Visiting Nurses and the Rockefeller Foundation in Colombia, 1929-1932

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Colombia and the United States strengthened their trade, scientific and cultural exchanges during the 1920s. In regards to health and medicine issues, the Rockefeller Foundation played a pivotal role between 1919 and 1945, when it conducted scientific research and financed the battle against infectious diseases, above all yellow fever and hookworm. It also encouraged the development of a public health system in Colombia by creating American-inspired institutions and training health professionals.

Scholars have analyzed how the Rockefeller Foundation fought to eradicate tropical diseases and created scientific laboratories. Although sanitary education was an important element of the Rockefeller Foundation international policies – a factor that influenced Colombian health practices and helped strengthen thereby the national government – specialists have not gone into this matter in depth. An analysis of the implementation of this program proves to be important so as to understand how the United States replaced France as the main scientific and academic benchmark in Colombian medicine.

We must consider that Colombia received 264 scholarships from the Rockefeller Foundation between 1917 and 1962, a very significant number, only surpassed by Brazil and Mexico. These scholarships helped train physicians, nurses and engineers who later spread the American health model and occupied key positions in Colombian government. The Rockefeller Foundation also sent trainers who prepared Colombian students and professionals, as well as officials and consultants, who later influenced Colombian health policies.

Some experts have studied the role of the Rockefeller Foundation in the professionalization of nursing in Colombia in the 1940s. Nevertheless, they have omitted its contribution of the School of Visiting Nurses to the development of Colombia public health, which operated in Bogotá between 1930 and 1932. It should be noted that Colombia and Brazil were the only Latin American countries receiving grants to raise the professional standards of
female nurses in their own territory. It was a consequence of the Rockefeller Foundation interest in strengthening their sanitary units in those countries. Although there were no sanitary units or a solid administrative health structure in Colombia at that time, the international prestige of the National Director of Hygiene, Pablo Garcia Medina, helped bring in the Rockefeller Foundation’s support for the formation of the School.

Because of its relationship with maternal care, the work of visiting nurses in the child protection campaign was considered fundamental. They would serve as a connection between mothers and health professionals in health centers and through home visits. Within this framework, the state aimed at reaching out to poor families, especially mothers, through the professionalization of nurses based on the American model. In this way, the Colombian government would not only legitimize its action but also strengthen the national health institutions and stimulate preventive programs.

School of Visiting Nurses

During the Pan American Conference of National Directors of Health held in Washington D.C. in 1926, Pablo Garcia Medina requested Frederick Russell, Director of the International Health Division (hereinafter IHD) between 1923 and 1935, to send two competent visiting nurses to work for some public assistance branches in Colombia. This first approach served to obtain the cooperation of the IHD. The formal request was made in 1928, when the National Directorate of Hygiene and Public Assistance (hereinafter NDHPA) received funds to support the fight against tuberculosis and infant mortality.

Pablo Garcia Medina took advantage of his good relationship with George Bevier, the Rockefeller Foundation’s representative in Colombia since 1920, to make the request again. He wanted to prepare women to work in scientific campaigns when the government could afford the setting up of dispensaries in most of the departments of the country. In Garcia’s opinion, the United States’
work in the hygiene field through the “brave nurses armies” had demonstrated to be crucial in the implementation of national campaigns and the popularization of hygienic measures among the population. The Rockefeller Foundation nurses were to be sent to Colombia to train some of the National Red Cross nurses who worked in Bogotá’s health service.

George Bevier considered nursing professionalization very important to replace the Catholic Church’s poorly-trained nurses. However, he argued that the project would be difficult because the Colombian elite undervalued nursing – a profession which they usually associated with the lower social classes. He added that the lack of a socio-economic middle class in Colombia would obstruct the professionalization of nursing because women coming from this social context were the most adequate people to work outside hospitals. The “ladies” and their families rejected that kind of work because it required to deal with people from all social classes, visit sick people’s homes, and spend time outside family’s home in paid activities. According to him, these reasons made it difficult “to get applicants of sufficient innate intelligence to make good nurses.”

Despite Bevier’s concerns, the Rockefeller Foundation sent two registered nurses to Bogotá to found the School with Colombian government funds. Mary Beard, Director of the nursing program, which was part of the IHD, chose Carolyn Tenney Ladd (27 years old) and Jane Louise Cary White (24 years old), both graduates of the School of Nursing at Yale University, and granted them a scholarship to be trained at East Harlem Nursing and Health Service, New York. The NDHPA agreed with the Minister of National Education, Jose Vicente Huertas, to pay them 2,500 pesos a year, and cover all the trip expenses. They would provide public health services and train local visiting nurses.

Jane White and Carolyn Ladd arrived in Bogota on October 1929. During their first month in Colombia, they received an introduction to the Bogotá health care institutions. Primarily, they visited the institutions in charge of the sick and children’s well-being, such as the San Juan de Dios, San Jose and La Misericordia hospitals, Center for Children’s Protection and the municipal health services. However, the nurses were not paid immediately, because Pablo
Garcia Medina had not been able to meet with Huertas to appoint them as government employees.

Although Bevier and H.H. Howard were worried about White and Ladd not being paid for their first month in Colombia, they expected that the Colombian government would do it. In fact, the Rockefeller Foundation policy was to interfere as little as possible in the political, economic and social problems of the countries in which they were present. Howard stressed that the foundation’s role was to remain on the sidelines and observe and, if possible, strengthen, stabilize and support public health organizations. Given the lack of payment, Howard proposed that the nurses be sent to one of the city’s health centers or to the new children’s health station in Bogota. In doing so, Howard said, nurses would become familiar with “local conditions and customs” and practice the Spanish language.16

For the Rockefeller Foundation, sending American nurses to different countries meant an opportunity to improve their skills and knowledge, and establish nursing schools that would become an example to follow suit. In fact, Bevier wanted White and Ladd to acquire experience by doing fieldwork and therefore become school of visiting nurses’ instructors. On January 1930, the NDHPA hired White and Ladd for eighteen months to work with children at the municipal and national dispensaries and to train the National Red Cross nurses. Thus, the two nurses could learn about the characteristics of the Colombian public health practices and adapt their knowledge and skills to the local requirements. White and Ladd worked for six months until the funds from the Colombian government were issued and the school building were adapted to the requirements of the project.17

The School of Visiting Nurses was founded on June 1930 through Decree 905. The NDHPA oversaw its operation and lesson plan. Pablo Garcia Medina decided to invest in the school the money he had acquired to start an anti-tuberculosis campaign, arguing that the campaign could not be made without well-trained nurses. According to the decree, the school’s purposes were to keep tuberculosis patients under observation, to advise patient’s families on how to avoid contagion, and to carry out prophylactic measures issued by health
authorities. However, the school prioritized maternal and childcare and it was put under the direction of Dr. Jose Maria Montoya, a specialist in children’s health.

The School of Visiting Nurses required their students to be women, be between 24 and 30 years old, hold two certificates of good conduct and have documentation of their previous studies. The school gave preference to those trained by the National Red Cross, because it showed they had already worked in clinics and dispensaries.

Jose Maria Montoya wanted to make nursing a profession for upper-class women. According to him, it was necessary to promote employment for women and integrate them in the Colombian process of modernization. He fought against social prejudices, which claimed that female professionalization led to the loss of women’s customs and values, and prevented them from fulfilling their responsibilities as mothers and wives. Montoya’s argument was also used by high-class women to demonstrate that nursing was an ideal field for professional performance. Paulina Gómez Vega argued, for example, that the school prepared women to fulfill one of the greatest feminine missions: to give relief and remedy to many pains and miseries, but with a “well-cultivated mind”.

Women and doctors praised the physical and emotional virtues of “feminine nature” to show the relationship between professional work and the gender values. In the promoters of the school’s opinion, the students could take advantage of their “maternal” abilities – which gave them the power of intervention and legitimacy – to be executors of health and welfare policies. This would differentiate them from charitable work. Consequently, doctors and authorities recognized a new active but subordinate role of women legitimized by science. At that time, women’s education in Colombia was limited to primary school. While in England or the United States it was necessary for the visiting nurses to have previous training as hospital nurses, the young women enrolled in the School of Bogotá had a minimum of instruction and dealt with the stigma of carrying out an “improper” activity for their gender.
The students received practical courses at La Misericordia Hospital and the municipal and departmental children’s clinics. Also, the instructors Ladd and White would take the students to hospitals and clinics and organize home visits to teach child hygiene to mothers. They also took theoretical classes taught by medical specialists, where they learned to identify the signs and symptoms of a disease, its treatment, personal hygiene and public health. The objective was to disseminate this knowledge beyond hospitals and clinics. The students had to take notes from professors’ lectures. Texts from foreign countries were not used because they were considered unsuitable for Colombia.

School of Visiting Nurses, First generation (1930)

In the center of the photo, the sanitary and scientific authorities appear sitting down. From left to right: Carolyn Ladd, Jorge Andrade, Roberto Franco, Pablo García Medina, Jose M. Montoya, Alejandro Villa Álvarez, Julio Aparicio and Jane White. Source: Pedraza M., Héctor, La enfermería en Colombia. Reseña histórica sobre su desarrollo. (Bogotá, Editorial Minerva Ltda., 1954), 38.

The first 42 visiting nurses graduated in 1931. They were hired by dispensaries, clinics, daycare centers and other social assistance institutions. Conforming to the Resolution 76 of 1931, nurses could be hired if they held diplomas granted
by the National School of Visiting Nurses. If there were no registered nurses, the position could be assigned to nursing students.²⁵

**The End of the School**

The course to train nurses lasted 15 months and ended on March 1931. Pablo Garcia Medina and Jose María Montoya wanted to hire one of the American nurses to open a two-year course, but they could not do so, given the lack of funding.²⁶ For the Rockefeller Foundation, the main problem was, however, that the students had poor formal levels of education. According to George Bevier, the education of students belonging to upper classes was mainly in music and languages and not in basic knowledge of primary education. The nurses trained by the National Red Cross did not have the required training either. These factors delayed the process of training: without any knowledge of arithmetic, it was very difficult, for example, to teach them to prepare solutions or formulas for babies. In his opinion, it would was better to send two or three girls from Colombia to the United States to study nursing for at least three years and who could then return to conduct the classes.²⁷

Also, there were conflicts between local and foreign women. Since some of the “most intelligent girls” had work experience in dispensaries, they complained that the Americans were the ones giving the courses that they could teach. Thus, when there was the rumor that Ladd and White’s contract could be extended, local women pushed for that money to be invested in the clinic, not in the school.²⁸

Without the conditions to continue, the Rockefeller Foundation suspended the aid to train personnel in public health in Colombia. Mary Beard found it inconvenient to repeat the “experiment” of sending nursing professionals to train women in countries like Colombia where the average education was primary school. In a similar way, Bevier argued that Colombia was a country populated mostly by ignorant people (65.7% of the population was illiterate),

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²⁶ R A C R E S E A R C H R E P O R T S

²⁷ R A C R E S E A R C H R E P O R T S

²⁸ R A C R E S E A R C H R E P O R T S
composed by poor, mestizo, black and Indian people and governed by a few powerful families.  

For this reason, in 1936 the Rockefeller Foundation rejected the request of the Colombian Government to help create a new school of visiting nurses. The foundation pointed out that the program required several years and young women with the necessary education to take advantage of the specialized education immediately. According to the foundation, it was difficult to meet these requirements in Colombia.  

The school opened a second, “more complete” course, of 18 months, without the American nurses and with the assistance of Colombian staff. The new instructors were visiting nurses trained in the first year and were under the supervision of Colombian doctors. The problem was that some of the students refused to make home visits and worked only in the dispensaries. Given the students’ disinterest in becoming visiting nurses, the school ended. However, it preceded the opening of a nursing school for “distinguished girls of the capital.” The Center for Childhood Social Action (Centro de Acción Social Infantil) was a Catholic institution. The Center was far from the model of the Rockefeller Foundation, since it reinforced the traditional role of women and carried out tasks like a charity. It was a school founded by women and focused especially on the care of poor children. When this private school was created, NDHPA concentrated its efforts on the training of sanitary inspectors.  

Although nursing focused on the care of poor children, NDHPA lost the opportunity to create a school inspired in international models to train women in public health. Nor could Bogotá become a center of attraction for women from other countries in South America, considering that there was only one school of this type in Brazil. Even so, Colombia did train visiting nurses to carry out health campaigns in the 1930s and 1940s. They provided services in sanitation, prophylaxis, public assistance, and hygienic surveillance and education in different regions of the country.  

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1 This report is a result of my research stay at Rockefeller Archive Center on September 2017, as a Research Stipend Program fellow. It is also part of my PhD dissertation on mother and child sanitary protection policy in Colombia between 1918 and 1946. I am grateful to the Rockefeller Archive Center staff for their invaluable help in searching documents, specially to Lee R. Hiltzik for his support and kindness.
The training of health professionals helped the Rockefeller Foundation to obtain political support in the countries where the fellows came from. This was possible because they assumed public positions after returning, promoting the interests of the foundation. Lina Faria, *Saúde e Política. A Fundação Rockefeller e seus parceiros em São Paulo*, Rio de Janeiro, Editorial Fiocruz, 2007, 79.

The support that Bogota received to establish the National School of Nurses at the National University of Colombia lasted from 1943 to 1948. The Americans Helen Howitt and Johanna Schwarte took charge of the functioning of the school as director and associate director respectively. At the same time, the Rockefeller Foundation supported other national schools in Sao Paulo, Brazil (1941-1945), Quito, Ecuador (1943-1949), Montevideo, Uruguay (1947-1949), Caracas, Venezuela (1942-1949), and Rosario, Argentina (1942-1944). To train health professionals, the Rockefeller Foundation awarded scholarships to women to study nursing in the United States and Canada, and in Chile for teaching and supervisory positions. “Nursing Education”, Folder 86.52, Box 7b, Series 900, RG 3, Administration, Program & Policy, FA112, Rockefeller Foundation records, Rockefeller Archive Center.


Bevier to Howard, June 2, 1928, Folder 63, Box 8, Series 1928/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.
Bevier to Howard, June 2, 1928, Folder 63, Box 8, Series 1928/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

“Recommendation for approval of fellowships”, April 13, 1929, Box 24, Series 311.I, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center; Ladd, Miss Carolyn Tenney, Box 10, RG 10.2, Fellowships, FA426, Rockefeller Foundation records, Rockefeller Archive Center; White, Jane Louise Cary, Box 10, RG 10.2, Fellowships, FA426, Rockefeller Foundation records, Rockefeller Archive Center.

Carolyn Ladd and Jane White received a three months scholarship. It included a stipend of US$120 per month, enrollment and transportation expenses in the United States. Bevier to Howard, December 13, 1928, Folder 63, Box 8, Series 1928/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center; Howard to Bevier, September 27, 1928, Folder 63, Box 8, Series 1928/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center; Russell to Bevier, April 17, 1929, Box 24, Series 311.I, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center; Mary Beard diary, March 16, 1929, Frame 527, Box 30, Reel M Bea 1, RG 12, Officers’ diaries, FA392, Rockefeller Foundation records, Rockefeller Archive Center.

Bevier to Howard, November 14, 1929, Box 24, Series 311.I, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center; Howard to Bevier, December 6, 1929, Folder 333, Box 40, Series 311, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

The school was officially opened in August 4, 1930. Bevier to Howard, July 29, 1930; Folder 333, Box 40, Series 311, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

Only until 1933 Colombian women could study high school and university in the same conditions as men. Lucy Cohen, *Colombianas en la vanguardia*, (Medellín, Editorial Universidad de Antioquia, 2001), 1-36.

Archive Center; Robledo to Paul, August 4, 1936, Folder 998, Box 133, Series 1931/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.


Lack of funding was a constant problem in the School. Jane White and Carolyn Ladd frequently suffered delays in their payments. Bevier to Howard, March 27, 1931, Folder 471, Box 57, Series 1931/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

Bevier to Howard, March 27, 1931, Folder 471, Box 57, Series 1931/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

Mary Beard, note about a letter from Dr. Molloy, March, 1931, Folder 472, Box 57, Series 313, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

Robledo to Paul, August 4, 1936, Folder 998, Box 133, Series 1931/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

This school was supported by Jose María Montoya and acknowledged by the National Academy of Medicine. The School granted diplomas until 1942 because of the difficulty of accommodating the new provisions for schools of professional nurses. Héctor Pedraza M., La enfermería en Colombia. Reseña histórica sobre su desarrollo, (Bogotá, Editorial Minerva Ltda., 1954), 37-41.

Bevier to Howard, December 31, 1932, Folder 581, Box 7, Series 1932/311: Colombia, RG 2, General Correspondence, FA308, Rockefeller Foundation records, Rockefeller Archive Center.

Mary Elizabeth Tennant diary, November 28-29, 1941, Microfilm, Box 465, RG 12, Officers' diaries, FA392, Rockefeller Foundation records, Rockefeller Archive Center.