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Okezi T. Otovo, *Progressive Mothers, Better Babies: Race, Public Health, and the State in Brazil, 1850–1945* (Austin, TX: University of Texas Press, 2016), pp. x + 273, £21.99, pb.

Okezi Otovo's complex account of Brazilian maternalism offers a counterbalance between the elite's mid-nineteenth century clamour for population growth and better health, and the mid-twentieth century's establishment of services for mothers as an expected governmental function. This is no simple story of state assertiveness accompanied by an erosion of barriers to technocratic rule, thanks to Otovo's careful analysis of the role of black womanhood in this historical transition. Throughout the period under study, mothering by Afro-Brazilians was a medical academic topic, an object of improvement for social service organisations, an ongoing daily event for mothers of colour and their families and the product of knowledge and resource exchanges between expert reformers, state agent, and lay people. Poor black women were at the centre of national debates about good mothering, the stakes of which reverberate in contemporary Brazilian debates about good birthing.

Otovo is especially interested in the northeastern Brazilian state of Bahia. In the mid-nineteenth century, the state was ruled by a small white elite that owned the majority of the land and means of production, with most other inhabitants clustered in a variety of low-paying activities. Yet factors such as ethnicity, birthplace, gender, class and networks made social mobility a more fluid matter in practice. Otovo takes these intersections seriously, as they determined the influence of the actors she follows, from non-medical healers, to physicians, to the women who gave up their children to Church tutelage. Specialised obstetric care became more widely available in Bahia's capital of Salvador in the second half of the nineteenth century, buttressed by elite fears of depopulation and disease, and the rise of French puériculture. While physicians railed against longstanding care traditions by popular healers, including midwives, labelling them backward and incompetent, they embraced women as subject to modernising social reforms and as future consumers of medical services. Thus, physicians came to support eugenic societies, the expansion of medical professional jurisdiction over the processes of birthing and early childhood education, and alliances with philanthropic organisations and upper-class female reformers. The technocratic shift towards modern maternalism was all but complete by the 1920s.

The contours of this story will resonate with those familiar with previous works by Donna Guy on Argentina, Kim Clark on Ecuador, Jadwiga Pieper Mooney on Chile, and myself on Peru. But there is also something special about the continuous focus on poor black motherhood in Brazilian history. Bahia gave origin to and reinforced national ideals about Afro-Brazilian mothers as 'generous, loyal, and submissive' people who nurtured 'the whole of Brazil' (p. 7) as domestic servants and wetnurses. As Otovo shows, this trope paid homage to the women of colour who laboured on behalf of their own children and those they raised. At the same time, it hid from view the ways in which slavery, domestic servitude, economic marginality and gender inequality shaped the mothering options available to poor black women from the nineteenth century on. Failing to acknowledge these conditions, modernising advocates fell back on portrayals of such women as torn away from conventional family bonds and dependent on others, be it in the homes in which they served or as the recipients of charity, rather than as wives and companions in their own right.

The era of Getúlio Vargas, for all the new resources and laws it offered the working classes in the 1930s and 1940s, did not fundamentally alter the older mother-centric

way to deliver and consume social assistance. Contrary to the federal government's efforts to target assistance at working men, Bahia primarily supported women, since the male-dominated industrial workforce was small and many women were critical wage earners in their households, where fathers were often absent or relegated to irrelevance. Bahian physicians and family advocates presented this peculiarity as a local expression of federal mandates. On the supply side, Vargas's Estado Novo's paternalism also made concessions to Bahian maternalism, by relying on existing private organisations to administer public programmes. The dynamism of these philanthropies, in which women from wealthy sugar families played a prominent role, highlights the versatility of the rich, whose established patronage networks and traditional notions of the deserving poor were reproduced within Vargas's new nation-building project.

Otovo concludes with a provocative epilogue about the birthing experiences of contemporary Afro-Brazilian women, disproportionally mistreated within the Sistema Único de Saúde (SUS). Health activists for the 'humanização do parto' point to a number of egregious conditions, including medical professionals' penchant for pushing caesarean operations on parturient women, and their labelling of vaginal births as appropriate only for the impoverished. The instances of morose disrespect that activists have documented evince a widespread deficit of professional compassion that especially affects women of colour, with none of the benign, if autonomy-negating, paternalism of older institutional arrangements. This, and the relative novelty of the SUS – which took shape in the late 1980s, many years after Otovo's historical sources end – might suggest the contours of a new project on the history of birthing. On the other hand, the central theme of Otovo's book about the devaluation of Afro-Brazilian women's experiences within the national context will provide a striking continuity for those concerned with present-day inequalities within the SUS.

In addition to its substantial historical contributions, *Progressive Mothers, Better Babies* reminds us that the national level is but one possible level of analysis in scholarly research. This journal's readers, attuned to the stark geographical, cultural and political variations of Latin America, will find much to like in a book that uncovers the consequence and novelty of a specific region in the history of maternalism, and that opens up the possibility of making comparisons between different Afro-American health worlds.

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Gilberto Hochman and Nísia Trindade Lima (orgs.), *Médicos intérpretes do Brasil* (São Paulo: Hucitec Editora, 2015), pp. xxv + 640, £61.50, pb.

Gilberto Hochman and Nísia Trindade Lima's collection *Médicos intérpretes do Brasil* reflects on the role of physicians as social theorists and critics, imagining and interpreting the nation over the course of the twentieth century. The multi-authored, 29-chapter volume brings together original texts written by some of Brazil's betterand lesser-known physicians with argumentative, interpretative essays that contextualise the sources and provide insight into the challenges, contradictions and potential of nation-building as read through the medical gaze. As the editors make clear in their introduction, the historians focus their chapters on Brazilian physicians' conceptualisations of their nation at critical moments as well as their contributions to political debates that went beyond the world of the clinic. In excerpts from their original