essays, which can be a bit distracting to the reader. More important, however, is that this volume raises the Argentine indigenous peoples from their historical ashes and places them at the center of the narrative, where they belong.

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MEDICINE IN POST-INDEPENDENCE CUBA

The Right to Live in Health: Medical Politics in Postindependence Havana. By Daniel A. Rodríguez. Chapel Hill: University of North Carolina Press, 2020. Pp. xv, 267. Figures. Notes. Bibliography. Index. \$34.95 paper. doi:10.1017/tam.2021.124

Who has the right to live in health, and who is to say? In his outstanding study of the history of Cuban medical politics from the last phase of resistance to Spanish colonialism in the 1890s to the 1940 Constitution, Daniel Rodríguez shows how Cuban physicians addressed these questions just as the island sought to establish itself as a modern state.

Rodríguez starts with a memorable first chapter telling the dramatic history of the *reconcentrado* refugees—the thousands of Cubans forced by the Spanish to leave the countryside to prevent rural populations from feeding and supporting anticolonial rebel fighters. Close to 170,000 civilians died as a result, many of them infants who starved to death in public urban spaces, left without access to food, which the "reconcentrated" victims of displacement could no longer provide. The international outcry about the events strengthened the support for Cuban rebels. It also inspired US intervention, with mixed results. Health and welfare strategies pursued by the United States in Cuba prioritized racialized measures of "scientific charity" aimed at relieving distress while building up character, driven by the principle that people should not get used to free relief programs or state charity. The 1901 Platt Amendment which structured US-Cuban relations for decades to come not only limited Cuban sovereignty but also implemented sanitary obligations that often ranked US interests above those of their Cuban counterparts.

Angered by the ill-effects of foreign powers' interventions, Cuban doctors saw anticolonialism as one of the key tenets in their mobilization for a proper politics of health to benefit their fellow citizens. "Medical nationalists" thus assumed responsibility for the reshaping of Cuban society as a modern and healthy republic. In 1903, two Cuban physicians, José Ángel Malberty and Pedro Albarrán Domínguez, members of the house of representatives, made a pioneering case for centralizing the health and welfare of the population under one ministry. Their initiatives not only

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inspired the foundation of the world's first cabinet-level ministry dedicated to protecting public health in 1909, but also planted the seed for a robust conception of state responsibility for the health of the people. Rodríguez shows that effective health measures were not the work of doctors alone but resulted from interactions among different groups of health officials and the patients they treated.

Statistical evidence, as well as reports by individual health educators and nurses, revealed that not all people in the capital city were equally threatened by epidemics. Rodríguez's sources provide evidence of a racialized postcolonial economy that let some people bear the brunt of disease while protecting others. The tuberculosis outbreak in the late 1920s is a case in point. Cubans of color were so disproportionally affected by the disease that doctors called it the "black plague." In medical debates, references to race and alleged black ignorance were abundant, but the same debates brought to light the inequalities of the economic system that relegated some people to the lowest paying jobs and poverty. The deliberations over tuberculosis also produced an indictment of the racial segregation of the city's private medical system, which offered better health care options for white citizens than for those of African descent. The evidence of epidemics as unequal killers in a racialized system challenged the dominant discourse of raceless Cuban nationalism that originated in the late nineteenth century when black and white soldiers fought side by side for an independent Cuba.

Medical politics in post-independence Cuba were remarkable for their early implementation of the concept of the right to health, evident in Article 10 of the 1940 Constitution, which enshrined the fundamental right of all Cuban citizens to medical care. The processes of institutionalizing medicine and regulating the medical profession remained complex, at times highly problematic. Doctors were not a homogenous group, and discussion ensued on their rights and obligations and the extent of state regulation of medical practice under a socialized medical system. Rodríguez's evidence reveals a remarkable trajectory of medical politics, even if not all of Cuba's nationalist doctors' projects assured a rosy future. He presents a highly readable and well documented story that connects science, governance, medical professionalism, and people's right to health as a fundamental citizenship right.

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MEXICAN ELITE

Ethnic Entrepreneurs, Crony Capitalism, and the Making of the Franco-Mexican Elite. By José Galindo. Tuscaloosa: University of Alabama Press, 2021. Pp. 240. \$54.95 cloth; \$54.95 e-book. doi:10.1017/tam.2021.125