

Consortium on Law and Values in Health, Environment & the Life Sciences

Student Proposal Cover Page

Applicant Information

Applicant Name: Marianne Beth Samayoa Date: Feb 7, 2007
Project Title: Shaping Healthcare in Post-Colonial Latin America: Mexico, Guatemala, and Cuba in Transition
Department: History College: College of Liberal Arts
Home address: 745 Lamplight City & State: Hazelwood, MO Zip: 63042
Faculty advisor name: Sarah C. Chambers Email: chambers@umn.edu Not applicable
Dept. Head's name: Eric Weitz Dept. Head's email: weitz004@umn.edu
Dean's name: Steven Rosenstone Dean's email: rosen060@umn.edu

How did you hear about this funding opportunity? Email

Funding

Amount of funding requested: \$5217.00

Funding justification: [a clear statement of what you will use the funds for without going into budget details]

I will travel to Guatemala in Summer, 2007 to conduct archival research at the National Archive of Central America, the National Library of Guatemala, and the university libraries in Guatemala where I will find documents related to establishing systems for providing and legislating healthcare in nineteenth-century Guatemala.

Approvals

Check all appropriate approvals required for your proposal. Approvals must be obtained prior to receipt of funding. If you have applied for approval but have not yet received it, indicate that below.

IRB Date submitted: _____ Number: _____
 IACUC Date submitted: _____ Number: _____
 Other Explain: _____

For Use by the Consortium Office

The proposal is 1000 words or less excluding budget, biographies, references and citations.
 The proposal includes a work plan with a specific timeline using months or quarters to identify work to be done and completion dates.
 The proposal includes a 1-2 paragraph biography of the applicant and all co-investigators.
 The budget form is complete including the funds sought for this project, other pending applications for this project, and the amount/source of matching or other funds.

The applicant's faculty advisor is copied on the application email. Professional students w/o advisors check NA.

All necessary approvals are pending or received.

MARIANNE SAMAYOA

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samay003@umn.edu

Dissertation title: *Shaping Healthcare in Post-Colonial Latin America: Mexico, Guatemala, and Cuba in Transition*

Advisor: Sarah C. Chambers, Department of History, University of Minnesota-Twin cities

Project Overview:

My goal is to understand how multiple groups and their conflicting demands modified the structure of public health services in similar circumstances of societies in evolution, revealing how patients and health care providers influenced health care and public health administration. While I am requesting funds for research in Guatemala, my overall dissertation project will analyze healthcare at the end of the colonial period in Mexico and Guatemala, as a basis for comparison with nineteenth-century Cuba under continued Spanish control. The goal of my research is to understand the forces that shaped healthcare and the implications of the policies that were enforced.

Timeline:

March 2006: Completed preliminary exams

Summer 2006: Project development during the Andrew W. Mellon Foundation

DISSERTATION SEMINARS IN THE HUMANITIES: "Comparative History of the Early Modern World" with Prof. Carla Rahn Phillips

Fall 2006: Dissertation research in Mexico City to examine the Mexican portion on my dissertation topic.

Spring 2007: Dissertation research in Spain to examine the Cuban portion of my dissertation topic as well as research on the colonial period for the Mexican and Guatemalan portions.

Summer 2007: Proposed dissertation research in Guatemala to examine the Guatemalan portion of my dissertation topic.

2008-2009: Write a full draft of my dissertation, develop publications and conference papers.

Spring 2009: Early date for completion of dissertation.

Biography:

I am currently a PhD Candidate in the History Department at the University of Minnesota-Twin Cities, with an interest in the history of Latin America and Latin American healthcare. I speak and read Spanish with native-level fluency. My experience with research in Spanish and Latin American archives includes work with Professor Mark Burkholder, University of Missouri, on his prosopographical study of Audiencia ministers (judges) in Spain and America, 1512-1833, and an on-going collaborative prosopographical study of the ladies-in-waiting at the Spanish court of Charles IV, 1789-1833. I have also worked with Professor Martha Few, University of Arizona on her research on colonial medicine in Guatemala.

My primary interest in medicine in colonial Latin America has focused on the efforts of individuals to obtain medical services amid government legislation that sought to enforce medical standards. My studies of the history of healthcare in Latin America and its implications for individuals within their society began with a collection of documents that included patients' letters to a doctor in colonial Latin America. This collection was the starting point for my undergraduate research project, which led me to create the calendar for the Lanning Manuscript Collection at the University of Missouri-St. Louis. I am proud to have won the Roy Porter Student Essay Contest administered by the Society for the Social History of Medicine, with my essay "More than Quacks: Seeking Medical Care in Late Colonial New Spain," which served as a foundation for my Master's Thesis, "Curing an Empire: Medical Care in Late Colonial Latin America." Working with Professor Sarah Chambers, I am interested in following the trajectory of Latin America past the colonial period, into early nationhood to examine the forces that shaped modern society and, in particular, healthcare.

Project Proposal: *Shaping Health Care in Post-Colonial Latin America: Mexico, Guatemala, and Cuba in Transition*

How did political struggles ensuing from independence shape the health care systems in the new Spanish American nations? Rather than studying medical institutions in isolation, my research examines how public policy functioned as an interactive system. Specifically, I analyze how the interaction of groups and individuals with legal and medical professionals employed by the state shaped the foundations for today's health care systems in the emerging nations of Mexico and Guatemala as compared to Spanish colonial Cuba. This comparative approach will allow me to assess the degree to which national politics and European trends in managing health care since the 18th century respectively shaped healthcare in the 19th century. Many recent studies of the early national period have shown that the collapse of the Spanish monarchy in America created openings for previously excluded groups to participate in political mobilizations and press claims for citizenship rights. I will test whether this opening also allowed midwives, unlicensed practitioners, and popular healers (both male and female) to practice with less repression from still relatively weak states despite increasing efforts at regulation.

The goal of my research is to analyze how local traditions and politics shape the effectiveness of public health policies. For almost four hundred years, the Spanish crown controlled medical care in Spain and then its American colonies with the Royal Protomedicato. This institution established public policy and regulated all medical services: medical education, licensing of doctors, authorizing the practice of midwives, prosecuting curanderos (healers), inspecting pharmacies, administering hospitals, funding

research expeditions, and organizing vaccination campaigns. In the eighteenth century, the protomedicato had begun to modernize education and crack down on unlicensed practitioners and popular methods of healing. My dissertation will focus on the period from 1810-1860, starting with the systems that were in place at independence, and analyzing how they adapted to — and were influenced by — the demands of the people in the new nations. This transitional period has received little attention despite its importance to understanding the foundations of contemporary healthcare systems. The value of a comparative study is that as government bodies implemented policies during a period of political upheaval, resistance to the new policies created variations in healthcare administration.

My dissertation looks at the intersection of transnational trends toward the modernization, professionalization, and regulation of healthcare in the 18th- and 19th-centuries with their local application in diverse societies under or just coming out of colonialism. I will focus on four of the primary functions of the Protomedicato that were reorganized in the 19th century: (1) medical education (which was governed by overlapping powers of universities and the central government); (2) legal authorization to practice medicine (including licenses and the courts that prosecuted illegal healers); (3) vaccination campaigns (a point of intersection of public policy and individual compliance); and (4) midwives and illegal healers (as case studies of resistance on the part of both providers and the patients who chose to utilize their services).

The Protomedicato was abolished and the healthcare system reorganized in both Mexico and Spain (including Cuba) during the 1820s. Guatemala had a more complicated transition: independence from Spain and the total separation of a system that

had interacted with the Mexican medical world. Before the Protomedicato was officially established in 1793, its functions were unsystematically shared by the Mexican Protomedicato, Guatemalan judicial offices, and the university professor who acted as regional protomédico. At the time of independence, the new government did not appoint a new protomédico; nor did it support the ambitious smallpox vaccination campaign or fund the modernization of the medical school initiated in the late colonial period. Ten years later, medical students were still petitioning the government for the reestablishment of medical institutions, from schools to hospitals. Guatemala had a large indigenous population and the eradication of native practices would prove more difficult. Ironically, the prominent medical practitioners of the late colonial period would be vital politicians in the formation of the new state. These conditions make Guatemala an important case study of how public policy is ultimately shaped by the interaction between the government and the governed and help explain the persistence of traditional medicine as a partner to modernization.

Comparing the evolution of public health in early nineteenth-century Mexico, Guatemala and Cuba is an ambitious, but obtainable goal. Although my research will address the lack of attention to the early nineteenth century, I can build upon the considerable secondary literature on medical institutions—from hospitals, pharmacies, and universities to religious healing—during both the colonial period and the late 19th into the 20th centuries. With funds from a Doctoral Dissertation Research Grant from the Andrews-Hunt fund and the Graduate School of the University of Minnesota, I worked in the Mexican archives in September and October, 2006, to examine documents from the early national period related to legislating medical care, administering health care

facilities, and punishing unlicensed healers. For Cuba, the same types of documents are available in archives in Havana, Madrid, and Seville. With funds from the Lydia Cabrera Lydia Cabrera Award from the Conference on Latin American History, 2006, I will travel to Spain in February and March, 2007. The History Department has generously provided funds to cover some of the travel expenses to these research sites. A fellowship from The Consortium on Law and Values in Health, Environment & the Life Sciences will allow me to examine the sources in Guatemalan archives and libraries in 2007 to complete my study of the social and political forces that shaped the medical world of post-colonial Latin America My methodology— which is both comparative and combines approaches from legal history, political history, and the history of medicine—will yield results that are attentive to the specific contexts of these countries while advancing our understanding of public policy formation and implementation during transitional periods.

Select Bibliography of Medicine in Colonial Latin America

- Abel, Christopher. *Health, hygiene, and sanitation in Latin America c.1870-c.1950*. London : Institute of Latin American Studies, University of London, 1996.
- Armus, Diego. editor. *Entre Médicos y Curanderos: Cultura, Historia y Enfermedad en la América Latina*. Buenos Aires: Grupo Editorial Norma, 2002.
- Campos Díez, María Soledad. *El Real Tribunal del Protomedicato Castellano, Siglos XIV-XIX*. Cuenca: Ediciones de la Universidad de Castilla-La Mancha, 1999.
- Hernández Sáenz, Luz María. *Learning to Heal : The Medical Profession in Colonial Mexico, 1767-1831*. New York: Peter Lang, 1997.
- Iborra, Pascual. *Historia del Protomedicato en España, 1477-1822*. Valladolid: Universidad de Valladolid, Secretariado de Publicaciones, 1987, 1885.
- Lanning, John Tate. *The Royal Protomedicato: The Regulation of the Medical Professions in the Spanish Empire*. Edited by John Jay TePaske. Durham: Duke University Press, 1985.
- Martínez Durán, Carlos. *Las Ciencias Médicas en Guatemala; Origen y Evolución*. Guatemala: Tipografía Nacional, 1945
- Módena, María Eugenia. *Madres, médicos y curanderos: diferencia cultural e identidad ideológica*. México: Centro de Investigaciones y Estudios Superiores en Antropología Social, 1990.
- Samayoa, Marianne B. "Curing an Empire: Medical Care in Late Colonial Latin America." Masters Thesis, University of Missouri-St. Louis, 2004.
- . "More than Quacks: Medical Care in Late Colonial New Spain, Society for the Social History of Medicine 19, no. 1 (2006): 1-18.

Funds Sought and Purpose:

I am seeking \$5,217.00 from the Consortium on Law and Values in Health, Environment & the Life Sciences in order to fund my living stipend and research expenses for summer research in Guatemala.

Research Budget, Summer 2007:

I foresee two separate types of expenses:

(1) A living stipend to pay for my living expenses and travel in Guatemala City and Antigua, Guatemala in Summer, 2007:

I plan to spend most of the summer in Guatemala City and the City of Antigua, Guatemala, conducting archival research. Expenses include housing, fees for computer use and making digital images, and about \$25 a day for transportation to the archives and libraries. Time not spent in Guatemala will be spent in St. Louis, Missouri, using the sources in the Lanning Manuscript Collection and organizing sources found in Guatemala. My estimate is based on full-time work at the rate that I am currently paid as a Research Assistant for the Minnesota Population Center and as research assistant to Professor Sarah Chambers.

$30 \text{ hours} \times 9 \text{ weeks} \times 16.99 = 4587.00$

(2) The cost to hire a local researcher to assist me with archival research:

In addition to charging for the privilege of bringing a computer into the archive and fees for taking digital images of documents, the Guatemalan archives limit the number of documents that can be viewed per researcher, per day, as well as limiting the number of copies per researcher. Since there are few guides and indexes to the collections, hiring a local researcher will allow me examine more potentially useful documents. I am calculating an average of 10 hours per week for this assistance.

$\$7.00/\text{hr} \times 90 \text{ hrs} = \630.00

I will incur travel expenses in order to travel to Guatemala. This will be covered by a history department Summer Research travel grant and personal funds.

Funds Pending:

I have applied for the Social Science Research Council's International Dissertation Research Fellowship. I will not learn the result of this highly competitive fellowship until the end of the Spring 2007 semester.

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Budget for Student Proposals

Shaping Healthcare in Post-Colonial Latin
America: Mexico, Guatemala, and Cuba
in Transition

Project Title:

Instructions: add rows for multiple personnel.

Category	Description & justification	Requested funding	Matching/other funding	
		Amount	Amount	Source
Personnel Explain what hourly wage & fringe are based on--departmental, community or other rate? My estimate is based on full-time work at the rate that I am currently paid as a Research Assistant for the Minnesota Population Center and as research assistant to Professor Sarah Chambers.	Salary = 30 hrs x 9 weeks x 16.99 hrly wage	4587		
	Fringe rate			
	What work will this person do? This person will conduct archival research in Guatemala, create indexes to sources, and write an article based on this research.			
	Subtotal	4587		
Personnel Explain what hourly wage & fringe are based on--departmental, community or other rate? My estimate is based on estimates from colleagues for the cost of hiring an assistant in Guatemala.	Salary = 90 hrs x 7.00	630		
	Fringe rate			
	What work will this person do? This person will assist in archival research in Guatemala.			
	Subtotal	630		
Travel Travel costs must include a description of the purpose of the travel, start and stop dates of travel, transportation costs, housing costs, and allowable per diem (use University rates found at http://travel.umn.edu).	Travel to Guatemala will be covered, in part, by a history Department travel grant. Ground transportation in Guatemala, and other additional expenses (housing, per diem and research expenses) will be covered with the salary requested.			
	Subtotal research supplies, equipment, travel, other			
TOTAL BUDGET		5217		