

Modern Infrastructure as a Flagship of “Civilized” Nations: Envisioning and Constructing New Healthy Spaces for Uruguayan Children (1900s to 1930s)

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ABSTRACTS

A vast reform project put forth by the liberal *batllistas*, a name that goes back to two-time president José Batlle y Ordoñez (1903–1907, 1911–1915), brought the small republic of Uruguay the fame of being Latin America’s first welfare state. This image dates back to legislative projects such as the eight-hour working day (1915), but also to the construction of state infrastructure such as hospitals and open-air schools for children with a “predisposition” to tuberculosis. However, the image of a modern welfare state was also carefully orchestrated by the Uruguayan reformers who presented social policies as indicators of progress to international audiences. This paper looks at the intersection of the planning and construction of institutions for Uruguay’s citizens of tomorrow that followed the most “modern” scientific standards of hygiene, and the role that these spaces played in the reformers’ efforts to underline Uruguay’s rightful membership in the imagined community of “civilized” nations.

Ein umfangreiches Reformprojekt der liberalen Batllistas, ein Name, der auf den zweimaligen Präsidenten José Batlle y Ordoñez (1903–1907, 1911–1915) zurückgeht, brachte der kleinen Republik Uruguay den Ruhm ein, der erste Wohlfahrtsstaat Lateinamerikas zu sein. Dieses Image geht auf Gesetzesvorhaben wie den Achtstundentag (1915) zurück, aber auch auf den Bau staatlicher Infrastrukturen wie Krankenhäuser und Freiluftschulen für Kinder mit einer „Veranlagung“ für Tuberkulose. Das Bild eines modernen Wohlfahrtsstaates wurde jedoch auch von den uruguayischen Reformern sorgfältig inszeniert, die ihre Sozialpolitik dem internationalen Publikum als Indikator für Fortschritt präsentierten. Der Beitrag untersucht die Zusammenhänge zwischen der Planung und dem Bau von Einrichtungen für Uruguays Bürger von morgen,

die den „modernsten“ wissenschaftlichen Hygienestandards folgten, und der Rolle, die diese Einrichtungen in den Bemühungen der Reformer spielten, die rechtmäßige Zugehörigkeit Uruguays zur imaginären Gemeinschaft der „zivilisierten“ Nationen zu unterstreichen.

1. Introduction

In 1910, the Uruguayan republic glamorously participated in the Brussels International Exposition. The government under the liberal president Claudio Williman had spared no efforts to present the small country’s progress and advances to the world.¹ The Uruguayan exhibition at the world’s fair was underscored by a 250-page brochure in French and Spanish that was published by Uruguay’s chamber of commerce.² Among other things, the authors of the brochure emphasized that the capital Montevideo had “all the conditions and conveniences of the world’s most advanced cities”, that Uruguay’s climate surpassed that of countries such as England, France or Germany, how its soil was richer than that of all European and North American countries, and how Uruguayan workers were paid better than their comrades in the rest of the Americas and Europe.³ Progress was thus best measured in comparison to other “civilized” countries – an imagined transatlantic community to which Uruguayan states- and businessmen claimed their belonging in Brussels.

Uruguayan ambassador to the Netherlands Virgilio Sampognaro published a second, lengthier study for the distribution among the audience in Brussels, this time solely in French.⁴ Introduced with the aim to “make a new people known in Europe”,⁵ this eleven-chapter book spanning almost 400 pages covered topics such as terrestrial and maritime commercial routes and Uruguayan industries, but also devoted chapters to the situation of the working class, public assistance, and public education. The praise for these last two branches of state- and nation building included a detailed enumeration and physical description of the respective institutions. These descriptions then contributed to the overall conclusion that precisely new schools, social legislation, and modern institutions were key to the nation’s transcendental democratic vision, and that the book had shown how Uruguay deserved a place among the countries with the “most vital forces”.⁶

This article looks at exactly this intersection between the imagined world of civilization and progress, to which Uruguayan statesmen and reformers claimed a belonging in the early twentieth century, and the concrete social, hygiene, and educational infrastructure

1 D. Calvar, La exposición universal de Bruselas (1910): Una vidriera para los logros del batllismo, in: *Revista Encuentros Uruguayos* 14 (2021) 2, pp. 1–31.

2 Cámara Mercantil de Productos del País, *El Uruguay en la exposición de Bruselas: Folleto expresamente preparado para distribuirlo entre los visitantes de la sección uruguaya en la gran exposición internacional de Bruselas*, Montevideo 1910.

3 *Ibid.*, pp. 6, 13, 19, 71. All translations from Spanish, French, and German to English are provided by the author.

4 V. Sampognaro, *L’Uruguay au commencement du XXe siècle*, Brussels 1910.

5 *Ibid.*, preface.

6 *Ibid.*, p. 395.

that was built and reformed in order to substantiate this belonging. More particularly, the article focuses on the construction of a new hospital for women and children and on the development of open-air schools for children who were considered prone to developing tuberculosis. The two institutions departed from a common denominator: efforts in the realm of child health were both a well-established “currency” of civilization, and the best means to secure a nation’s future. As Uruguayan physician and reformer Sebastián Rodríguez put it in a presentation on school hygiene at the Third Latin American Medical Congresses that took place in Montevideo in 1907: School children had to be protected and saved since they constituted the “new generations which tomorrow will build the basis for the material and moral power of the nation”.⁷

The broader political context within which these reforms took place is intimately linked to the figure of José Batlle y Ordoñez, who governed the country from 1903 to 1907 and was campaigning for his second term (1911–1915) during the world’s fair in Brussels.⁸ Batlle y Ordoñez, who belonged to the liberal Colorado party, and his comrades-in-arms – called *batllistas* – dominated national politics in Uruguay during the first three decades of the twentieth century. After decades of violent conflicts between the *colorados* and their opponents – the conservative *blancos* – the Uruguayan state first consolidated during the 1870s before witnessing a massive expansion with the beginning of Batlle y Ordoñez’ first presidential term (1903–1907). The first three decades of the twentieth century, often summarized as the *primer batllismo*, were also a formative period for Uruguayan national identity, and this identity formation was no mere by-product, but an active undertaking of the *batllistas*. They aimed at nothing less than the construction of a *país modelo* (model country) for progressive politics, as Batlle y Ordoñez formulated famously in a 1910 letter to a close collaborator.⁹

Key characteristics of this model country were the expansion of state institutions and economic interventionism. The growing state was financed thanks to Uruguay’s flourishing cattle industry. In contrast to neighbouring countries, the *batllistas* also successfully incorporated organized labour into their reform project, and even motivated sectors of the anarchist labour movement to endorse the state.¹⁰ As we have already seen in Virgilio Sampognaro’s 1910 monograph, the expansion of (higher) public education, new labour laws that regulated working hours and conditions and provided compensation in cases

7 S. B. Rodríguez, Contribución al desenvolvimiento de la higiene escolar en algunos países sudamericanos: Anteproyecto y reglamentación para el Cuerpo Médico Escolar en el Uruguay, in: J. Pou Orfila (ed.), Actas y trabajos del Tercer Congreso Médico Latino-Americano: Tomo IV, Montevideo 1908, pp. 376–377. On the Latin American medical congresses, see D. González de Reufels and T. Huhle, Transnational Events and National Health Reform: The Latin American Medical Congresses and the Legitimization of Public Health Reforms in Chile and Uruguay in the Early Twentieth Century, in: J. Kuhlmann and F. Nullmeier (eds.), Causal Mechanisms in the Global Development of Social Policies, Cham 2022, pp. 337–368.

8 This leads Didier Calvar to interpret the Uruguayan participation in the fair as a “glass cabinet” for batllismo. See Calvar, La exposición universal de Bruselas.

9 G. Caetano, La vida política, in: G. Caetano (ed.): Reforma social y democracia de partidos: 1880–1930, Madrid 2016, pp. 35–84, at 57.

10 L. Peterson, In the Shadow of Batlle: Workers, State Officials, and the Creation of the Welfare State in Uruguay, 1900–1920, PhD thesis, University of Pittsburgh, 2014, chapter 4.

of workplace accidents, among other things, were also elements of the *república batllista*. In the realm of hygiene and public health, the emphasis lay on the nationalization and secularization of public provisions for the elderly, sick, poor, and for infants. This shift from Catholic welfare to public assistance was symbolized by the foundation of the Asistencia Pública Nacional in 1910. Radical secularism also informed other *batllista* reform projects, such as the 1913 law that enabled Uruguayan women to divorce from their husbands without their consent.¹¹

This article argues that moral reforms such as the right to divorce, but especially labour and welfare laws and the concern for the health of Uruguayan citizens played a pivotal role in the construction and consolidation of the Uruguayan nation state during the *república batllista*. It furthermore argues that these policies cannot be understood by looking at the national political arena only. Instead, they were shaped in trans- and international venues, organizations, and exchanges.¹² Just as importantly, as this article primarily analyses, social policies and their concrete infrastructure underpinned Uruguay’s place in an imagined unity of “civilized” and “European” countries.¹³ By aiming to rank high within this circle, Uruguayan elites discursively separated their country from its allegedly “barbaric” and “less developed” neighbouring countries with larger indigenous and Afro-American populations.¹⁴ Relationships, comparisons, and demarcations such as these consolidated the idea of what “Uruguay” meant.¹⁵

Within these both tangible and imagined spaces, Uruguayan reformers presented their national “successes” to trans- and international audiences, while at the same time forming these “successes” within those spaces. Within national debates, references to international models or international applause for certain Uruguayan reform proposals both strengthened and weakened the respective proposals.¹⁶ For a long time, the historiogra-

11 T. Huhle, The Transnational Formation of a Healthy Nation: Uruguayan Travelling Reformers in the Early 20th Century (1905–1931), in: *Revista Ciencias de la Salud* 19 (2021) 3, <https://revistas.urosario.edu.co/index.php/revsalud/article/view/10153> (accessed 8 November 2022), pp. 1–22, at 8.

12 For a more systematic look at these “trans- and international interactions” see *Ibid.*

13 Following the argumentation of Madeleine Herren, the *batllistas* thus employed the strategy of “progressive small states on the periphery of power” to climb to the top of “progress oriented, socio-political hierarchies”. M. Herren, *Sozialpolitik und die Historisierung des Transnationalen*, in: *Geschichte und Gesellschaft* 32 (2006) 4, pp. 542–559, at 549–550.

14 These “barbaric” neighbouring countries followed similar goals, as the ample literature on Latin American nation building in the early twentieth century has shown. Recent examples are Leonie Schuster’s book on how local Brazilian elites strived for “the entering of Brazil into the (...) ‘civilized’ world” (L. Schuster, *Brasilianische Höhenflüge. Luftfahrtpioniere und Imaginationen von Nation und Welt in Brasilien, 1900–1922*, Stuttgart 2018, p. 21), and Julia Rodríguez’s article on fingerprints science, in which she emphasizes that Argentinian elites saw the key to “membership in the circle of advanced, ‘civilized’ nations” in the application of “scientific” principles in government and society” (J. Rodríguez, *South Atlantic Crossings. Fingerprints: Science, and the State in Turn-of-the-Century Argentina*, in: *American Historical Review*, 109 (2004) 2, pp. 387–416, at 390).

15 A. Eppe, *Relationale Geschichtsschreibung: Gegenstand, Erkenntnisinteresse und Methode globaler und weltregionaler Geschichtsschreibung*, in: *H-Soz-Kult*, 2 November 2017, <http://www.hsozkult.de/debate/id/diskussionen-4291> (accessed 26 October 2022).

16 González de Reufels and Huhle, *Transnational Events*; C. Rossel and F. Monestier, *Transnational Diffusion of Health Policy Ideas in Uruguay in the Early Twentieth Century*, in: *Journal of Policy History*, 33 (2021) 3, pp. 317–343.

phy on the *batllista* welfare state has neglected these dimensions and written national histories instead.¹⁷ However, during the last twenty years, historians working on Uruguay have also participated in the “transnational turn”¹⁸ of the history of social policies and the welfare state.¹⁹ Most relevant in the context of this analysis is the work of Anne-Emanuelle Birn, who conducts research on Uruguayan child health policies between the 1890s and 1940s, highlighting how the foundation of the Montevideo-based international organization Instituto Internacional Americano de Protección a la Infancia in 1927 placed “Uruguay on the World Stage”.²⁰

Before analysing the symbolic value attributed to the above-mentioned hospital for women and children and the open-air schools, the following section will expand on the efforts and overall discursive strategies with which the *batllista* reformers placed Uruguay on that world stage.

2. Showcasing Progressive Politics on a “European Island”

The two books that were written for the occasion of the Brussels world’s fair in 1910 belong to a genre which historian Clara Elisa van Sanden calls promotional publications, which are a set of writings from the first three decades of the twentieth century that aimed at presenting Uruguay in the best light, sharpening national characteristics, and, more concretely, attracting investments, migration, and tourism.²¹ Together with international conferences and exhibitions on different scales, these “secular catechisms”²² are of special importance when it comes to tracing how Uruguayan reformers placed their country in the community of “civilized” countries. Many of these publications – but also many national and international exhibitions – were released under the umbrella of the Oficina de Exposiciones, a state agency founded in 1910 in order to collect and produce the publications, photographs, and objects necessary to showcase Uruguay’s “national

17 E. g. I. Collazo, L. Palumbo and A. M. Sosa, *Hospital Pereira Rossell: Gestación y nacimiento de un hospital para niños y mujeres (1900–1930)*, Montevideo 2012; M. I. Vanger, *The Model Country: José Battle y Ordoñez of Uruguay, 1907–1915*, Hanover 1980.

18 C. Conrad, *Social Policy History after the Transnational Turn*, in: P. Kettunen and K. Petersen (eds.), *Beyond Welfare State Models: Transnational Historical Perspectives on Social Policy*, Cheltenham 2010, pp. 218–240.

19 See for example S. P. Bauck, *Nüchterne Staatsbürger für junge Nationen: Die Temperenzbewegung am Rio de la Plata (1876–1933)*, Stuttgart 2018; P. Dogliotti Moro, *Educación física y educación del cuerpo en el Uruguay: Jess T. Hopkins (1912–1922)*, in: *Educación Física y Deporte* 33 (2014) 1, pp. 31–50; J. Hentschke, *Philosophical Polemics, School Reform, and Nation-Building in Uruguay, 1868–1915: Reforma Vareliana and Batllismo from a Transnational Perspective*, Baden-Baden 2016.

20 A.-E. Birn, *Uruguay on the World Stage: How Child Health Became an International Priority*, in: *Public Health Then and Now* 95 (2005) 5, pp. 1506–1517.

21 C. E. von Sanden, *La imagen del Uruguay dentro y fuera de fronteras: La fotografía entre la identidad nacional y la propaganda del país en el exterior, 1866–1930*, in: M. Broquetas et al. (eds.), *Fotografía en Uruguay. Historia y usos sociales, 1840–1930*, Montevideo 2011, pp. 201–232.

22 G. Caetano, *Lo privado desde lo público: Cuidadanía, nación y vida privada en el Centenario*, in: *Sociohistórica*, 7 (2000), pp. 11–51, at 17–19.

wealth”.²³ Journalists from the *batllista* newspaper *El Día* visited the agency four months after its inauguration and reported that diplomatic personnel were among the primary recipients of the agency’s material.²⁴ Indeed, diplomats also authored several promotional pieces, as the example of Virgilio Sampognaro’s monograph has already shown.²⁵ Beyond this corpus, pieces written by the social policy reformers themselves – be it in governmental or scientific journals, on the occasion of public speeches or as conference papers – are also valuable sources in order to trace how the *batllista* state claimed its place in the circle of progress.

A case in point is a speech given by Uruguayan physician and public health official Rafael Schiaffino at a meeting at the League of Nations in July 1925 in Geneva. After a group trip through nearly a dozen European and North American countries in order to study public health policies, Schiaffino and nine other Latin American health officials gathered in Geneva and presented their group’s findings and lessons learned.²⁶ Schiaffino’s untitled speech focused on the public health problems in his home country and on how his government was tackling them. Upon giving a general introduction into Uruguayan national characteristics, he tellingly began as follows: “The whole population is from the European race; the problem of negroes and Indians does not exist, as these races have disappeared from the country over a century ago. Life in Montevideo is similar to life in European cities.”²⁷

Schiaffino used a recurrent trope here. According to historian Gerardo Caetano, throughout the twentieth century, the Uruguayan self-perception was that of a “European island” that had somehow been placed on the wrong side of the Atlantic among “barbaric” neighbours with which the small country had little in common.²⁸ On the one hand, this discourse celebrated the cosmopolitanism of Uruguay and especially its capital as a product of European migration.²⁹ On the other hand, it dismissed indigenous and Afro-American populations as non-existent in order to strengthen the idea of Uruguay’s “whiteness” as a primary marker of belonging to Europe.³⁰ When dismissing the popula-

23 En la Oficina de Exposiciones: Una visita interesante, in: *El Día*, 19 December 1911, page unknown.

24 For the self-praise of the agency see Ministerio de Industria, Oficina de Exposiciones, *El Uruguay en 1915: Sinopsis de sus riquezas y adelantos*, Montevideo 1915. The Oficina de Exposiciones not only supplied the Uruguayan embassies with propagandistic material, but also formed part of the tributes that the ministers then formulated. See *Consulat Général de l’Uruguay en France: L’Uruguay, agricole, industriel, colonisateur, minier et politique*, Paris 1914, p. 3.

25 Other examples are J. T. Abad, *L’Uruguay: Son avenir comme pays colonisateur, agricole, minier & politique. Son commerce*, Paris 1928, and O. Solé y Rodríguez, *Die Republik Uruguay*, Hamburg 1906.

26 On the broader context of the trip see Huhle, *The Transnational Formation*.

27 R. Schiaffino, *L’Uruguay*, 11 July 1925: League of Nations Archives, Geneva (Liaison with Latin America, Box 537, Folder Intercambio Sanitario Latinoamericano 1925), p. 33.

28 G. Caetano, *Las claves del período*, in: Caetano, *Reforma social*, pp. 15–84, at 16.

29 On European migration to Uruguay see T. Huhle, *Did Migrants Build the Welfare State? Migration as a Social Policy Driver in Early Twentieth-Century Uruguay*, in: F. Nullmeier, D. González de Reufels, and H. Obinger (eds.), *International Impacts on Social Policy: Short Histories in Global Perspective*, Cham 2022, pp. 477–488.

30 Schiaffino’s comment on how indigenous populations had not existed for more than one hundred years can be interpreted as a reference to the genocidal killing of the indigenous people Charrúa after gaining independence from Spain in 1830. The annihilation was succeeded by systematic negation of the existence of any

tions that were not included in that category, they were not necessarily named concretely, but excluded with the well-established contrast between “civilization” and “barbarism”, as a look back at the above-mentioned publication for the 1910 world’s fair in Brussels shows us: “In contrast to other American countries, which also need and aim for population growth, Uruguay neither has vast deserts populated with the wild man nor any kind of endemic disease, which are often the biggest perils for the life of the colonizer.”³¹ Other authors have stressed how urban Uruguayan reformers constructed the idea of their country’s “civilized” character by not only excluding indigenous and rural populations, but also by framing criminals, certain immigrant groups, political radicals or people with mental health conditions as “barbaric others” outside of the national community.³² However, in addition to that, I argue that the demarcation from “barbarism” beyond national borders, on the one hand, and the simultaneous claim to belonging to a European “civilization”, on the other hand, were equally important in the early twentieth century processes of nation- and state-building.

Coming back to the promotional publications, the idea of Uruguay as a European island was of course not the only noteworthy recurrent topic. Many of the publications that can be ascribed to the genre very explicitly aimed to inform and attract possible European immigrants. Despite praising Uruguay – or rather Montevideo – for its urban cosmopolitanism, the books and brochures thus focused on Uruguayan agriculture and industries and the opportunities for the “honest immigrant”.³³ In this context, the promotional texts also stressed how immigrants could benefit from Uruguay’s uniquely progressive labour legislation. This discourse is also reflected in Rafael Schiaffino’s speech in Geneva:

*The working class lives in rather good conditions. The government has passed special laws for workers, such as the minimum wage legislation, [...], the law of the eight-hour working day, and the 48-hour working week, [...], obligatory compensation in case of workplace accidents [...], etc.*³⁴

These are but a few of the laws that Schiaffino enumerated, and they hint at the prominence of labour policies within the narrative on Uruguayan progressivism and “advanced” nature. In fact, a description of the policies that benefitted the working class was an integral part of almost every Uruguayan self-display. Ten years earlier than Schiaffino’s speech, the Oficina de Exposiciones had announced: “The political organization

indigenous peoples. See G. Verdesio, *An Amnesic Nation: The Erasure of Indigenous Pasts by Uruguayan Expert Knowledges*, in: S. Castro-Klarén and J. C. Chasteen (eds.), *Beyond Imagined Communities: Reading and Writing the Nation in Nineteenth-Century Latin America*, Baltimore 2003, pp. 196–224. On the idea of Uruguayan “whiteness”, see also G. Andrews, *Blackness in the White Nation: A History of Afro-Uruguay*, Chapel Hill 2010, pp. 2–4.

31 Cámara Mercantil de Productos del País, *El Uruguay*, p. 3. On the concepts of civilization and barbarism see Antonio Carboné’s article in this issue.

32 Bauck, *Nüchterne Staatsbürger*, p. 36; N. Duffau, *Saberes y prácticas de la psiquiatría en Uruguay (1860–1910): de la Colonia de Alienados al Hospital Villardebó, etapas de una evolución conflictiva*, in: *Revista Culturas Psi 5* (2015), pp. 40–69, at 41.

33 *Consulat Général de l’Uruguay en France, L’Uruguay agricole, industriel, colonisateur, minier et politique: “Terres Promise”*, Paris 1914.

34 Schiaffino, *L’Uruguay*, p. 33.

is in harmony with the most advanced democratic principles and day by day it is being rounded out by new social laws which are making of Uruguay the most favourably situated country among the nations of the world.”³⁵ Social policies were thus not only beneficial for the working class, they were at the centre of what secured Uruguay’s good position in an imagined overall ranking of nation states.

Beyond the specific content, the quote thus underlines how rankings and comparisons were a preeminent mode of relating these national entities to one another.³⁶ When the promotional publications described Uruguay as “advanced” or “modern”, the relevance of this description could only fully unfold in relation to other nation states, be it on the global or the Latin American level. Whereas this comparative thinking certainly was not a unique Uruguayan feature, contemporary mocking in national debates and by foreign observers give the impression that comparisons were of particular importance for Uruguayan reformers and statesmen: When in 1910 the Uruguayan parliament debated a law on public assistance, which will be discussed later in this article, an opponent of the law argued for the necessity to “study what we are” instead of solely arguing that “republican France or monarchic England have done this or that”.³⁷ Twelve years later, an Argentinian journalist commented that any law could be passed on the other side of the River Plate as long as it ensured that the Uruguayan “nation [...] was more puritanical than the United States, more liberal than France or more serious than Great Britain”.³⁸ And in 1938, British economist Simon Hanson stated in his analysis of the “Uruguayan utopia”:

*He [José Batlle y Ordoñez] was particularly obsessed with the idea of placing Uruguay in the front rank of progressive nations. [...] Why should we, they [the opposition] asked, an underpopulated country hardly known abroad and lacking position among nations continually astonish the world with the radicalism of our laws? There was little comfort for a conservative in Batlle’s replies. [...] So convincingly did Batlle preach this doctrine of Uruguay’s proper place in the van of social progress that in later years the fact that a bill involved a new principle was taken not as a warning signal for caution but as a point in its favour. The Congressional debates not infrequently reveal legislators all too aware of their country’s reputation for advanced legislation and concerned with trying to live up to the reputation.*³⁹

While Hanson was almost still speaking as a contemporary observer, historian Lars Peterson has recently also interpreted parliamentary debates on Uruguayan labour laws as

35 Ministerio de Industria, Oficina de Exposiciones, *El Uruguay en 1915*, p. 22. The book was printed bilingual (Spanish and English).

36 See J. Moses, *Comparison and the Welfare State in Modern Europe, c. 1880–1945*, in: W. Steinmetz (ed.), *The Force of Comparison: A New Perspective on Modern European History and the Contemporary World*, New York 2019, pp. 191–213.

37 *Discusión del proyecto de ley de Asistencia Pública en la H. Cámara de Representantes*, in: *Boletín de la Asistencia Pública Nacional* 1 (1911) 1, pp. 78–388, at 86.

38 *La glosa del día: Se expidió el sanhedrin*, in: *Crítica*, 27 May 1922, p. 2, quoted in: Bauck, *Nüchterne Staatsbürger*, p. 16.

39 S. G. Hanson, *Utopia in Uruguay: Chapters in the Economic History of Uruguay*, New York 1938, p. 125.

driven by the impulse to cause envy in neighbouring countries and by the conviction that these laws would secure Uruguay's outstanding position among "civilized" countries. The respective parliamentary debates were thus full of references to European examples as well as compliments made by European governments regarding the Uruguayan path.⁴⁰ In the ever-growing international arena of the nineteenth century, certain statistical figures had a special significance within the comparative ranking of countries, as Anne-Emanuelle Birn has shown for the case of the infant mortality rate. Since the late nineteenth century, Uruguayan reformers could argue that the Uruguayan infant mortality rate was much lower than that of other European and American cities. This "progress", they explained, was possible thanks to the Uruguayan welfare institutions, which were to thank for Uruguay's enviable international position.⁴¹

Again, these were not isolated voices. The alleged quality of Uruguayan public health infrastructure was yet another recurrent topic in the promotional publications.

*Uruguay, which for natural reasons of soil and climate is one of the most healthful countries in the world, as the demographic statistics clearly show in the low percentage of mortality, is also a country in which the public services of hygiene and medical attendance have reached the highest degree of development in conformity with the requirements of modern science.*⁴²

While in 1915 the Oficina de Exposiciones thus easily combined the esteem for a "healthful country" with the praise of its "services of hygiene and medical attendance", Carlos Maeso, the author of a much-quoted 1910 book on Uruguay, took greater pains to build that bridge. He explained at length that despite the characteristic "expansion of happiness and well-being", Uruguay still had its share of poor residents living in poverty. Luckily, however, they lived within a charitable nation and were never forgotten by the more fortunate.⁴³

In 1910, this reference to charity was in a certain tension with the passing of a law that aimed to substitute charity with social rights through the foundation of the Asistencia Pública Nacional (APN, National Public Assistance). The law secularized, nationalized, and centralized the existing health and welfare infrastructure and obliged the state to take care of the sick, old, invalid, unprotected children, pregnant and breastfeeding women, and those with mental health conditions and the chronically ill.⁴⁴

As the authors of the Libro del Centenario – arguably the most monumental of all promotional publications – stated in 1926, the fulfilment of these tasks was possible thanks to a "series of first order establishment, their comfort, their adequate architecture, and

40 Peterson, *In the Shadow of Battle*, pp. 55–57.

41 A.-E. Birn, *The National-International Nexus in Public Health: Uruguay and the Circulation of Child Health and Welfare Policies, 1890–1940*, in: *História, Ciências, Saúde: Manguinhos* 13 (2006) 3, pp. 33–64, at 44.

42 Ministerio de Industrias, Oficina de Exposiciones, *El Uruguay en 1915*, p. 140.

43 C. M. Maeso, *El Uruguay a través de un siglo*, Montevideo 1910, p. 173.

44 República Oriental del Uruguay, *La Asistencia Pública Nacional*, Montevideo 1913, pp. 7–12.

the quality of the scientific instruments”.⁴⁵ Among these establishments was the above-mentioned hospital for women and children, the Pereira Rossell Hospital, the first wards of which had been inaugurated in 1908. “[S]ince its installation it has offered the most modern advancements that existed for those matters.” It was “located in an airy space [...] [where] it could erect its modern pavilions”.⁴⁶ The next section will examine this tribute to the physical manifestation of Uruguay’s legitimate position among the “civilized” nations of the world.

3. Hospitals as Primary Symbols of Hygienic Modernity

In 1916, six years after the inauguration of the Asistencia Pública Nacional (APN), the medical and public health elite of Uruguay gathered in Montevideo for one week to celebrate their country’s first national medical conference. Within the section on public assistance, José Scosería – a physician, the main architect behind the founding of the APN and its director since its foundation in 1910 – presented an “official report” on the situation of public hospitals in Uruguay.⁴⁷ As in innumerable other writings and declarations, Scosería started his elaborations by underlining how the creation of the APN had given the “indigent [...] the right of free assistance by the state, with generosity without precedence in any other legislation”, and how it had further “proclaimed the right to assistance as a compensation for social injustices, and as a consequence of the solidarity that exists between men”. These qualities were framed in opposition to religious and moral obligations, highlighting the “separation [of welfare and assistance] from any religious principle through the hands of the secular state”.⁴⁸ Scosería then went on to explain that as part of this doctrine, the state had “taken possession” of all hospitals, asylums, and services in order to declare them national establishments.⁴⁹ The APN legislation “without precedence” thus also had a territorial dimension, in which the state claimed new authority over the existing and future infrastructure of public health and welfare. This claim has to be contrasted with a much more complex reality in which private and Catholic welfare institutions continued to play an important role after 1910, and often in cooperation with the state.⁵⁰

45 Consejo Nacional de Administración, *El Libro del Centenario del Uruguay 1825–1925*, Montevideo 1926, p. 637. This high-end publication of over 1,000 pages was the official state-sponsored publication on the occasion of the celebration of one hundred years of Uruguayan independence from Spain.

46 *Ibid.*, p. 642.

47 On José Scosería and the foundation of the APN see also González de Reufels and Huhle, *Transnational Events*, pp. 354–360.

48 J. Scosería, *La asistencia hospitalaria en el Uruguay*, in: *Primer Congreso Médico Nacional patrocinado por la Sociedad de Medicina de Montevideo y celebrado en Montevideo del 9 al 16 de abril de 1916: Tomo Cuarto*, Montevideo 1917, pp. 326–362, at 327.

49 *Ibid.*

50 C. Ehrick, *The Shield of the Weak: Feminism and the State in Uruguay, 1903–1933*, Albuquerque 2005.

Furthermore, the APN's claim to state authority had very different repercussions in Montevideo than in the "interior"; that is, in the other 18 sparsely populated Uruguayan departments. The APN's predecessor Comisión Nacional de Caridad y Beneficencia had already directed all institutions within Montevideo, albeit with a stronger presence of religious congregations, but the hospitals in the provinces had hitherto been directed by local governmental and religious authorities. The significant centralization that came with the APN led to fierce parliamentary discussions and resulted in the construction and re-construction of hospitals in all provincial capitals.⁵¹

In quantitative terms, according to historian José Pedro Barrán, the spirit of the APN in Montevideo led to the establishment of ten new hospitals between 1908 and 1930 (compared to only two new institutions between 1860 and 1907). The "interior" was once served by only eight hospitals, but between 1911 and 1930, 32 new hospitals were established in these regions, therefore greatly expanding the health infrastructure here.⁵² In a Foucauldian tradition, Barrán interpreted these hospitals as the "best agents of the medicalization of the illnesses" of the Uruguayan working class who increasingly felt the APN's "power to cure".⁵³ Indeed, the state-run institutions were primarily directed at, and used by, the poor, who saw their "cultural world transformed into a hygienic error".⁵⁴ Seemingly contrary to this historiographic diagnosis, José Scosería stressed in his speech during the first medical conference in 1916 that the law of the APN's creation stated that medical assistance best took place at home. This was the theory. According to Scosería, in practice the "conditions in which our proletariat lives do not allow for useful assistance at their homes", as these homes were "almost always miserable, lacking the conditions to apply the most basic of hygienic practices".⁵⁵ Therefore, hospitals were needed for treating and educating the poor, they would be required to come for many years, and this had to be kept in mind when calculating their number and hospital capacities.⁵⁶ Scosería's dramatic description of the living conditions of the working class had little in common with how the promotional publications celebrated them. Instead, his article resonated with the well-established elite and reform discourse on *conventillos* (tenement houses) in Montevideo and Buenos Aires as unhygienic spaces and breeding grounds for tubercu-

51 S. Medero, *Arquitectura, territorio y gubernamentalidad: El caso de los hospitales públicos en las primeras décadas del siglo XX en Uruguay*, in: *Anales de Investigación en Arquitectura* 11 (2021) 2, <https://doi.org/10.18861/an.2021.11.2.3167> (accessed 7 November 2022). On the parliamentary discussions, see also Rossel and Monestier, *Transnational Diffusion*.

52 J. P. Barrán, *Medicina y sociedad en el Uruguay del novecientos: vol. 1, El poder de curar*, Montevideo 1992, pp. 70–71. Barrán calls all of these institutions "hospitales", however for the case of Montevideo his list also includes APN-institutions such as the nursery school – that also served some patients – or rehabilitation facilities, thus employing a rather broad definition of the term hospital.

53 *Ibid.*, p. 178.

54 J. P. Barrán, *Medicina y sociedad en el Uruguay del novecientos: vol. 2, La ortopedia de los pobres*, Montevideo 1992, p. 20.

55 Scosería, *La asistencia hospitalaria*, pp. 328–329.

56 *Ibid.*, p. 330.

lois and other diseases.⁵⁷ In the words of Barrán, hospitals, on the contrary, were agents of “civilization” which not only provided treatment, but also shaped a certain lifestyle.⁵⁸ According to architect Santiago Medero, especially the new rural hospitals were spaces of modernity that contributed to the recuperation and well-being, but also good behaviour of the patients, while at the same time representing the state in a dignified manner. These constructions were a joint effort of architectonic and medical knowledge and – in the early twentieth century – followed the international state of the art; that is, in contrast to earlier architectural trends they resembled houses instead of monuments and consisted of several pavilions with specialized functions.⁵⁹

Montevideo also saw the erection of a new pavilion-style hospital in the first three decades of the twentieth century: the Pereira Rossell Hospital for women and children. The four architects who designed the first section of the complex – the children’s hospital – explained that the time for monumental hospitals was history, that the new and modern hospital focused on the best hygienic conditions instead, and was an assemblage of simple pavilions of serious and clean appearance.⁶⁰ The Pereira Rossell Hospital – the planning and first construction of which predated the foundation of the APN – was novel in several regards: Most notably it was the first secular hospital in Uruguay, and is therefore considered a milestone in the history of the secularization of the Uruguayan state, and its gradual monopolization of public spaces.⁶¹ It was also the first hospital with direct ties to the university, granting faculty and students full access for clinical research and training.⁶² However, it was also an example of how private philanthropy continued to play an important role within the expanding *batllista* state, at least in its initial years. The construction of the Pereira Rossell Hospital took place in several stages: the children’s hospital opened in 1908, the Casa de Maternidad (maternity hospital) was finished in 1915, and the gynaecology ward was inaugurated in 1922. The hospital’s name dates back to the philanthropists who donated the territory on which it was built: Dolores Pereira and Alejo Rossell y Rius. According to three historians who presented a comprehensive monograph on the hospital’s history in 2012, the couple was part of a generation that felt a belonging to the “civilized world” and wanted to eliminate the remnants of

57 There is surprisingly scarce explicit research on the problematization of conventillos in Montevideo. For Buenos Aires see A. Carbone, *Park, Tenement, Slaughterhouse: Elite Imaginaries of Buenos Aires (1852–1880)*, Frankfurt am Main 2022, pp. 91–163; V. Höse, *Wie die Anderen leben: Die Soziale Frage in der argentinischen Magazinpresse (1900–1920)*, Bielefeld 2018, pp. 145–164.

58 Barrán, *Medicina y sociedad* vol. 2, p. 21.

59 Medero, *Arquitectura*. On the “pavilion-plan hospital”, see also A. Adams, *Medicine by Design: The Architect and the Modern Hospital, 1893–1943*, Minneapolis 2008, pp. 9–14.

60 A. L. Turnes, *La Sociedad Uruguaya de Pediatría en su centenario 1915–2015: Evolución de la pediatría en el Uruguay con una referencia al surgimiento en el mundo*, Montevideo 2014, p. 62.

61 Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, pp. 23, 134; N. Duffau, *Alienados, médicos y representaciones de la “locura”: Saberes y prácticas de la psiquiatría en Uruguay (1860–1911)*, PhD thesis, Universidad de Buenos Aires 2015, p. 22.

62 Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, p. 25.

“barbarism”. Their hygienic vision was a key motor of this civilizing drive, and the primary motivation behind the donation.⁶³

The early history of the hospital is also interesting with respect to philanthropy and gender. Once the planning started, the Comisión de Damas del Hospital de Niños, a committee of powerful and influential women was founded and became responsible for the planning and collection of further funds for the hospital’s construction. The committee not only collected many smaller donations, but also another very large donation, this time from the philanthropic couple Desideria Parma de Beisso and Alejandro Beisso. Their money financed one of the pavilions, and led the Uruguayan press to celebrate the donation as comparable to similar gestures in Europe and the USA.⁶⁴ The hospital project, which was to bring glory to the *batllista* state, was thus firmly rooted in secular philanthropy, and built on a large tradition of women’s caritative commitment in the health sector.⁶⁵ Far from being an informal endeavour, the ladies committee was officially established by the government in November 1900 as a body that worked for the Ministerio de Fomento.⁶⁶

At the laying of the foundation stone in 1901, Montevidean newspapers quoted physician Joaquín de Salterain – who represented the Comisión Nacional de Caridad y Beneficencia – as celebrating the hospital as a “happy” place, “full of air and light” that would put a halt to children’s mortality.⁶⁷ That same year, the designated director of the children’s hospital, Arturo Garabelli, travelled to Europe and prepared an extensive report on the typology of European hospitals. The report focused on Paris and Berlin and was used by the architects who entered the bid for the construction of the children’s hospital.⁶⁸ Since the very beginning, the hospital was thus embedded in a transatlantic dialogue on what a modern hospital in the “civilized” world looked like and how it operated.

This framing also dominated at the inauguration of the children’s hospital in 1908. When the English-language newspaper *Montevideo Times* reported on the festivities, it highlighted the broad interest in the event and underlined how the four pavilions were built “on a delightfully airy and healthy site”, constructed in the “most modern style”, and “furnished with all the latest appliances”.⁶⁹ This corresponds with how historian Isabel Collazo and her colleagues characterize the general press coverage of the event. According to these historians, all newspaper articles referred to the application of the most modern hygienic standards, to the light and airy pavilions, and to the conformity with the latest scientific findings.⁷⁰ The physicians involved shared their opinion, highlighting how the new institution reflected Uruguay’s high level of culture and its concern for the

63 *Ibid.*, p. 87.

64 *Ibid.*, pp. 87–88.

65 *Ibid.*, pp. 77–79.

66 *Ibid.*, p. 82.

67 La piedra fundamental del hospital de niños, solemne ceremonia, los discursos, in: *La Nación*, 27 December 1901, p. 1, in: Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, p. 108.

68 *Ibid.*, p. 97.

69 Inauguration, in: *The Montevideo Times*, 25 February 1908, p. 5548.

70 Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, p. 176.

protection of children – a concern which it shared with all advanced countries.⁷¹ Finally, in his 1910 classic book on the characteristics of Uruguay, Carlos Maeso also praised the recently inaugurated hospital as a “model establishment”.⁷²

The planning of the next pavilions for the maternity and gynaecology wards started in the very year of the inauguration. Besides already directing the Comisión de Caridad and drafting the statutes for the APN, José Scosería also commissioned French architect Henri Ebrard to design the women’s hospital. At the same time, the planning was again accompanied by an educational trip to Europe. This time it was paediatrician Augusto Turenne who travelled to France in order to study obstetric care institutions. Ebrard’s plan and Turenne’s report formed the basis for the final plans by Uruguayan architect Juan M. Giuria.⁷³ Giuria’s pavilions had two floors and were specifically modelled after the contemporary French standard.⁷⁴ In 1909, the next foundation stone was laid and Scosería used the occasion to underline that this new construction was not a mere building, but the “solution to a social problem of transcendental importance”.⁷⁵ Hence, the physical construction not only transported modernity in its design and equipment, but it also served as a symbol of a modern state that cared for the well-being of its citizens, and – even more importantly – its future citizens.

In 1913, the APN reported that the “splendid construction” was on its way,⁷⁶ and after the 1915 inauguration, Montevideo journals also celebrated the comfort, hygiene, and modernity of the new construction, underlining its light, transparency and beauty. *El Día* reported that the maternity ward did not resemble a prison, not even a hospital, but instead a large, fully-equipped home, and predicted that it would bring much honour to Uruguay.⁷⁷ The new institution also found recognition in a report by the US-American ambassador, who had attended the ceremony and celebrated the new maternity ward in a brief memo to the department of state. Among other things, he highlighted that it was equipped with the “most modern appliances for the care of obstetrical cases”.⁷⁸

According to medical historian Ricardo Pou Ferrari, the ambassador was only one among many international voices who admired the construction. Allegedly, this “materialization of a new idea” – the idea of institutionalizing child birth, but also to educate the public and medical professionals – was used as a model for a maternity hospital in Buenos Aires.⁷⁹ Pou Ferrari also quotes from a 1939 report by Augusto Turenne, according to

71 Ibid., p. 191.

72 Maeso, *El Uruguay*, p. 183.

73 Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, pp. 256–257.

74 Ibid., p. 260.

75 El pabellón de la Maternidad: Discurso del doctor Scosería, in: *El Día*, 27 December 1909, p. 4, quoted in: Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, p. 258.

76 República Oriental del Uruguay, *La Asistencia Pública*, p. 150.

77 Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, pp. 259–267.

78 Chargé d’affaires ad interim to the Secretary of State, 31 May 1915, National Archives, College Park (Record Group 59 Department of State, Decimal File 1910–29, Record ID: 833.14).

79 P. Pou Ferrari, *Profesor Augusto Turenne (1870–1948): Pionero de obstetricia social en América Latina, fundador y primer presidente del Sindicato Médico del Uruguay*, Montevideo 2006, p. 86.

which the maternity ward had been an institution that was regularly proudly presented to foreign visitors for many years.⁸⁰

The last element of the Pereira Rossell Hospital, the gynaecology ward, was finally inaugurated in 1922. These pavilions had also initially been planned by French architect Henri Ebrard and completed by his Uruguayan colleague Juan Giuria. Not every political decision-maker agreed with the cost-intensive construction, but José Scosería defended the investment by stressing the building's importance for the future of his country.⁸¹ If we follow the reporting in the newspaper *La Mañana*, the new pavilions stood out due to their architectonic “pureness and beauty”, and were qualified by French gynaecologist Juan Luis Faure as a “first of [their] kind in South America and one of the best in Europe [sic]”.⁸²

If looked at together, the discourse that surrounded the different phases of planning, construction and inauguration of the Pereira Rossell Hospital for women and children underlines how national and foreign praise for its modern and hygienic architecture was inseparable from the idea that this architecture embodied the right to a privileged position among “civilized” nations. And in the early twentieth century one element of this imaginary community of nations with strong trans- and international connections was a special concern for their future citizens. In this regard, the new hospital was but one among many Uruguayan institutions that symbolized the state's special concern for the protection of children's health, well-being and morality. Other new institutions were founded, such as the Gota de Leche, a milk distribution programme, in 1905, and long existing establishments were considered in need of reform. Thus, as early as 1903, the Comisión de Caridad had complained about the Asilo de Expósitos y Huérfanos, which was the largest state-run orphanage in Montevideo:

*[...] 1,000 children depend on the Asilo de Expósitos y Huérfanos, they suffocate in a narrow and inadequate location, and they long for light, air, and a space that strengthens their nature and regenerates their blood in order to be able to be a useful and healthy seed of future generations.*⁸³

Two attempts to remedy this situation were the Colonia de Vacaciones (holiday colony), first opened in 1908 and specifically directed at specific children from the Asilo de Expósitos y Huérfanos, and open-air schools, which opened in 1913 and were attended by a larger group of children. Both institutions not only exemplify attempts to strengthen this “seed” of tomorrow's national vigour, but also the intertwining of health-related and educational concerns among Uruguayan reformers.

80 Ibid., pp. 118–119.

81 Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, pp. 317.

82 Los pabellones de Ginecología, in: *La Mañana*, 6 May 1923, p. 5, quoted in: Collazo, Palumbo, and Sosa, *Hospital Pereira Rossell*, p. 321.

83 Comisión Nacional de Caridad y Beneficiencia Pública, *Sus establecimientos y servicios en 1905*, Montevideo 1907, p. 74. The quote is from a 1903 letter that was reprinted in the book.

4. Outdoor Hygiene: Air-filled Spaces for “Weak” Schoolchildren

If Uruguayan authors and reformers in the early twentieth century already valued their health institutions and reforms, public education was emphasized even more as an area in which Uruguay did particularly well. According to them, this success story had started in the 1870s with the *reformas varelianas*, named after politician and educator José Pedro Varela, and continued into the *batllista* decades. According to Carlos Maeso, it was thanks to Varela’s reforms that schooling in Uruguay was ranked number one in South America, and it would not take long until it had the quality of Germany, Sweden, the United States, England, and Switzerland.⁸⁴ Continuing this comparative approach, Maeso also presented detailed statistics about the number of students per capita, categorizing his home country above Italy, Spain, Portugal, Russia, and Chile, and relating it favourably to those countries with “better” statistics.⁸⁵ Moreover, he argued that a recently inaugurated model school left no reason to envy any institution of the countries that “march at the head of nations”. When it came to the specifics worth admiring, Maeso did not delve into pedagogical details, but highlighted that the many recently constructed schools did not have luxurious or glamorous buildings, but instead “spacious, pedagogic, and hygienic houses with no vicious poisoning atmosphere nor deforming and uncomfortable chairs”.⁸⁶ With this emphasis, Maeso echoed a major contemporary concern: the creation of healthy, healing environments for schoolchildren.

The responsibility to create such environments had been given to the body of experts Cuerpo Médico Escolar in 1908. According to the founding decree, this body was responsible for hygienic school buildings, hygiene among the pupils and among the teachers.⁸⁷ It was affiliated with the Ministry of Industry, Labour and Public Education, but led by physicians, among them Sebastián B. Rodríguez, who had specialized in school hygiene. A year before the foundation of the Cuerpo Médico Escolar, Rodríguez had attended the Third Latin American Medical Congress in Montevideo and given a broad presentation on the history of school hygiene in Latin America and the planned institutionalization of the Cuerpo Médico Escolar in Uruguay. As a strong supporter of the necessity for this new body of experts, his presentation heavily criticized the lack of organization in matters of school hygiene, but nevertheless endorsed the level of hygiene in Uruguayan public schools. He proudly argued that “when it comes to furniture and school materials, we have the latest models, and we are at the height of the most civilized nations.”⁸⁸ Representatives of these “civilized nations”, that is, mostly European countries, had already created a specific forum for exchange and convened for the Third International Conference on School Hygiene in Paris in 1910. Together with three other state agencies, the Cuerpo Médico Escolar sent a delegate to this conference of over 1,500 par-

84 Maeso, *El Uruguay*, p. 125.

85 *Ibid.*, p. 127.

86 *Ibid.*, p. 126.

87 Cuerpo Médico Escolar, in: *Boletín del Consejo Nacional de Higiene* 3 (1908) 22, pp. 369–371.

88 Rodríguez, *Contribución*, p. 389.

ticipants and prepared the Uruguayan material for the associated exposition.⁸⁹ Uruguay was one of only two Latin American countries that made the effort to participate in this event (Mexico being the other one).⁹⁰ This underlines the importance which the Uruguayan state attributed to this specific reform field. A look at the material that was sent to the exhibition and later partly donated, upon request, to the pedagogical museum of Paris, further confirms this impression: It included plans for school buildings and school books, but also furniture and hygienic infrastructure, such as water fountains.⁹¹ According to Uruguayan delegate Justo F. González, the undertaking had not been in vain, as the “abundance and importance of the exposed materials had left the best impression on the visitors”.⁹²

Certainly, González also reported on the content of the topics discussed at the conference, and concisely summarized its essence: “Air in the school, air in the chests, air in the programmes sum up the conference’s list of demands.”⁹³ Luckily, landscapes full of fresh and healthy air were a natural resource that Uruguay could easily exploit for its future citizens. Its healthy climate and accessible seaside were a recurrent motif of self-praise, but also an object of Argentinian envy.⁹⁴ And it was a resource that Uruguayan reformers would use to tackle what was arguably the most pressing public health concern of the first decades of the twentieth century: tuberculosis.⁹⁵ In the realm of school hygiene, tuberculosis among pupils was primarily to be prevented with the above-mentioned holiday colony and open-air schools. Both the colony and open-air schools were directed at those children which the medical-pedagogical knowledge identified as “weak” and therefore “predisposed” to tuberculosis. Research has shown, however, that this predisposition was more of a social than a medical category, targeting children from working-class backgrounds.⁹⁶

The Cuerpo Médico Escolar played a key role for both the holiday colony and open-air schools, as its physicians were responsible for the selection of the children that should attend them, for continuously examining their physical progress, and for the respective knowledge production on the benefits of outdoor education. The daily routines, however, were led by female professionals from the educational field. They oversaw a

89 Tercer Congreso Internacional de Higiene Escolar, in: Boletín del Consejo Nacional de Higiene 5 (1910) 42, pp. 172–173.

90 Ille Congrès International d’hygiène scolaire, Paris: I Rapports, Paris 1910.

91 Consejo Nacional de Enseñanza Primaria y Norma, Catálogo del material escolar enviado a la Exposición anexa al III Congreso Internacional de Higiene Escolar (Paris, 2–7 de agosto de 1910) con una noticia sobre la instrucción pública primaria, Montevideo 1910, p. 30. The catalogue was bilingual, with Spanish and French texts. The donation was mentioned in the official report given by the Uruguayan delegate: Informe relativo al III Congreso Internacional de Higiene Escolar, celebrado en París del 2 al 7 de agosto de 1910: Presentado por el delegado del Uruguay, Doctor Justo F. González, in: Boletín del Consejo Nacional de Higiene 7 (1912) 74, p. 706.

92 Ibid.

93 Ibid., p. 702.

94 For the Argentinian gaze at Uruguayan beaches, see Höse, *Wie die Anderen Leben*, pp. 120–122.

95 D. Armus, *The Ailing City: Health, Tuberculosis, and Culture in Buenos Aires, 1870–1950*, Durham 2011.

96 D. González de Reufels, *Schulen als Laboratorien: Schulhygiene zwischen transnationalem Austausch und nationaler Sozialpolitik in argentinischen Kongressbeiträgen von 1913*, in: M. Nonhoff et al. (eds.), *Gesellschaft und Politik verstehen: Frank Nullmeier zum 65. Geburtstag*, Frankfurt am Main 2022, pp. 271–285, at 279.

routine that was not centred on learning, but on the strengthening of the children’s bodies through breathing exercises, an abundant diet, and ample movement.⁹⁷ More concretely, in its first summer of operation, the Colonia de Vacaciones, inaugurated in October 1908, provided space for 60 children at a time who visited the summer camp for one to two months. The colony was located in Punta Carretas, a beach outside of Montevideo, and solely visited by children from the state-run orphanage. The children learned, played, ate, and slept outside if the weather permitted.⁹⁸ Maeso complimented the spacious colony full of plants as a great humanitarian effort with a simple organization and lasting effects: “There, [the weak children], breathe the pure air of the ocean, receive the gentle strokes of the sun, that is, they live in the middle of nature, so that their lungs widen, their rachitic organisms gain the red blood cells which are so crucial for life, and they develop full health.” It comes as no surprise that Maeso not only highlighted the effects of the nature on children’s health, but also applauded the colony for its high standards in comparative terms: whereas the colony had only recently been founded, beautiful projects were in the pipeline that would surely transform this type of colony into an institution that would be comparable to the best of its kind around the world.⁹⁹ Indeed, the Uruguayan reformers who developed the colony and later the open-air schools were embedded in several trans- and international arenas in which they exchanged ideas on how to run these institutions, but which they also used to promote the Uruguayan efforts. A case in point is José Scosería’s presentation at the Fourth Latin American Medical Congress in Rio de Janeiro in 1909. There he gave a presentation on “the protection of childhood in the fight against tuberculosis”. His transatlantic comparison saw Germany, France, and England spearheading this joint effort of “civilized” countries, and called upon the rest of the countries to follow their example. But when it came to concrete preventive measures, he used the occasion to praise the recently founded Colonia de Vacaciones, and called for a vote that was meant to motivate all other Latin American governments to follow his country’s example.¹⁰⁰ Back in Montevideo, Scosería then claimed that Uruguay had received a “vote of applause” for being South America’s only country to have such a vacation colony. Hence, only Uruguay could compete with the European models. Scosería used this reference to argue in favour of amplifying the colony’s scope, which, according to him, should be expanded to also accept children from low-income families and public schools in its second summer. In similar terms, his colleague José Martirené argued against closing the colony three years later by stating that it had “placed our country in the top ranks of those countries who see the protection

97 J. Martirené, Memoria y datos estadísticos de la Colonia de Vacaciones, presentados á la Dirección General de la A. P. por el Médico Inspector de la Colonia Doctor José J. Martínez, in: Boletín de la Asistencia Pública Nacional 3 (1913) 7, pp. 27–61; Rodríguez, Escuela al Aire Libre.

98 Colonia de Vacaciones: Antecedentes sobre su creación y funcionamiento, in: Boletín de la Asistencia Pública Nacional 3 (1913) 7, pp. 1–26.

99 Maeso, El Uruguay, p. 179.

100 The presentation was re-printed in a Uruguayan journal. See J. Scosería, La protección a la infancia en la lucha contra la tuberculosis, in: Boletín del Consejo Nacional de Higiene 4 (1909) 36, pp. 505–519.

of childhood as the principal factor of health among adults”.¹⁰¹ As for all other reforms, combatting tuberculosis among children was thus more than a goal in itself: it also served the reformers to place Uruguay favourably in their imagined ranking of civilized nations. International approval within the network of medical and social reformers, however, did not necessarily translate into a success story. As early as 1913, the Colonia de Vacaciones was closed, as the attempts to include children from public schools had failed. Parents could not be convinced to send their children away for several weeks or months, and the colony had continued to primarily receive children from state-run orphanages. Critics had further argued that a few weeks of fresh air were not enough to improve the general health and well-being of the children in the long-term.¹⁰²

On the basis of these experiences, the first Uruguayan open-air school was founded in 1913 on the initiative of the semi-private Liga Uruguaya contra la Tuberculosis. The school was also situated outside of Montevideo and run by the teacher Pilar Llache. Two more schools were opened in the 1920s by direct governmental initiative, and by the 1940s every provincial capital had opened an open-air school. The three schools that opened by the 1920s had space for a total of 350 pupils, who – in sharp contrast to the Colonia de Vacaciones – only attended the school during the days, spending the nights in their family homes. The selection of the “weak” children who should attend those schools was again in the hands of the physicians from the Cuerpo Médico Escolar.¹⁰³ Historian Andrés Dalben has analysed the “circulation of knowledge” around these schools in depth and argues that thanks to the physicians Américo Mola, Emile Fournié and Luis Morquio, Uruguay became an international centre for this circulation.¹⁰⁴ These three physicians visited similar European schools and presented the Uruguayan advances to the international public at conferences on the protection of children as well as at gatherings that were exclusively dedicated to the topic of open-air schools. The latter were organized by an international committee, which Américo Mola presided over during the third in this series of conferences, which took place in Bielefeld, Germany, under the Nazi regime in 1936.¹⁰⁵ As Germany had not yet been isolated from European and international reform circles, Mola’s position shows us that Uruguayan reformers not only claimed a symbolic belonging to the community of “civilized” nations, but effectively held influential positions within those circles.

101 Martirené, *Memoria y datos*, p. 36.

102 A. Dalben, *Las escuelas al aire libre uruguayas: Creación y circulación de saberes*, *Educación Física y Ciencia* 21 (2019) 2, <https://www.efyc.fahce.unlp.edu.ar/article/view/EFyCe075> (accessed 7 November 2022), pp. 1–12, at p. 2.

103 *Ibid.*

104 *Ibid.*, p. 6.

105 A. Mola, *Sur l'utilité des Congrès Internationaux des Ecoles de Plein Air et la nécessité d'un Comité International*, in: *Zeitschrift des Internationalen Komitees für Freiluftschulen* 1 (1935), pp. 6–7.

5. Conclusion

In the first three decades of the twentieth century, Uruguayan statesmen and reformers continuously sought occasions to showcase their country’s “advances” beyond its borders – and social policies were at the heart of what these advances and Uruguay’s “national character” were all about. It is therefore surprising that the thoroughly analysed promotional publications have not been looked at under this aspect before.

At the same time, the state, and within it these reformers, re-constructed, expanded, and developed public assistance institutions as crucial elements of both the ongoing state consolidation and expansion as well as the nation building processes. These developments did not only take place within the small republic, but were crucially shaped by international, and especially transatlantic, knowledge exchange. Conferences at the international (European dominated) and Latin American level were the most important venues for these interrelations, as the examples of the Brussels world’s fair, the Latin American Medical Congresses, international conferences on school hygiene and on open-air schools have shown. However, individual trips and networks were also of crucial importance; these included the educational trips to Europe by Uruguayan physicians in the process of designing and constructing the Pereira Rossell Hospital. The employment of a French architect for this same process is another example of this individual level of exchange.

By using the example of institutions that were founded for Uruguayan children – the Pereira Rossell Hospital, the Colonia de Vacaciones, and the open-air schools – this article has shown how the construction of tangible spaces and the belonging to imaginary spaces were inseparably linked in the early twentieth century. Institutions for children also had a special place in the national imaginary and in the definition of what “civilized” countries cared about: These children were conceptualized as the “citizens of tomorrow”, and thus as the basis for the expansion of Uruguayan prosperity and “progress”.

Within contemporary notions of what this “progress” meant, this article has underlined how Uruguayan reformers located this progress in Europe and considered their “European island” as part of this concept, which went far beyond geography. They also discredited their neighbours as “barbaric” and farther away from European “civilization”. However, it is important to underline that this emphasis covers only one of the spatial categories that was of importance for Uruguayans in the early twentieth century. While looking at Europe, and locating themselves in it, we can also trace a growing identification with “Latin America” and the attempt to proclaim Latin American unity and a positively connotated “otherness”. And just as importantly, since the 1920s, Uruguayan reformers increasingly considered themselves part of an international community that was much larger than Europe, but was still strongly connected to Geneva as the epicentre of internationalism. Future research should focus on these imaginary spaces as well, and relate them to each other.