba's past use of public health to legitimize and justify state control is one example of this continuity.

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<sup>35</sup> Amnesty International, "Further Information on Imprisoned Doctor: Dr. Desi Mendoza Rivero, Cuba," *AMR* 25/28/97 (Nov. 97).

<sup>36</sup> Feinsilver, "'World Medical Power': The Politics of Symbolism," 5.

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