

## GUEST EDITORS' NOTE

In recent years the field of international health has become the subject and object of a scholarly renaissance, which has drawn attention to the field far beyond the previous purview of experts, institutional insiders, and occasional critics. The study of international health, its motives, principles, priorities, and paradigms – and its dual political and public health underpinnings—has generated healthy debate and sometimes caustic critique, all pointing to the centrality of the field to current and past international relations, national and local level health conditions, and public policymaking.

Despite this renaissance, most scholarly work on international health tends to use the analysis of international health's "supra-institutions" as a point of departure. The following collection of articles explores international health over the course of the 20<sup>th</sup> century through different lenses, recognizing international health to be a dynamic arena in which local actors (unions, healers, citizens), national authorities, research and policy specialists, transnational professionals, and international agencies interact and shape and reshape one another.

Latin America is a particularly fruitful vantage point from which to investigate the ideologies, institutions, and practices of international health, given the region's public health concerns rooted in 19<sup>th</sup> century state-building projects, its political movements and social activism, cultural and educational institutions, long engagement with the international arena – whether instigated from within or without – and relentless history of hope amidst ongoing economic and political problems. Of course, the region is also enormously diverse, and the articles here examine both local particularities and common themes, covering a variety of approaches, perspectives, and methodologies. This work also reflects the significant growth over the past 15 years of the field of history of public health in Latin America and the Caribbean and indicates the consolidation of an area of inquiry that has matured and become both institutionalized and professionalized.

This issue of *História, Ciências, Saúde – Manguinhos* brings together a set of papers by historians, political scientists, and a sociologist – all specialists in Latin American public health and health policy, almost all of whom presented their research at a workshop entitled "Latin American Perspectives on International Health," held at the University of Toronto from 5-7 May, 2005 and organized by Anne-Emanuelle Birn. (Other papers presented at the workshop will appear in special issues of the *Canadian Bulletin of Medical History* and the *Canadian Journal of Public Health* in 2007.) We are most grateful to the Social Sciences and Humanities Research Council of Canada, Associated Medical Services, Inc., the Canada Research Chairs Program, the Connaught Fund for International Symposia, the Lupina Foundation and the Comparative Program on Health and Society, as well as to various units of the University of Toronto both for their generous sponsorship of the workshop, and for directly and indirectly making this special issue of *História, Ciências, Saúde – Manguinhos* possible. In addition, we would like to thank PAHO-Brazil for its support in the translation of some of the articles.

The aim of this special thematic issue is to stimulate debate in Brazil and throughout the Americas on international health from a historical perspective. Our effort to translate

the English-language articles into Portuguese – which appear alongside pieces originally written in Spanish and Portuguese— is intended to make them more accessible and thus to multiply the number of both historians and public health/collective health specialists in Ibero-American countries interested in the topics presented here. At the same time, we hope to open up the field of history of international health from a Latin American perspective beyond the Ibero-American world. To meet this objective, all of the translated articles will also be available in English in the electronic version of this journal issue at [www.scielo.br/hcsm](http://www.scielo.br/hcsm).

Given Latin America's long engagement with international health agencies and programs – most notably the Pan American Sanitary Bureau (now the Pan American Health Organization, or PAHO), the world's first international health agency – the region offers an especially useful standpoint from which to analyze the historical trajectory and current renewal of the field. Latin America's experiences with international health range from the long-time relationship between Central America and U.S. aid, intervention, and public health models, to southern South America's closer ties to French approaches and traditions, to the larger settings of Mexico and Brazil playing various international and domestic influences against one another. Many countries in the region not only creatively adapted international programs to suit local institutional, political, and popular needs but also provided innovations to the international health system. Yet to date we know little about these national-international interactions or about how international health has shaped and been shaped by local efforts. As we will see in the multidisciplinary papers included here, Latin America's role in international health has been at times pivotal, and at times on the margins of global efforts, but remains ever engaged with the issues, ideologies, and main actors of the field.

The issue begins with Paul Weindling's exploration of the League of Nations Health Organization's involvement with Latin America. He demonstrates that the ties and projects between Latin Americans and European-based public health interests – many ultimately unfulfilled – were far more extensive than previously believed and that Geneva served as an important social-medicine-oriented counterpoint to the Washington-based Pan American Sanitary Bureau. The paper shows that the international exchange of experts and expertise was multi-faceted and multi-directional, with Latin American support for the League of Nations Health Organization becoming increasingly important in the midst of rising political tensions in the 1930s.

Steven Palmer's examination of Rockefeller Foundation hookworm campaigns in the Caribbean focuses on how the exigencies of a public health project that sought to make biomedicine intelligible to the medical belief systems of the subject populations combined with the knowledge of local Rockefeller staff members of Indo-Caribbean descent to generate a set of fascinating experiments in ethno-medical translation. The article challenges the view that the Rockefeller Foundation's pioneering ventures into international health were governed by rigid biomedical principles.

Juliana Martínez Franzoni, a sociologist by training, seeks to address a gap in the political science literature on health – that of the role of available policy options circulating internationally – using recent Costa Rican health reforms as a case study to show how public policy is formulated. Her theoretical contribution of the “selective emulation” of available alternatives to explain why particular reforms were adopted (and how they were adapted) in the Costa Rican context offers an important avenue for historical analysts and analyses grappling with the relation between national developments and international models.

Theodore Brown, Marcos Cueto, and Elizabeth Fee take up the emergence of the term “global health” and the World Health Organization’s attempts to place its own efforts within this new paradigm as a means of institutional survival amidst a now crowded field of actors. They show how, starting in the 1980s, the WHO began to refashion itself and re-position its role in the coordination, strategic planning, and leadership of various “global health initiatives,” responding to a rapidly transforming international context.

Political scientist Antonio Torres-Ruiz employs a critical analysis of globalization theory in an explanation of the impact of – and interplay with – global HIV/AIDS activist and policy networks on Mexico’s HIV/AIDS policy formulation. He emphasizes the contrast that exists between, on one hand, exclusive public policy networks, such as those that have characterized the process of structural adjustment reforms, and on the other hand, the public policy networks that work in the field of HIV/AIDS, which are marked by their inclusive and democratic features.

Anne-Emanuelle Birn examines the little-known case of Uruguay’s role in the forging of an international child health and welfare institute in the 1920s. In tracing the links between Uruguayan public health specialists and their foreign counterparts in the ongoing search for effective means of addressing Uruguay’s infant mortality problem, she shows that child health ideas and practices circulated internationally rather than being diffused from the metropole. This study suggests that understanding the evolution of national and international public health requires analysis of the intricate process of give and take – and multidirectional travel – of scientific ideologies, policies, and practices.

Enrique Beldarraín Chaple discusses one of the most innovative aspects of international health from a Latin American perspective: the Cuban experience in health cooperation. With a direct impact in terms of building solidarity among developing countries in Latin America and elsewhere, this aid played an important politically symbolic role during the Cold War, when Third World countries often served as pawns between East and West. Cuban health cooperation has also prompted wider debate over the structure of foreign aid, the power differences between donor and cooperant, and the role of health internationalism in the construction of Cuba’s external image and national identity.

Klaudia Dmitrienko’s article covers the unexplored topic of Canada’s late-to-start relationship with the Pan American Health Organization. The author analyzes the official government reasons for the delay as well as the larger political and social context that determined these decisions. The paper helps explain how and why Canada – whose role in Latin America has been far overshadowed by that of the United States and Europe – has filled an on-again, off-again distinctive niche in international health in the region, at times following the U.S. lead, but at times forging its own way, for example in supporting health and human rights approaches during the Central American civil wars in the 1980s.

Marta de Almeida examines the theme of Latin American networks of scientific exchange, particularly in the areas of medicine and public health in the early decades of the 20th century. She discusses the Latin-American Medical Congresses and the International Hygiene Exhibitions as crucial moments of a large and intense Latin American movement which spurred the growth of scientific exchange and the professionalization of medicine. The author’s portrayal contrasts with extant images of non-existent intra-regional interchange in this period.

Accompanying this compilation is an interview with Elizabeth Fee, historian, chief of the History of Medicine Division of the National Library of Medicine in the United States, and author of countless books and articles that have shaped the field of history of public health. In

this interview, which took place during her visit to the Oswaldo Cruz Foundation in April 2006, Elizabeth Fee discusses her professional trajectory, her research objectives, and her major publications. She also talks about the “Global Health Histories” project sponsored by the WHO, and of which she is one of the key players.

This collection, we hope you will agree, offers an important opening to a dynamic arena of scholarship which will be pursued through new seminars, publications, theses and dissertations, and which will reinforce the ties among history, the health of populations, and the field of international health.

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Anne-Emanuelle Birn and Gilberto Hochman