

## MENTAL HYGIENE, SOCIAL TURN OF PSYCHIATRY AND INCORPORATION OF MENTAL HEALTH IN THE PUBLIC AGENDA IN IBERO-AMERICA, FIRST HALF OF THE 20TH CENTURY

Jairo Gutiérrez Avendaño<sup>1</sup>

jairo.gutierrezav@amigo.edu.co

El objetivo propuesto es comprender las apropiaciones y transposiciones científicas entre la higiene mental, como solución técnica y la eugenesia como ideología, en el surgimiento del concepto de salud mental en Iberoamérica. Inscrita en la corriente de la historia social de la medicina, se realizó una investigación histórico-hermenéutica, mediante análisis documental y heurística de archivos. Indagar sobre el surgimiento y extensión de las ligas de higiene mental en estas regiones, permite constatar que existieron convergencias discursivas y prácticas entre las instituciones que promovieron la eugenesia, la higiene mental y la psicotecnia. Se observa que, en la primera mitad del siglo XX, las ligas tenían en común su origen y funcionamiento en asociaciones de neuropsiquiatría, así como una estrecha relación de ambas con sociedades eugenésicas. Asimismo, todas formaron una sección de puericultura y, al mismo tiempo, las sociedades de esta especialidad junto con las de pediatría incluyeron una sección de eugenesia. En este periodo, se produjo un giro social de la prevención, desplegado por disciplinas

The proposed objective is to understand the appropriations and scientific transpositions between mental hygiene as technical solution and eugenics as an ideology, in the emergence of the concept of mental health in Ibero-America. Inscribed in the current of social history of medicine, a documentary investigation, through heuristics and hermeneutics archives. Inquiring about the emergence and extension of mental hygiene leagues in these regions, allows us to verify that there were discursive and practical convergences between the institutions that promoted eugenics, mental hygiene and psychotechnics. It is noted that, in the first half of the twentieth century, the leagues had in common their origin and functioning in neuropsychiatry associations, also a close relationship of both with eugenics societies. Similarly, all of these formed a section of childcare and, at the same time, the societies of this specialty along with those of pediatrics included a section of eugenics. There was a social turn of prevention, deployed by disciplines and policies, such as the "social issue of health", hygiene, social medicine

---

1 Doctor en Ciencias Humanas y Sociales. Posdoctorado en Bioética. Magíster en Educación, Filósofo. Integrante de la Red Iberoamericana de Historia de la Psiquiatría. Docente integrante del grupo Estudios de Fenómenos Psicosociales, Universidad Católica Luis Amigó, Medellín, Colombia.

como la higiene, la medicina social, la psicología, y por la política de la “cuestión social de la salud”. En este proceso de extensión hacia la población, surgió la psiquiatría social, un campo que se destacó más en Iberoamérica durante el siglo XX.

**Palabras clave:** Clínica de orientación infantil (CGC); eugenesia; salud mental; ligas de higiene mental; psicotecnia

and psychology. In this process of extension to the population, the social psychiatry emerged, a field that stood out most in Ibero-America during the twentieth century.

**Keywords:** Child guidance clinics (CGC); eugenics; mental health; mental hygiene leagues; psychotechnics

## INTRODUCTION

The Mental Hygiene Movement emerged in 1908 at the initiative of Clifford Beers, who worked as a psychiatrist, but suffered from depression and paranoia. He related his experience as a patient in a psychiatric institution, in his book *A mind that found itself*. This work advocated revealing and disseminating the need to transcend the prevention and intervention of psychic illness and innovate in its treatment through the community promotion of mental health. This required the implementation of reforms and administrative measures that, in the end, made this new conception (and its related concept mental hygiene) was incorporated as a program in public health policies (Lemkau, 1963, 17).

The concept of mental hygiene is a general approach aimed at maintaining mental health and preventing mental disorders through means such as educational programs, promotion of stable emotional and family life, prophylactic and early treatment services, and public health measures. (APA, s.f.).

However, for Rosen (1974), the reference to mental hygiene (MHyg.) was not new, since in 1843 it had been used in the United States by Dr. W. Sweetser in an article entitled the same as that concept; also, in 1857, it was included in England by J. Hawkes as part of a "Program to promote mental health reform"; then, in 1859, G. Cook refers to it in two articles on the protection of health and the prophylaxis of psychic illness (1974, 329).

Mental hygiene societies were climbing towards the formation of national committees with a representation of psychiatrists, doctors of other specialties, biologists, pedagogues, religious, businessmen, philanthropy societies, representatives of civil society, among others

from a large number of regions, to extend to countries in Europe, Africa, Asia and Latin America.

In 1930 it was performed the First International Congress on Mental Hygiene, held in Washington under the direction of Beers. They attended 3000 representatives from 41 countries, including Brazil, which represented the southern region in the International Committee for Mental Hygiene, Costa Rica, Cuba, Dominican Republic, Uruguay and Venezuela. This event was voted unanimously so that mental hygiene was included in the curricula of the medical career and influenced the formation of experimental psychology and the implementation of psychotechnics, background that subsequently provided a basis to the first institutes and professional programs of general psychology.

Prior to Washington, in France the Ligue d'Hygiène et Prophylaxis Mentales, at the head of the psychiatrist and journalist Edouard Toulouse, organized in Paris the Congrès d'Hygiène Mentale, in June 1922, with a representation of 22 countries, it was in its origin an attempt to hold the first international congress of mental hygiene; however, "The United States opposed and claimed the right to celebrate the first event of this kind for being the creators of the Mental Hygiene movement. The congress held in Paris was reduced to a European meeting" (Campos, 2001, 37-64).

The Third International Congress of Mental Hygiene in London (1948) at which International Committee for Mental Hygiene (ICMH) was transformed into World Federation for Mental Health (WFMH), was an opportunity for the post-World War II hope for peace through international collaboration, and for national mental health associations to resume their international contact interrupted by the war (Brody, 2004, 54).

The scope of the MHyg. and its international congress laid the foundations for the formation of the first Committee of Experts of Mental Hygiene of the World Health Organization, organized in Geneva in 1949, which was made up of medical directors of psychiatric hospitals in China, Czechoslovakia, United States, India and Brazil.

The Second meeting of the Committee of Experts was performed in 1950 in which it was agreed to change the use of the term mental hygiene with that of mental health, to overcome ambiguity and to establish a process that would achieve the ideal of well-being, happiness, balance, etc., which, in turn, should lead to harmony in human relations, contemplated in the concept of WHO.

The predominance of hereditary propensity as a determinant of degeneration, over environmental factors, was the empirical basis of the eugenics of the british psychologist Francis Galton (1904, p. 41), who established the biological improvement of the human race, that is, human beings could be bred selectively to promote desirable traits and eliminate undesirable ones.

This theory had lasting repercussions in modern psychiatry, under the influence of the Laboratory of Experimental Psychology founded in 1879 by Wilhem Wundt at the University of Leipzig, with whom the Russian physiologist Ivan Pavlov, like Galton based on the theory of evolution of species proposed by his cousin Charles Darwin and Wundt's theory of brain conditioning.

Galton crossed methods of the exact and natural sciences, such as statistics and biology, with anthropology and psychology, and in this way influenced the creation of psychometric and anthropometric laboratories in the Western world. These techniques were introduced in Latin America in the first decades of the 20th century in Latin America; as well as the concept of eugenics circu-

lated in the formation of the hygienist discourse and in the area of childcare, during the same period and until the middle of the century.

#### **METHODS AND MATERIALS**

A documentary investigation, through heuristics and archival hermeneutics was carried out. It was inscribed in the current of the social history of medicine. They reviewed the main characteristics of the leagues, plans and programs of mental hygiene, their affiliations with societies of eugenics and psychiatry, as well as government directorates, belonging to 14 countries integrated in the Asociación Latinoamericana de Psiquiatría (except Spain), which arose on the occasion of the World Congress of Psychiatry, held in Paris (1950) and founded in 1960 on the initiative of the Grupo Latinoamericano de Estudios Transculturales - GLADET, based on Guadalajara. Similarly, six countries grouped in the Asociación Psiquiátrica de Centroamérica y Panamá, which emerged in 1951 at the first APAL Congress held in Mexico and reactivated in 1988.

#### **BRAZILIAN LEAGUE: HYBRIDIZATION OF PSI KNOWLEDGE**

It was founded on the initiative of the doctor Gustavo Riedel, a member of the Academia Nacional de Medicina since 1916. According to its statutes of 1925, the league had as objective "the realization of a program of Mental Hygiene and Eugenics in the domain of individual, school, professional and social activities" (Souza, Boarini, 2008, 273-292) and was recognized as of public utility by the Federal Government in 1923. The League was promoted by the Sociedade Eugênicade São Paulo, the latter was the first to be created in Ibero-America in 1920, by the hygienist doctor Renato Ferraz Kehl, one of the founders of the *Boletim de*

*Eugenia* in 1929 and the Comissão Central Brasileira de Eugenia in 1930, based in Rio de Janeiro.

It is highlighted Riedel's attendance at the First International Congress of Mental Hygiene in Washington in 1930. From this event he published his impressions in which the purpose of "hygienists, eugenicists, educators and psychiatrists concerned with the work of the mentality of the continents, will all perform, through Leagues of Mental Hygiene, the most beautiful work of prophylaxis, trying to keep man his superior qualities of spirit and heart" (Riedel, 1930, 195-198). Later, in 1938, the doctor Ulisses Pernambucano founded the Sociedade de Neurologia, Psiquiatria e Higiene Mental do Nordeste Brasileiro, in which he presided over the League de HM de Pernambuco, which managed to become a national entity.

It is relevant the incidence of psychology as the main knowledge that validated the actions of the League and, in turn, this society contributed to the formation of such science in Brazil. Indeed, the doctor José Paranhos Fontenelle, a health professional and professor of educational biology, hygiene and statistics applied to education, vice president of the Sociedade Brasileira de Higiene, stated that "the scientific base of mental hygiene is the psychology, in the same way that physiology is the foundation of physical health, it is always necessary to remember the interdependence of the two spheres of activity and the reactions of one over the other" (Fontenelle, 1805, 1-10). This relationship between psychotechnics and physiology, applied to mental hygiene, was extended among the aforementioned scientific societies in Ibero-America.

#### **CUBAN LEAGUE: HOMICULTURE**

On the recommendation of the First Pan American Conference of Eugenics and Homiculture, held in Havana in 1927. A homonymous Office was installed in the Cuban capital, directed by Domingo F. Ramos, professor of General Pathology at the clinic of the University of Havana; he was recognized for having coined the term of *homiculture* or scientific cultivation of the individual in all stages of development since the birth to adulthood (Stepan, 1991, 76-79).

In 1923, during the celebration in Havana of the VII Pan American Medical Congress, the creation of a Mental Hygiene Committee of Latin America was voted. The Cuban League became official in 1929, but began work until 1948, headed by Julio Reymondez, who was the director of the *Revista del Hospital Psiquiátrico de la Habana* at that time.

In the VI Congreso Médico Nacional, held in December 1924, the conformation of the Liga Cubana de Higiene Mental was proposed, with the aim of interest public opinion through the press and conferences of its benefits, as well as the creation of outpatient services such as those proposed by Beers and Toulouse.

The League was attached to the Sociedad Cubana de Neurología y Psiquiatría, in which Raymonez presented the MHyg. Program in 1958 and the National Psychiatric Assistance Project in 1959. The aim of the league was to "Make progress our laws and customs, and make compatible the application of scientific methods in the treatment of abnormal children, of nasty insanes and drug addicts... to remedy their first detours" (Raymonez, 1958, 175).

### **SPANISH LEAGUE: SOCIAL DANGER AND PSYCHIATRY DURING FRANCOISM**

The precepts of the North American movement began to spread in 1921 by José María Sacristán, a disciple of doctor Santiago Ramón y Cajal, and who also studied with Kraepelin in Munich. Sacristán was associated with Belarmino Rodríguez, co-founder of the Sociedad Española de Neurología, with José Germain, introducer of psychotechnics as the start of general psychology in the Iberian country in the 1920s.

This group of doctors adopted the budgets of the American program of 1909, whose objective was to “organize the post-mental assistance of the mentally ill, then educate the people about what is the illness and the mentally ill and finally attack the legislative problem to modify and guide their assistance scientifically” (Sacristán, Germain, Rodríguez, 1939, 339).

Similar to what was referred to in Latin American countries; the danger of the mentally ill and social defense based the movement of MH in Spain between 1920-1936. In effect, according to Campos, “despite attempts to remedy madness, psychiatrists had great theoretical and practical difficulties to define it scientifically, having to resort to social and administrative concepts such as social danger to define mental illness and the treatment that the patient must follow” (Campos, 1997, 39).

The Spanish League of MH, created in 1926, was official by the Royal Order in 1927; they developed their activities based on the Asociación Española de Neuropsiquiatría until 1930. Mental hygiene for the improvement of the race was incorporated among the measures of eugenics taught by Antonio Vallejo Nágera, a military doctor who directed the Psychiatric Services of the national side of Franco during the Spanish Civil War, who had been part of the MH League in the section of “Medical assistance

and social protection of psychopaths”. Vallejo established a regime of physical, moral and mental regeneration that included childcare and homiculture, the correction of minors and special education of “mental inferiors”, anti-alcoholic and antivenom control, nuptial politics, segregation of dangerous psychopaths for society, confinement of the seriously mentally ill, subjected to long periods of confinement, as well as other forms of containment, rather than therapeutic for their regeneration (Dualde, 2004, 3573). Thus, the dictatorship during Francoism opposed Republican advances in mental health reform and instead promoted a politicized medicine in order to establish a “national psychiatry” based on a strong identification between conservative Catholicism and exacerbated nationalism (Campos, 2016).

### **ARGENTINE LEAGUE: EUGENIC POLITICS**

It was created in 1929 with headquarters in the Sociedad de Neurología y Psiquiatría de Buenos Aires, at the head of a group of psychiatrists formed by Gonzalo Bosch, first head of the Chair of Psychiatry at the Facultad de Medicina de la Universidad del Rosario, vice-president of the Asociación Argentina de Biotipología, Eugenesia y Medicina Social (AABEyMS), founded in 1932, in the company of his student Enrique Pichon-Rivière, of swiss origin and nationalized argentine, who would later be introducer of psychoanalysis in the southern country, founder of the Asociación Psicoanalítica Argentina; together with the psychoanalyst psychiatrist Mauricio Goldenberg, pioneer in dynamic psychiatry, group work, psychodrama, use of pharmacology, dismantling of the alienist-asylum model and the insertion of patients to the community (Klappenbach, 1999, 3-17).

In the justification of the purposes of the League, it was established that it would be extended through commi-

tees throughout the country and, thus, concentrate its thinking and action throughout the republic. The sections that would integrate the League were the following:

- 1) Assistance of psychopaths (their organization and vigilance).
- 2) Immigration (surveillance and guidance in this regard).
- 3) Regional pathology (study of regional diseases and their prophylaxis).
- 4) Industrial and professional hygiene (study of its pathogenesis and prophylaxis).
- 5) General diseases (their relationship with psychic diseases).
- 6) Syphilis, alcoholism and drug addiction (hygiene and legislation).
- 7) Axiology (observation and prophylaxis of physical and psychic growth and development, in its relations with mental illnesses, from the point of view of home and medical action).
- 8) Sociology (labor legislation: individuals and the State. Legal medicine. Statistics).
- 9) Scientific organization of work and psychotechnics.
- 10) Antisocial: wandering and crime (its classification and social orientation).
- 11) Naval hygiene.
- 12) Military hygiene.
- 13) Social and individual hygiene of children (study related to childhood education, in the school-home links).
- 14) Propaganda (popular psychiatric dissemination and instruction).
- 15) Sexual hygiene (sex education and prophylaxis. Sexology and its relations with mental illness).
- 16) Patronages (Bosch, 1930, 7-21).

The AABEyMS had a prolific dissemination in this field since the edition of the *Revista de la Liga Argentina de Higiene Mental*, between 1930 and 1931, as well as the *Anales de Biotipología, Eugenesia y Medicina Social*, between 1933 and 1941, followed by the *Revista Argentina de Higiene Mental*, between 1942 and 1947. In these, Speeches were assimilated of psychic health and psychopathology in the emergence of the professional-

ization of psi knowledge in the country. It is highlighted a considerable number of articles on early prevention from schooling, reeducation, pedagogy and rehabilitation, as well as the care of children in health institutions (Rodríguez, 2004, 4).

It is known that Argentina was the only country in South America that carried out the eugenics devices that sought to improve the race through the policy of "bleaching" or immigration to import cultural features and relate to the European population (Stepan, 1991, 139). Ferraro and Rousseaux referred to the above, when they analyzed the impact of this influential scientific field in modern psychiatry in Buenos Aires, which idealized the alleged objectivity in mental hygiene and biotipology as social control strategies (Ferraro, Rousseaux, 2014, 13-20).

As for the articulation of psi knowledge, according to Ana Talak, it is precise to consider that the production of academic discourses that constituted general psychology, depended on the appropriation of different disciplines and professions already formed, such as medicine and psychiatry, criminology, education, among others. Thus, the orientation of the "new psychology" as a positive science focused on the performance of tests and measurements, therefore, the expression "experimental psychology" was often used as a synonym for "scientific psychology" (Talak, 2005, 563-600) and, in turn, was assimilated in experimental pedagogy or psychopedagogy, in the care of abnormal childhood.

Telma Reca, considered a precursor of child and youth psychiatry, collaborated in the creation of the Psychology career, and founded the first Mental Hygiene Office in Latin America, assigned to the Pediatric Chair of the Hospital de Clínicas (Talak, 2005, 563-600), based on the aforementioned model from the Child Guidance Clinics.

### PERUVIAN LEAGUE: PSYCHOTECHNICS AND EUPSYCHIC

It arose in 1922, from the Seminario Psico-Pedagógico, an institution created “both to form psycho-hygienic consciousness and to carry out direct prophylactic and eupsychic work” (Delgado, 1936, 109-115). The definition of mental hygiene that characterized this project is that of “avoiding any dyspsychic adaptation, in the first place, and achieving optimum in the mental life and in the behavior of the eupsychic, that is, normal people” (Delgado, 1922).

This was promoted by the initiative of Hermilio Valdizán, first head of the Cátedra de Enfermedades Nerviosas y Mentales of the Universidad Mayor de San Marcos in 1916, together with Honorio Delgado, introducer of psychoanalytic theories in Peru, who edited the *Revista de Psiquiatría y disciplinas conexas* (homonymous to that of Chile), published from 1917 to 1924, in the company of Julio Óscar Trelles, founder of the Escuela Neurológica Peruana in 1938.

Valdizán and Delgado published the first mental hygiene booklet in 1922, entitled “Defend yourself from madness” which, in a brief extension, established eight criteria: 1) on prevention in families or marriage hygiene, of households that should not be formed by personal, work and degenerative background; 2) sexual and reproductive education, as well as preparing to be parents; 3) take care of the child through the mother, perinatal; 4) child surveillance and childcare; 5) child orientation or vocation; 6) alcoholism; 7) venereal diseases; 8) defense of damage or mastery of life’s difficulties (Valdizán y Delgado, 1922-1-16).

In 1930, Baltazar Caravedo initiated the activities of the first Mental Hygiene dispensary and, in 1932, was created the Liga Peruana de HM, which promoted the offer of guidance services to children and parents, as

well as activities coordinated with schools (León, 1976, 122). Since 1932, they published the *Boletín de Higiene Mental*, an organ of the medical corps of the Hospital “Víctor Larco Herrera” until 1937. From this last year, they published the *Archivos Peruanos de Higiene Mental*, until 1941 when it stopped being edited to include its contents in the *Revista de Neuro-psiquiatría* that, since 1938, had been working (Mariategui, 1987).

This group promoted psychoanalysis, collective psychotherapy, art and ergotherapy, Rorschach psych diagnostic and the method of phenomenology in psychiatry. Later, in 1953, was established the Departamento de HM of the Ministerio de Salud Pública and began the installation of mental hygiene offices.

### CHILEAN LEAGUE: SOCIAL DEFENSE

Founded in 1931, it later became the Asociación Chilena de HM, founded in 1932 by Hugo Lea Plaza, promoter of the Cátedra de Neurología de la Universidad de Chile, in the company of Juan Garafulic, children neuropsychiatrist at Hospital Manuel Arriarán, one of the founders of the *Revista Chilena de Neuro-Psiquiatría* published since 1947.

This era coincides with the foundation of the Sociedad de Neurología, Psiquiatría y Medicina Legal de Chile, in 1937, on the initiative of Oscar Fontecilla, precursor of the professionalization of psychiatry and creator of the *Revista de Psiquiatría y Disciplinas Conexas*. Together with his disciple Isaac Horvitz, they promoted the inclusion of mental hygiene in social insurance and in the formation of Social Work profession in the assistance to psychopaths (Araya, 2014, 2).

Luis Custodio Muñoz Muñoz who, from 1930 to 1960, was a treating physician of the Manicomio Nacional, converted in 1952 at the Hospital Psiquiátrico de Santiago. He was the promoter of national mental hygiene and the primary



prevention of alcoholism in formal education. He promoted the work of multidisciplinary teams and intersectoral activities between health and education. Finally, he was one of the initiators of psychiatric epidemiology and mental health planning (Medina y Ojeda, 2015, 315-330).

According to Sánchez, eugenics permeated medicine and psychopathological etiologies through an amalgam between fascist-religious science and dogmatism in Chilean modernity (Sánchez, 2014, 59-83). The historians Sánchez, Leyton and Palacios, showed that hygienism was a movement entrenched in the project of the "social question" and served as a hinge for the deployment of the theory of degeneration of the nineteenth century towards the eugenics of the twentieth century, through political-spatial boundaries of social defense, which the authors configured as "poor's boulevards" in Chile (Leyton, Palacios, Sánchez, 2015).

#### **URUGUAYAN LEAGUE: INCORPORATION INTO PUBLIC HEALTH**

Founded by Antonio Sicco, who was a member of the Sociedad de Psiquiatría del Uruguay since 1924, the latter created at the initiative of professor Bernardo Etchepare in 1925. For his part, Sicco was introducer of psychoanalysis and psychotherapy in the country, from his period in the Chair of Psychiatry since 1943.

Sicco integrated medicine and hygiene in health policy and, thus, in 1929, presented a proposal for "Mental assistance and the teaching of Psychiatry". In 1930 he gave a report on "The imperfections of the current system of assistance of insanes" and that same year he prepared the "Plan of mental prophylaxis", based on the international movement of MH, in full swing of the aforementioned MH Congress in Washington, event from which he derived the "Bases for the creation and organization of the Liga de Higiene Mental del Uruguay",

supported in 1932 before the Sociedad de Psiquiatría del Uruguay (SPU) (Puppo, 1986, 26).

The imprint of degenerationism, characterized this proposal by predisposition of heritage and by determination of the environment, since "external agents, the action of the physical and moral environment that can correct or aggravate the psychopathic disposition" (SPU, 1932, 3). The strategy consisted of an articulation of knowledge that influences behavioral science: "Biologists, psychologists, educators, politicians, sociologists, doctors... it will come maybe one day, in which the new religion of the health of the spirit, has among us its dogma and its rites, its teachers, its apostles and its devotees" (SPU, 1932, 4). This articulation is characteristic of the deployment of social medicine that, in turn, influenced the social turn of psychiatry.

#### **MEXICAN LEAGUE: SOCIAL PREVENTION AND PSYCHOPEDAGOGY**

The Sociedad Mexicana de Eugenesia para el Mejoramiento de la Raza, was created in 1931 at the initiative of the physiologist Alfredo M. Saavedra, who proposed the creation of an Instituto de Higiene Mental to "guide the activities of youth and adults; studying the abnormal suspects of crime and doing a work of diffusion, prophylaxis and mental hygiene" (Saavedra, 1932, 4). Likewise, the works of Sacristán (2009, 163-188) and Ríos (2013, 55-72), account for the objective of the aforementioned Society. In 1935 a preliminary session of the Federación Latinoamericana de Sociedades de Eugenesia was held in Mexico City, which had been managing its creation since 1933 and in 1934 approved its statutes (Stepan, 1991, 189).

The foundation of the Sociedad Mexicana de Estudios de Criminología, Psicopatología e Higiene Mental, was created

in 1936 by Samuel Ramírez Moreno, vice president of the International Mental Hygiene Committee; Saúl González Enríquez, head of special prevention of the Departamento de Prevención Social, and Alfonso Millán, director of the Departamento de Psicopedagogía en Higiene, who edited since 1937 the *Archivos de Neurología y Psiquiatría* with an eugenic orientation to combat physical, moral degeneration and mental of the nation (Urías, 2004, 59).

The Mexican League was created in 1938, attached to the Departamento de Prevención Social of the Ministerio del Interior. According to Ríos, the most important achievement of this, was the creation of the Instituto Nacional de Psicopedagogía of the Secretaría de Educación Pública, from there to found behavioral clinics, which allowed the expansion of psychiatry to the educational and family environment (Ríos, 2016, 13, 58).

Ríos' characterization of this league is comparable to what happened in the leagues in Latin America, naming, mental health as a social movement that integrated various actors from civil society and the State. It constituted an interdisciplinary knowledge, positioned itself as a public opinion building agent through promotion and prevention campaigns and, finally, established itself as a social control device materialized in institutions for the execution of programs for the harmonization of healthy lifestyles and the know how to behave in community (Ríos, 2016, 202-204).

#### **VENEZUELAN LEAGUE: PSYCHIATRIC REFORM**

Three antecedents are recorded, the first attributes its foundation since 1938, when due to the welfare crisis and deterioration of psychiatric asylums, it was proposed to create the League at the same time with the anti-alcoholic struggle and, in 1939, was established the

League Pro-assistance to the Mentally Ill, which did not have a significant impact (González, 2012, 137).

The second stage of the League is set in 1941 by a group of specialized doctors in the United States and Europe, among them Raúl Ramos Calles, who participated in the founding of the Sociedad Venezolana de Psiquiatría in 1942 and former director of the Hospital Psiquiátrico de Caracas. In the company of Guillermo Aranda, who was delegated in the 1st. International Congress of Mental Hygiene in Washington (1930), where he was elected honorary vice president of the International Mental Hygiene Committee. It is also recognized the participation of Francisco Herrera Guerrero, chief of services of the Hospital Psiquiátrico (1935-1948).

The third stage is set in 1946 at the initiative of the doctor Alberto Mateo Alonso, who immigrated to Venezuela when the Spanish Civil War ended in 1939. He also promoted the implementation of the Colonia de Psiquiatría Experimental de Anare, Federal District (1947-1950), where they conducted studies in this field, mainly on schizophrenia. In 1956, Mateo Alonso created the Clínica de Psiquiatría Infantil de Venezuela in Caracas. He is also included among the founders of the Sociedad Venezolana de Salud Pública (Mateo, 1974).

Once laid the foundations for the reform and planning of psychiatric assistance, in 1948 it was materialized the creation of the División de Higiene Mental del Ministerio de Sanidad, under the direction of Ricardo Álvarez until his death in 1956, also founder of the Sociedad Venezolana de Psiquiatría; author of the book *Psychiatry in Venezuela* (1942), a pioneering publication in this historical field from the Colony until the first decades of the 20th century.

## **BOLIVIAN LEAGUE: REVIEW OF THE CONCEPT OF MENTAL HEALTH**

It was created in Sucre from 1945 to 1949, at the initiative of José María Alvarado, who was deputy director of the Instituto Psiquiátrico Nacional "Gregorio Pacheco" from 1944-1949. He was a resident physician at Saint Elizabeth's Psychiatric Hospital in Washington and a fellow at Wayne University in Detroit, Michigan. Upon his return to Bolivia, he managed the association of the specialty, as well as the institutionalization of teaching and research in universities (Hollweg, 2011, 119-141).

Both the League and the Sociedad Boliviana de Psiquiatría, founded in 1951, were created in the company of J. Alberto Martínez, one of the first with the title of specialist in psychiatry in the country, and who studied in Argentina. However, the Society did not have an official operation until 1954, when it merged with other specialties and changed its nomination to the Sociedad de Psiquiatría, Neurología y Neurocirugía, until 1972, year in which political-governmental problems determined its dissolution by decree-law (Aguilar, 1983, 311-325).

Established in La Paz, in the 1960s, the League was reconstituted when several activities, essentially educational, were carried out at the Escuela de Servicio Social and the Escuela Nacional de Enfermería. In 1962, on the occasion of the visit of François Cloutiers, General Director of the World Federation of Mental Health, the Ministerio de Salud Pública signed the "Agreement for the Promotion and Mental Health in Bolivia" (Alvarado, 1990, 49-55) that, according to Alvarado, had no major repercussions due to the political instability of the country that had an impact on the administrative discontinuity of plans and programs without any assessment of its social and sectoral impacts.

Alvarado vindicates in an anachronistic way the concept of mental hygiene instead of the official definition of mental health of the WHO, based on three problems: 1) manifest unilateralization, because the mental is the result or the "synthesis of dynamic, unstable equilibrium, which has been awarded to health". 2) Tacit mind-body dualism, soul or body, psyche or soma, typical of the psychosomatic criteria of psychoanalytic dogmatism. 3) Abstraction of the isolated concept of social reality, due to the psychologist or psychologizing reductionism, with its intended objectivity and positivist demonstration.

Once he raised these limitations, he suggested revising the main slogans of mental hygiene proposed by Clifford Beers, regarding the improvement of the situation of boarding schools, the prevention of mental illnesses and the creation of new forms of assistance for the mildly ill without internment; as well as the reconsideration of assessments that indiscriminately estimated deficiency, weakness and mental disability.

## **PARAGUAYAN ASSOCIATION: MENTAL HEALTH DEFINITION**

In 1936, the Departamento de Higiene y Asistencia changed its scope and became the Ministerio de Salud Pública y Bienestar, in which a national definition of mental health was adopted, prior to the WHO technical concept approved in 1950, understood as "ability of the individual to establish relationships of their physical environment and contribute to it in a way that constructive, unfolding to the maximum potential" (Cegla y Franco, 1984, 251).

In 1946, the Departamento de Higiene Mental was implemented as a technical solution for outpatient mental health care. In 1983, the Sociedad Paraguaya de Psiquiatría was formed, as a non-profit organization. A decade later, in 1998 another union emerged that set its

orientation beyond the specialty towards the professionals who practice it, such as the Asociación Paraguaya de Psiquiatras. Although there were state entities and associations for this field of health, in the available sources there was not a league made up of representatives of civil society that articulated the public health plans and programs.

### **COLOMBIAN LEAGUE: DELAYING**

#### **CONFORMATION AND CHILD GUIDANCE**

The Sociedad de Psicopatología, Neurología y Medicina Legal of Colombia (SPNML) was founded in 1944. It organized in 1953, the Primer Congreso Nacional de Neurología, Psiquiatría y Medicina Forense, in which it recommended to the Minister of Hygiene, "to proceed to found in Bogotá an institute of mental hygiene as an effective means of combating mental illnesses, and as a valuable resource in the prevention of crime and irregular behavior of the child". Likewise, in this congress it was decided to declare constituted the Liga de Higiene Mental de Colombia, therefore "the First Mental Hygiene Congress of Colombia will be convened, with representatives of the medical body of the Neuropathology and Psychiatry societies of the criminal justice, of the Church, of juvenile courts, of pedagogues, of psychologists" (SPNML, 1953, 82).

The following year, 1954, the second version of the Congress, scheduled a symposium on mental hygiene and among its considerations urged the Ministerio de Salud Pública to create a Secretariat of Mental Hygiene based in Bogotá, also the creation of a Department of Mental and Social Hygiene (SPNML, 1953, 3). However, both the first and second congress initiatives failed to materialize.

In 1956, the Beneficencia de Cundinamarca created the Instituto de Higiene Mental, under the direction of

Julián Córdoba Carvajal, who was one of the founders of the Asociación Psicoanalítica Colombiana in 1962, which was made up of the scientific directors of four social assistance institutions of the entity, that although they interacted with the psychiatric asylums, concentrated its actions in the infantile population of the Escuela de Orientación Femenina, the Hospicio Campestre de Sibaté, and the Instituto San José, as well as of the older adult in the Dirección de ancianatos. Subsequently, the sources locate the foundation of a Colombian League in the sixties, from the creation of the Centro Piloto de Higiene Mental, attached to the Secretaría de Educación de Bogotá, by agreement 110 of 1960 with three purposes: 1). Teacher training in pedagogy. 2). Research of psychopedagogical problems, 3). Rehabilitation and treatment of children with emotional behavior and learning problems (Sánchez, 1962).

In 1960, the creation of the Comité Colombiano para la Salud Mental was established, which in May 1961 gave rise to the Colombian League, a private entity, affiliated with the World Federation for Mental Health, chaired by Guillermo Correal Sanín; however, according to Rosselli, the activities of the League were very scarce and, therefore, had little impact on the population (Rosselli, 1968, 648).

It stands out that mental hygiene became more important since the 60s, as evidenced by the first issues of the *Revista Colombiana de Psiquiatría*, published since 1964, with themes such as the teaching of psychiatry, relations between psychiatry and Mental hygiene and clinical guidance for children (Cruz, 2016, 245-262).

These initiatives were followed by the foundation of the Sección de Salud Mental of the Ministerio de Salud, through Article 33 of Decree 3224 of 1963. This was the starting point for the approval of Resolution 000679 that

established the “Internal rules and regulations for psychiatric units in general hospitals” and the creation of the Consejo Nacional de Salud Mental, by Decree 3060 of 1965, which laid the groundwork to include for the first time a Mental Health Program in the National Health Plan (1968-1977) (Ministerio de Salud, 1967). Thus, this historical context and regulatory framework marked the deployment of mental hygiene towards mental health in Colombia.

#### **ECUADORIAN ASSOCIATION AND MENTAL HEALTH POLICY**

With the introduction of a National Mental Health Law, in 1946 it was determined that planning throughout this country would be stimulated, through the promotion of research, implementation and development of programs for community mental health programs (Cruz, 2003, 23). However, initiatives for the development of this health field were only consolidated on the second half of the 20th century.

Public policies in mental health had a late emergence, given that initially they depended on the Ministerio de Bienestar Social in which the health component operated as Undersecretary from 1945 to 1967 when the Ministerio de Salud Pública was created, with Ecuador being the last country in America to institutionalize it. Only until 1980, in this Ministry, it was created the Dirección Nacional de Salud Mental (Zúñiga y Riera, 2018, 39-45).

In 1971, the psychiatrists of the Nuclei of Quito and Guayaquil, agreed to establish the Asociación Ecuatoriana de Psiquiatría, as a nonprofit private law institution and, subsequently, the Cuenca Nucleus was integrated in 1984. According to the sources consulted, due to its delayed health process, in the first half of the twentieth century, there was no league

or mental hygiene agency in this country, to convene various civil society actors and to articulate plans and programs state.

#### **ASSOCIATIONS AND LEAGUES IN CENTRAL**

##### **AMERICA AND PANAMA**

Except Panama, the formation of psychiatry associations in the Central American region was later, in the same way as the formation of departments of this specialty in medical schools, as well as in the beginning of the professionalization of psychology. For this reason, the countries that formed the Asociación Psiquiátrica de Centroamérica y Panamá (APCAP), founded in 1951 within the framework of the first congress of the Asociación Psiquiátrica de América Latina - APAL, held in Mexico, at the initiative of doctors Mario Flores Ortiz (Nicaragua), Ramón Alcerro Castro (Honduras), Fernando Quiroz Madrigal (Costa Rica), José Molina Martínez (El Salvador), Mariano Gorras (Panama) and Gonzalo Adis Castro (Costa Rica), who signed a document for the foundation of the Instituto de Salud Mental de Centro America y Panama with the objectives of:

- 1) Train staff; 2) Study the needs, mental health services in the member countries, demand for these services and the capacity to implement the programs requested. 3) Service of consultation, advice and coordination of resources. 4) Education and organization of communities towards mental health. 5) Promote the expansion of services and the creation of new programs. 6) Promotion of research (Reyes, 2010).

In Panama, mental hygiene was incorporated into the curriculum of the country's first clinical psychology program, created in 1936 at the Universidad de Panamá, which began with psychotechnics for the measurement

of mental parameters. On the same date, the Faculty of Education, included courses in educational psychology, adolescent psychology, child psychology and mental hygiene (Herrera, 2007, 69). From 1955, the first National Mental Health Plan was formulated, which represented the first concrete step towards primary mental health care: humanize the care of people suffering from psychic disorders. In parallel, health centers were extended to the main cities of the country (Da Costa, 2007, 18).

In 1956, the Ministerio de Salud created the Mental Hygiene Section as a dependency of the General Directorate of Health, which was headed by the Spanish doctor Mariano Gorriz, exiled from the Franco dictatorship, promoter of modern psychiatry in various mental health institutions Panamanians, including the Hospital Psiquiátrico Nacional (Herrera, 2007, 54). In this same period, was founded in October 1959 the Isthmus Asociación Psiquiátrica del Istmo (late Sociedad Panameña de Psiquiatría) at the initiative of the Spanish doctor Mariano Gorriz and the north american Julien Kennedy, who was boss of the Psychiatry service of the Hospital Gorgas. According to the official and historiographical documents consulted, as well as the creation time of these institutions, no results were found a consolidated mental health agency or league in this country.

In Guatemala, it is striking that by 2020 the Liga Guatemalteca de Higiene Mental (LGHM) continues to function, founded in March 1952 as a private, non-profit and non-governmental institution, at the initiative of Jaime Barrios Peña (Psychologist) and César Meza (Doctor). In January 1954, they published the first newsletter of the League, but it soon went into recess until 1956, due to the overthrow of the Revolución de Octubre government (1944-1954).

The projection of the League has been "to influence government and non-governmental organizations to implement and include the topic of mental health in their work agendas, contributing to the promotion of human resources for mental health prevention and care" (LGHM, 1952). Their actions began to have greater impact from the 1960s and 1970s, with the edition of the "Salud Mental" newsletter, published for 10 years, among other dissemination materials. Likewise, he carried out an intense activity of campaigns to promote health and prevent mental illness, with emphasis on childhood and family.

In Honduras, the Mental Health Law Project was introduced in 1953, at the initiative of doctor Ramón Alcerro Castro, who specialized in psychiatry in the United States; however, this proposal was not given sufficient importance for approval in the Congreso Nacional. This law proposed the creation of the National directorate of mental hygiene of the Ministerio de Salud Pública, which would be responsible for departments responsible for community mental education in secondary and university educational institutions; as well as the implementation of special schools for the care of children with mental retardation and minor offenders (Reyes, 2010, 89-95).

In Nicaragua, it was founded the Sociedad de Psiquiatría y Psicología in 1954, with a trajectory until 1974. Subsequently, in February 1982, it changed its business name and was formed the Nicaraguan Psychiatric Association, composed by 21 professionals of this specialty. In 1979, the Association participated in the construction of the National Mental Health Plan within the Single Health System, which regionalized mental health with the opening of Psychosocial Care

Centers (CAPS), opened 7 day hospitals, and incorporated mental health services in general hospitals and carried out systemic community interventions; however, these programs were declining for economic and political reasons.

In El Salvador, it stands out the work of the doctor José Molina Martínez, who was director of the Hospital Psiquiátrico in 1949, considered a promoter of modern psychiatry in the country and founder of the chair of this specialty at the Universidad de El Salvador in 1954. The first association was founded in 1961 and brought together psychiatrists, neurologists and neurosurgeons, because it predominated training in neuropsychiatry; but, at the beginning of 1975, neurosurgeons withdrew to form their own association. This fact, plus the presence of a psychodynamic orientation led to the need for psychiatry to affirm its own identity with respect to the other medical disciplines, this is how in 1976 it was founded the Asociación Salvadoreña de Psiquiatría. As in Panama and Nicaragua, because of the late incorporation of mental health into the public agenda, no results were found a consolidated mental health agency or league in these countries.

In the República Dominicana, it was founded in 1967 the Sociedad Dominicana de Psiquiatría, Neurología y Ciencias Afines, under the direction of the doctor Luís Marión Heredia, specialized in the United States, where he worked until 1963 when he returned to his country, at that time he influenced the Dominican psychiatric reform. Together with Marión, there is a group to which the first advance of the specialty is attributed, in which they stood out the doctors Antonio Zaglul, Emilio Guillen, the brothers Juan and Edmundo Taveras, and José Ramón Baez Acosta.

In 1971 was founded the Patronato de Higiene Mental, attached to the Sociedad de Psiquiatría y Neurología Dominicana. Although the foundation is reviewed in 71, however, in 1975 there was still no such institution (PHM). The objectives of the Patronato were aimed at: 1) training of auxiliary staff and without a degree in psychiatric assistance, 2) incentives for a more balanced geographical distribution of psychiatrists, 3) promotion of participation and collaboration in this field of physicians family and general hospitals, 4) progressive creation of outpatient centers, 5) transformation and modernization of psychiatric hospitals with labortherapy centers.

It was disjointed the psychiatric care of public health and in dispute with general medicine for reasons of the theory of somaticity of diseases, as well as for the resources and hospital beds in use. Therefore, it was proposed a process of psychiatric reform and decentralization, while it was a priority to plan psychiatric care rather than building hospitals, disjointed with long-term sustained policies (Zaglul, 2011, 44-45).

## CONCLUSIONS

The Ibero-American leagues were formed as private organizations (except Brazil, Spain, Mexico and Colombia of state creation), starting in the 1920s with the worldwide boom of the Mental Hygiene Movement. Of the 12 countries that formed leagues, half of these were proposed and created before the psychiatric professional societies, such as Brazil, Cuba, Spain, Chile, Bolivia and Colombia, because this specialty is one of the last in being added to the curricula of medical schools.

In fact, they were due to the scientific exchange of doctors who specialized in psychiatry mainly in the United States and France, among other European

countries, and who, upon returning to their countries, initiated plans, reforms of the care model, leagues and associations, as well as the first chairs of diseases Nervous and psychopathological in the main universities in agreement with the asylum and municipal and national psychiatric hospitals. Similarly, they contributed some Spanish psychiatrist's exiled politicians from the Franco regime.

Subsequently, the leagues began to disappear in the 1950s (except that of Guatemala active in this 2020), when WHO reassessed the term and defined instead the technical concept of mental health and, likewise, at this time, plans, programs and policies began to emerge in this sector, led by the newly constituted ministries of health.

Inquiring about the emergence and extension of mental hygiene leagues in these regions, allows us to verify that there were discursive and practical convergences between the institutions that promoted eugenics, mental hygiene and psychotechnics. It is noted that, in the first half of the twentieth century, the leagues had in common their origin and functioning in neuropsychiatry associations, also a close relationship of both with eugenics societies, according to the *Register of Societies and scientific institutions for the Americas Latina of the Pan American Sanitary Bureau* (Brazil, Chile, Peru, Uruguay, Spain, Cuba, Argentina, Mexico) (Oficina Sanitaria Panamericana, 1939, 38). Similarly, all of these formed a section of childcare and, at the same time, the societies of this specialty along with those of pediatrics included a section of eugenics.

This prevention of the deviation of behaviors and social defense were influenced by the delayed assimilation of the theory of degenerationism that, although it was

distorted at the end of the 19th century in the West, had a subsequent boom in Ibero-America until the middle of the 20th century. The supposed expansion of the physical, moral and mental decline of the population, established a therapy based on hygienic precepts of social medicine, due to the determination of unhealthy natural and anthropic environments and the hereditary predisposition of family groups degenerated by drug addiction, venereal diseases, madness and criminality.

In this context, it was conducive the field of action of eugenics that, in its ambition of biological improvement of the race, sought to contain the advance of physical and psychic degeneration, through the implementation of immigration policies for the genetic crossing with regions of biotipologies considered better endowed, prenuptial medical certificate, that implied the physical and mental validity, as well as the judicial background, until the mandatory sterilization of degenerates, among other measures for the formation of healthy families.

In the background of the medical police, which gave rise to the concept of public health, there was a social turn of prevention, deployed by disciplines and policies, such as the "social issue of health", hygienism, medicine and social psychology.

In this process of extension to the population, social psychiatry emerged, known as "enlarged", community, and included in the cross-cultural area, which has had multiple connotations with a different interpretation between countries and times. Indeed, according to the historiographical balance, this has been the field of psychiatry that stood out most in Ibero-America during the twentieth century.

\*\*\*



## REFERENCES

- Aguilar, G. (1983). History of psychology in Bolivia. *Revista Latinoamericana de Psicología*, 15 (3), 311-325.
- Alvarado, J. (1990). Mental Health in Bolivia. Memoria de las V Jornadas Nacionales de Psiquiatría, Sucre, agosto, 49-55, en: Villaseñor, S., Rojas, C. y Garrabé, J. (2015). *Anthology of classic texts of Latin American psychiatry*. Morelos: Página seis - Universidad de Guadalajara, 123-129.
- American Psychological Association [s.f.]. Mental hygiene. *APA Dictionary of Psychology*. <https://dictionary.apa.org/mental-higiene>
- Araya, C. (2014). Insertion of national psychiatries in the context of consolidation of Latin American modernization: First Pan American Neuro-Psychiatric Journeys, Santiago de Chile, 1937. *Nuevo Mundo, Mundos Nuevos*, 2, <http://nuevomundo.revues.org/66931>; DOI: 10.4000/nuevomundo.66931
- Bosch, G. (1930). The purposes of the Argentine League of Mental Hygiene. *Revista de la Liga Argentina de Higiene Mental*, 1 (1), 7-21
- Brody, E. (2004). The World Federation for Mental Health: its origins and contemporary relevance to WHO and WPA policies. *World Psychiatry*, WPA, febrero, 3(1), 54-55. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1414666/>
- Campos, R. y González, A. (Eds.) (2016). *Psychiatry and mental hygiene in the first Franco regime. Ruptures and continuities*. Madrid: Catarata.
- Campos, R. (2001). From the hygiene of isolation to the hygiene of freedom. The reform of the asylum institution in France (1860- 1940). *Frenia*, 1 (1), 37-64.
- Campos, R. (1997). Mental hygiene and social danger in Spain (1920-1936). *Asclepio*, 49 (1), 39.
- Cegla, I. y Franco, F. (1984). History of psychiatry in the Paraguay. *Anales de la Facultad de Ciencias Médicas*, 16 (01), 251, en: Domingues, J., Geusina M. y Ribeiro, V. (2018). The implementation of mental health policy in Paraguay: challenges and potential. *Revista Mercosur de políticas sociales*, 2, 287-309, doi: 10.28917/ism.2018-v2-287
- Cruz, E. (2003). *The madman and the mental institution. From the Royal Audience of Quito to the first half of the 20th century*. Quito: Pontificia Universidad Católica del Ecuador.
- Cruz, O. (2016). Thinking, practicing and writing: the Colombian Journal of Psychiatry and the history of Colombian psychiatry in the second half of the 20th century. *Revista Colombiana de Psiquiatría*, 45 (4), 245-252.
- Da Costa, G. (2007). Historical background. En: Herrera, J. (2007). *Mental health development in Panama. History and present*. Panamá: INSAM-OPS.
- Delgado, H. (1936). Psychiatry and Mental Hygiene in Peru. *Anales de la Facultad de Medicina*, Universidad Nacional Mayor de San Marcos, 19 (1), 109-115.
- Delgado, H. (1922). *Mental hygiene. Synthetic program to start your institution in Peru*. Lima: Academia Nacional de Medicina, Sanmarti y Cía, 1922.
- Dualde, F. (2004). Prophylaxis of mental illness in Franco's psychiatry: schizophrenia, eugenics, and marriage counseling. *Revista de la Asociación Española de Neuropsiquiatría*, 24 (92), 131-161.
- Ferraro, N. y Rousseaux, A. (2014). Reflections on the impact of eugenics in the Argentine scientific field. Biotipology as a particular exponent in Argentine psychiatry. *Temas de historia de la psiquiatría argentina*, 17 (33), 13-20.
- Figueira, F. y Boarini, M. (2014). Psychology and mental hygiene in Brazil: the history to be told. *Universitas Psychologica*, 13 (5), 1801-1814, <http://dx.doi.org/10.11144/Javeriana.upsy13-5.phmb>
- Fontenelle, J. (1805). Mental hygiene and education. *Arquivos Brasileiros de Higiene Mental*, 1 (1), 1-10, en: Figueira, F. y Boarini, M. (2014). Psychology and mental hygiene in Brazil: the history to be told. *Universitas Psychologica*, 13 (5), 1801-1814, <http://dx.doi.org/10.11144/Javeriana.upsy13-5.phmb>
- Galton, F. (1904). Eugenics: its definition, scope, and aims. *The American Journal of Sociology*, 10 (1), July 1904. <https://doi.org/10.1177/0038026104SP100104>
- González, M. (2012). *Genealogy of the psychiatric order in Venezuela*. Doctorado en Metodología de la

- Investigación en Sociología, Comunicación y Cultura, Universidad Complutense de Madrid.
- Herrera, J. (2007). *Mental health development in Panama. History and present*. Panamá: INSAM-OPS.
- Hollweg, M. (2015). José María Alvarado (1915-2002). En: Villaseñor, S., Rojas, C. y Garrabé, J. (2015). *Anthology of classic texts of Latin American psychiatry*. Morelos: Página seis - Universidad de Guadalajara.
- Klappenbach, H. (1999). The mental hygiene movement and the origins of the Argentine League of Mental Hygiene. *Temas de historia de la psiquiatría argentina*, 10, 3-17.
- Lemkau, P. (1963). *Mental hygiene in public health*. New York: McGraw-Hill.
- León, C. (1976). Community mental health perspectives in Latin America. *Boletín de la Oficina Sanitaria Panamericana*, agosto. <https://iris.paho.org/bitstream/handle/10665.2/17545/v81n2p122.pdf>
- Leyton, C., Palacios, C. y Sánchez, M. (2015). *Boulevard of the poor. Scientific racism, hygiene and eugenics in Chile and Latin America, XIX and XX centuries*. Santiago: Ocho Libros - Universidad de Chile.
- Liga Guatemalteca de Higiene Mental (s.f.). History. <https://www.ligadehigienemental.org/la-liga>
- Mariategui, J. (1987). Society history of psychiatry in Peru. *Revista de Neuro-Psiquiatría*, 50, 12-23.
- Mateo, A. (1974). *Evolution of mental hygiene in Venezuela*. Caracas: Universidad Central de Venezuela, Ediciones del Rectorado, 1974. En: Feldman, M. (1997). Mateo Alonso, Alberto. *Dictionary of History of Venezuela, 1997*. <http://bibliofep.fundacionempresapolar.org/dhv/entradas/m/mateo-alonso-alberto>
- Medina, E. y Ojeda, C. (2015). Luis Custodio Muñoz Muñoz (1897-1892) (315-330). En: Villaseñor, S., Rojas y C., Garrabé, J. (2015). *Anthology of classic texts of Latin American psychiatry*. Morelos: Página seis - Universidad de Guadalajara.
- Ministerio de Salud Pública (1967). National Health Plan 1968-1977. Bogotá: Imprenta P.E.S.
- Oficina Sanitaria Panamericana (1939). Societies and scientific institutions of Latin America. Washington D.C., *Publicaciones mimeografiadas*, 84, 38. <http://iris.paho.org/xmlui/handle/123456789/1092>
- Puppo, H. (1986). The Chair of Psychiatry. Its historical evolution. *Revista de Psiquiatría del Uruguay*, 48, 1986, 26.
- Raymonez, J. (1958). The Mental Hygiene League in Cuba. *Archivos de Neurología y Psiquiatría*, 8 (3). En: Marqués, P. (2014). *Science and power in Cuba. Racism, homophobia, nation (1790-1970)*. Madrid: Verbum.
- Reyes, J. (2010). *Historical moments of the psychiatry of Central America and the Dominican Republic in the perspective of the Central American Association of Psychiatry*. Tegucigalpa: OMS-OPS, Biblioteca virtual en Salud de Honduras, 19. <http://www.bvs.hn/Honduras/Historia/HISTORIAASOCIACIONCENTROAMERICANAPSIQUIATRIA.pdf>
- Riedel, G. (1930). Impressions of the 1st International Mental Hygiene Congress. *Arquivos Brasileiros de Higiene Mental*, 3(6), 195-198. En: Figueira, F. y Boarini, M. (2014). Psychology and mental hygiene in Brazil: the history to be told. *Universitas Psychologica*, 13 (5), 1801-1814, <http://dx.doi.org/10.11144/Javeriana.upsy13-5.phmb>
- Ríos, A. (2016). *How to prevent madness? Psychiatry and mental hygiene in Mexico, 1934-1950*. México D.F.: UNAM - Siglo XXI.
- Ríos, A. (2013). *Madness during the Mexican Revolution. The first years of the General Madhouse of La Castañeda, 1910-1920*. México DF: El Colegio de México.
- Rodríguez, P. (2004). The first serial publications of the Argentine League of Mental Hygiene (1930-1947). XI Jornadas de Investigación, Facultad de Psicología - Universidad de Buenos Aires.
- Rosen, G. (1974). *Madness in Society: Chapters in the historical sociology of mental illness*. Chicago: University of Chicago Press.
- Saavedra, A. (1932). The prophylaxis of crime and the joint work of prison action. *Boletín de la Sociedad Eugénica*

- para el mejoramiento de la Raza, 17, 4. En: Urías, B. (2004). Degenerationism and mental hygiene in post-revolutionary Mexico (1920-1940). *Frenia*, 4 (2), 61.
- Sacristán, J., Germain, J. y Rodríguez, B. (1939). Practical Psychiatry and Mental Hygiene (Impressions from a trip to the United States). *Archivos de Neurobiología*, 10, 339.
- En: Huertas, R. (1995). The role of mental hygiene in the first attempts to transform psychiatric care in Spain. *Dinamis, Acta Hisp. Med. Sci Hist Illus*, 15, 193-209.
- Sacristán, C. (2009). Madness meets the madhouse. A story to tell. *Cuicuilco. Revista de la Escuela Nacional de Antropología e Historia*, 16 (45), 163-188.
- Sánchez, M. (2014). Eugenics: science and religion. An approach to the chilean case", *Revista de Historia Social y de las Mentalidades*, 18, (1), 2014, 59-83.
- Sociedad de Psiquiatría del Uruguay (1932). *Foundations for the creation and organization of the League of Mental Hygiene of Uruguay*. Montevideo: LUHM.
- Sociedad de Psicopatología, Neurología y Medicina Legal de Colombia (1953). Votes approved by the First National Congress of Neurology, Psychiatry and Forensic Medicine in its closing section on March 1, 1953. *Revista de Medicina Legal de Colombia*, Bogotá, 13, 82.
- Sociedad de Psicopatología, Neurología y Medicina Legal de Colombia (1953). Documents related to the Second National Congress of Neurology, Psychiatry and Legal Medicine. *Antioquia Médica*, 5 (1), 3.
- Stepan, N. (1991). *The Hour of Eugenics. Race, Gender, and Nation in Latin America*. London: Cornell University Press.
- Talak, A. (2005). Eugenics and mental hygiene: uses of psychology in Argentina, 1900-1940 (563-600). En: Miranda, M. y Vallejo, G. (Eds.) (2005). *Social Darwinism and eugenics in the Latin world*. Buenos Aires: Siglo XXI.
- Urías, B. (2004). Degenerationism and mental hygiene in post-revolutionary Mexico (1920-1940). *Frenia*, 4 (2), 53.
- Valdizán, H., y Delgado, H. (1922). *Defend yourself from madness! Mental hygiene manual*. Lima: Sociedad de Beneficencia Pública, 1922.
- Zaglul, A. (2011). *Psychiatric care in the Dominican Republic. Selected works*, T. 2. Santo Domingo: Banreservas, 2011, 44-45.
- Zúñiga, D., y Riera, A. (2018). History of mental health in Ecuador and the role of the Central University of Ecuador, old paradigms in a digitized society. *Revista Facultad de Ciencias Médicas*, Quito, 43 (1), 39-45