ABSTRACT In the autumn of 1964, residents and interns of Mexico’s hospitals began a strike to demand salary increases, better working conditions, and more educational opportunities. As time passed, however, these workplace demands shifted to encompass more global issues of social justice, the right of all Mexicans to healthcare, and even peasant rights and agrarian reform. The Mexican government, concerned by the growing influence of these young doctors, made it a top priority of the intelligence service to monitor on a daily basis all Mexico City hospitals and to clandestinely follow certain physicians. Using only a sampling of these intelligence reports, the article reveals how the government of Gustavo Díaz Ordaz used the medical movement to better understand the student protests of 1968.

KEY WORDS Physicians; Public Sector; Medical Staff, Hospital; Working Conditions; Strikes, Employee; Mexico.

RESUMEN En el otoño de 1964 los residentes e internos de los hospitales de México iniciaron un paro pidiendo aumento de salarios, mejores condiciones de trabajo y la oportunidad de seguir estudiando. El movimiento duraría casi un año y al paso del tiempo las demandas dejaron de ser estrictamente por cuestiones laborales y se tornaron más universales. Los internos y residentes comenzaron a hablar sobre justicia social, el derecho a la salud de todos los mexicanos, y aun sobre el problema agrario en la nación. El gobierno, preocupado por la influencia que tenían estos profesionales, envió al servicio de inteligencia a patrullar a diario todos los hospitales de la capital y a seguir clandestinamente a ciertos médicos. Utilizando solo unos cuantos de estos reportes diarios, se muestra cómo el gobierno de Gustavo Díaz Ordaz utilizó al movimiento médico para entender al movimiento estudiantil de 1968.

PALABRAS CLAVE Médicos; Sector Público; Cuerpo Médico de Hospitales; Condiciones de Trabajo; Huelga de Empleados; México.
INTRODUCTION

The late 1960s, often associated with social upheaval, middle-class discontent and government repression, are again under recent historical scrutiny (a). While one can find global examples to fit the above descriptions it is often Mexico, in particular Mexico City, that holds the dubious distinction of bringing all of those adjectives into full scrutiny when it hosted the 1968 Olympic Games. Historians of Mexico have long argued that the massacre of students in the Tlatelolco plaza, days before the opening ceremonies of the XIX Olympiad, ruptured all appearances of social stability and progress and publicly revealed the true nature of the authoritarian and deeply repressive governing party. Furthermore, it has been common for scholars to assert that the government was taken aback by the depth of discontent and the degree of organization of the student movement (b). But it is only recently with the 2003 declassification of archives from the Mexican National Security and Investigation Center (CISEN, from the Spanish Centro de Investigación y Seguridad Nacional), equivalent to the FBI in the USA, that scholars have documented proof of how trained agents of the state instigated, orchestrated, and fanned discontent in modern Mexico and, more crucially, just how much information was available to the Mexican state.

These documents are evidence that it was in 1965 when the privileged, educated elite of Mexico, medical residents and interns, were firmly repressed by Gustavo Díaz Ordaz’s regime in "response" to the needs of Mexicans — the same language that the president would use to justify the actions against students a few years later. It was also in 1965 when the students joined the physicians’ strike in support of their demands and later took the doctors’ form of organizing and much of their strategy, making it their own in 1968. In Mexico, then, it would not be unemployed students, but young, under-employed, highly educated state professionals who would call into question the ruling party’s corrupt and anti-democratic government and who initially bore the brunt of Díaz Ordaz’s repressive regime. What these documents show is that many of the crucial protests against the Mexican state initially took place in hospitals and not universities as we have long believed. But the doctors’ movement, which was harshly leveled by the administration, has mostly been forgotten by historians. By exploring the physicians’ strike from this perspective, as the pivotal moment that turned an administration against its young citizens, and using newly declassified material, we acknowledge that the physician strike of 1964-1965 became the vital training ground for Díaz Ordaz’s regime to learn how to oppress middle class discontent.

THE MEDICAL MOVEMENT

The resident and intern’s movement began on November 26, 1964, a few days before Gustavo Díaz Ordaz was sworn in as Mexico’s new president. As with other social movements, the roots of this one can be traced to a specific complaint. A few weeks earlier a rumor had circulated that residents and interns of the 20 de Noviembre Hospital in Mexico City would not be receiving their customary Christmas bonus, or aguinaldo, that year. The setting, the 20 de Noviembre Hospital, was quite surprising for the hospital had been open a mere handful of years and, allegedly, served as a gleaming example of the success of Mexico’s public healthcare system. This hospital formed part of the public health complex — the Mexican Social Security Institute (IMSS, from the Spanish Instituto Mexicano del Seguro Social) and Institute for Social Security and Services for State Workers (ISSSTE, from the Spanish Instituto de Seguridad y Servicios Sociales de los Trabajadores del Estado) — that had, since 1943 and 1959 respectively, provided healthcare to a large share of Mexicans. The IMSS clinics and hospitals had long been touted as an example of one of the main accomplishments of Mexico’s post-revolutionary ruling party: social security. According to its publications, Mexican social security was "the result of one of our most important revolutionary traditions," and president Adolfo López Mateos himself, during whose term in office (1958-1964) the "20 de
Noviembre’ hospital was opened, maintained that "the social security regime constitutes one of the essential objectives of our democratic institutions" because within it workers could find "one of the best means to fulfill the social justice principles established by the Mexican Revolution" (4). As such the opening of a new IMSS center received much media coverage. Furthermore, the IMSS played a vital role in the training of Mexican physicians. In order to graduate, all Mexican medical students were required to spend an internship year in a teaching hospital and the majority of these were state-run. Consequently, all medical students throughout Mexico competed against each other for the few available positions in all, for example, IMSS and ISSSTE hospitals. This placed individual hospital administrations in a curiously powerful position: their hiring decisions determined which medical student applicants would graduate every year. Taking into account this imbalanced work situation, students with a position in the hospital rarely complained about their meager salaries.

However, on that day in 1964, the rumor regarding the cancellation of a Christmas bonus was confirmed by the head of the hospital who explained that, despite the customary practice, residents and interns did not deserve an aguinaldo because they received grants rather than salaries. In other words, since they did not receive a salary, they were not considered employees of the state, as they had been led to believe, and so had no right to an aguinaldo. This distinction, as interns and residents would later point out, was crucial because they worked for a state hospital; if they were not seen as state employees then they had the right to strike outside the established and official venues. The government’s response, the immediate firing of two hundred interns and residents from 20 de Noviembre Hospital, was expected. The lack of initial support from their patients, Mexican citizens, was not. Paradoxically most Mexicans did not make a distinction between established, older doctors and struggling interns and residents: they all wore white coats. But young residents and interns had much more in common with students than with Mexico’s "established" medical professionals. Many residents were months away from having graduated from university and were struggling to achieve the "promise of the Mexican revolution": find suitable housing, jobs, further education, and, in some cases, enough money to purchase required uniforms and textbooks (c). This tension in the profession was also felt in the doctors’ strike in Saskatchewan, a province of Canada, in 1962 (d). Indeed, the tension between medical practitioners has always been a characteristic of the profession. When describing the 19th century disputes among medical practitioners in the USA, historian Paul Starr emphasized the following:

Nothing weakened the medical profession more than the bitter feuds and divisions that plagued doctors through the late nineteenth century. The hatreds were sectarian: partly, they were personal. They were open and acrimonious, and as common the high tiers of the profession as in the low. (6 p.93) (e)

These historical tensions would assume, in the Mexican case, nuances of a distinctly generational character (f).

Mimicking other struggling workers, interns and residents scrambled to give legitimacy to their claims by forming an official association, the Mexican Association for Medical Residents and Interns (AMMRI, from the Spanish Asociación Mexicana de Médicos Residentes e Internos), the first national organization of its kind in Mexico. They also published their five demands in an open letter to the incoming president, which requested the following: 1) the rehiring of all fired doctors; 2) an increase in the scholarship stipend and conversion of the stipend into a renewable contract; 3) the preferential hiring of former residents; 4) a solution to the problems in each hospital, and 5) increased access to further education. Despite the fact that these demands were centered exclusively on benefits for young doctors, arguably the most politically and economically powerless, less than a week after the movement began, interns and residents felt it necessary to take out another page-wide spread in various newspapers to explain that their strike was not a political act against the incoming president (8). But what was happening in the Mexican Republic did need an
Within a few days nearly every Mexican state had interns and residents walking out of hospitals in support of their Mexico City counterparts. For at least a month there was no visible reaction from the new administration. The new President, it seemed, was blindsided by the unexpected intensity of the movement. This description of the strike is what has been mostly covered by secondary sources to explain the medical movement (9-11). With new information derived from declassified documents, the medical movement's initial weeks become more complex.

By early December, secret service reports reveal the initial presidential strategy: to distance the administration from the problem and publicly ignore the doctors. This did not mean, however, that the administration was uninterested or unaware of the problem. A December 7, 1964 report revealed, for instance, that Cisneros, secretary to the president, chastised the doctors for trying to engage the newly appointed President by indicating that "your issues do not have the presidential nor national implications that you wish to give them since the solution is simple and within the reach of the directors of each hospital’s different departmental area" (12 f.168). The explanation that doctors were trying to create a national movement when there was no reason for one would persist in the official discourse for the following ten months. If the government publicly admitted that the doctors' problem was not restricted exclusively to hospitals, but that it instead was of national reach, the crisis affecting the prized Mexican health system would be revealed.

Although the amount of declassified material on the medical movement is astounding, its quality and purpose vary significantly (g). A typical report consisted of a daily, detailed log of every Mexico City hospital (Figure 1). In summary format the agent informed the reader — presumably the administration and security forces — of the level of organization, the names of those involved, the hospital-specific complaints, any unusual activity, and any actions that interns and residents were planning to take. The latter information is quite important for it allowed the government to stay one step ahead of the medical movement. For example, when the AMMRI decided to send telegrams every 30 minutes to the president or place ads in local newspapers, within days both radio and newspapers were blocked to doctors.

More chillingly, the reports reveal that when the residents and interns decided to hire a lawyer to help them with legal issues, CISEN suggested hiring one of "their men" to act as advisor and, hence, know each legal maneuver before it became public (14).

The documents offer a rare glimpse into the daily proceedings that escalated a grievance into a major social movement. Agents recorded with bureaucratic meticulousness details that many participants involved could not or would not want to remember. For example evidence is gathered that showed (not surprisingly) that "harmonious relations did not exist" among the directors of the different hospitals. What is novel in this assertion, however, is the clue provided by one of the agents who observed that this lack of harmony was due to the complete absence of relationships between doctors from Mexico City hospitals, including doctors from the same hospital, who only met "sporadically" (15). In fact, the reports show that many state-run hospitals were like urban islands with different hierarchies, salary scales, labor benefits, and particular grievances. There were also distinct prejudices among doctors from newer, "solvent" hospitals and those laboring in poorer facilities. The daily reports collected and registered detailed accounts of facts, such as the total number of hospital beds in use, and also introduced a fiction: speculating on physicians' communist tendencies (h). The government would eventually use this information to drive a wedge between physicians from different institutions and foster a generational gap between established physicians and those finishing their degrees.

Moreover, agents’ remarks reveal that doctors encountered problems creating an organization that could span the entire city and, indeed, before the medical movement, organized groups did not exist within the same hospital. In addition, the reports demonstrate that the doctors tried to gain support even outside the hospitals. As this report from December 3 illustrates:

DIRECCIÓN FEDERAL DE SEGURIDAD.

MEMORANDUM


PROBLEMA DE LOS MÉDICOS RESIDENTES E INTERNOS.
HOSPITAL JUAREZ.

De las 11.10 a las 12.35 horas, en este nosocomio se celebró una asamblea a la que concurrieron aproximadamente 60 (sesenta) médicos, entre los que se encontraban representantes de cada hospital. En el acto de referencia, la comisión encargada de entrevistar al Sr. Presidente de la República, informó que no había sido posible llevar a cabo sus propósitos, porque estaba en una junta de Ministros, por lo que el Lic. CÉSARES tampoco los pudo atender. Ante esta situación, los asistentes asumieron una actitud exaltada, diciendo que deberían apelar a una acción más directa, ya que la pasividad no les ha reportado nada efectivo.

De inmediato, la comisión aludida, encabezada por el Dr. ARCHUNDIA, se dirigió nuevamente al Palacio Nacional y los asambleístas acordaron pedir autorización a las autoridades correspondientes, a fin de realizar mañana a las 8.00 horas una manifestación al Zócalo, portando los carteles con las leyendas siguientes:

"SOLICITUD DE AUDIENCIA CON EL SR. PRESIDENTE".

"JUSTICIA AL MÉDICO".

CENTRO HOSPITALARIO "20 DE NOVIEMBRE".

De las 14.35 a las 16.30 horas de hoy, en este nosocomio, fue recibida una comisión de los médicos ceCAD por el Dr. XAVIER DE LA RIVA, subdirector de los Servicios Médicos del I.S.S.S.T.E., integrada por: GUILLERMO CALDERÓN RODRÍGUEZ, JORGE ALBERTO LÓPEZ CURTO y NICOLÁS CHAVES SÁNCHEZ, miembros de la Asociación Mexicana de Médicos Residentes e Internos A.C. Estos elementos fueron atendidos por: Lic. ROMULO SÁNCHEZ MIRLES, director General del mismo Instituto Dr. JUSTINO RIVERA FLORES, Secretario General del Sindicato del I.S.S.S.T.E.; AGUSTÍN VIVAN CO, ARTURO RODRÍGUEZ BLANCA, ex-Jefe de Prensa y Relaciones Públicas del I.N.P.I.; Sen. Geral. y Dr. JOSÉ GONZÁLEZ VARELA; y Dr. JOSÉ A. GUTIERREZ, director de ese Centro Hospitalario, a quienes con toda amabilidad les expusieron su problema y les entregaron una copia de su pliego petitorio.

El Lic. SÁNCHEZ MIRLES, en forma mesurada pero con bastante energía, les hizo saber la conveniencia de que este problema se dejara a estudiar, y entre tanto, ellos retornaran a sus labores, ya que como profesionistas, no deberían en ningún momento...
desamparar a los enfermos de esa institución, y que el movimiento o para, como quisieran llamarle, debería de ser simbólico, mientras él se avoca al estudio de las peticiones presentadas; que -- respetaba su movimiento y trataría de resolverlo satisfactoriamente, pero mientras tanto debían atender sus obligaciones y no únicamente los casos graves o de emergencia.

Los comisionados mencionados le indicaron al funcionario de referencia, que pondrían a consideración de la Asamblea -- Permanente esta proposición, pero ésta la rechazó unánimemente.

Al estarlo tratando este punto, se presentó el Lic. SANCHEZ MIRELES, para expresarles que él trataría de solucionar su problema, pero que para ello también debían de poder algo de su parte y por lo que se refiere a los médicos de otros hospitales, deberían de dirigirse a sus respectivas dependencias. Agregó que como acababa de recibir la dirección del I.S.S.T.E. el desconocía la cuantificación económica que se necesita para solucionar este asunto socio-económico, pero él procurará resolverlo.

A las 16.00 horas se retiró el Lic. SANCHEZ MIRELES y la asamblea continuó, aprobando los asistentes, que una comisión entrevistara a este funcionamiento sus oficinas ubicadas en Plaza de la República N. 6. Al efecto, la comisión aludida quedó integrada como sigue: GUILLERMO CALDERON RODRIGUEZ, JOSE A. LOPEZ -- CIERTO, ABEL ARCHANDIA GARCIA, NICANOR CHAVEZ SANCHEZ y BLANCA MARITZEN DE HOYOS, quienes a la hora y domicilios indicados, volvieron a presentar al profesional de referencia su pliego de peticiones y le expresaron sus necesidades. A esto, contestó categoricamente el Lic. SANCHEZ MIRELES que consideraba sus demandas justas y humanas, que no creía que fueran exageradas y que se ponía de acuerdo con las autoridades relacionadas con los demás hospitales, para ver si era posible lograr una solución conjunta hoy mismo.

Los miembros de la comisión indicada se retiraron del lugar mencionado a las 19.10 horas, no sin antes decir que darán a conocer lo expresado por el Lic. SANCHEZ MIRELES a los representantes de los hospitales cuyos médicos apoyan el movimiento, en una asamblea que se celebrará en esta fecha en el Hospital General del Centro Médico, dependiente del I.M.S.S.

Durante la estancia del Lic. SANCHEZ MIRELES en el "20 de Noviembre", un individuo que dijo ser médico y llamarse ALFONSO DIAZ CONTI, se dedicó a distribuir entre los asistentes propaganda consistente en volantes, de la llamada Unión Médica del D. F., con oficinas en Insurgentes Sur No. 300, de esta capital.
De las 19.30 a las 21.45 horas, la Asociación Mexicana de Médicos Residentes e Internos, A.C., realizó una asamblea en el aula No. 1 del Hospital General del Centro Médico del I.M.S.S., con asistencia aproximada de 120 (CIENTO VEINTE) médicos residentes e internos, entre los que se encontraban representantes de los siguientes establecimientos:

Hospital “20 de Noviembre”, Hospital General del D.F.; Hospital Juárez, Hospital Colonia, Hospital de Traumatología de Balbuena, de Cardiología, Huipulco, Hospital de la Plaza, Clínica Obstetricia No. 1, Maternidad General, Hospital de la Mujer; Hospital Infantil Mexicano; Infantil de Coyoacán; -- Clínica 60 del I.M.S.S., Cruz Roja, S.C.O.P.; Peraltillo; Leñero; Hospital San Juan de Aragón; Clínica 61 del I.M.S.S.; Neurología; Ixtacolco; Ingurán; Francisco P. Miranda; Obstetricia No. 2; Nacional Homeopático; Español; Nutrición; Neurología del C.M.; Pediatría C.M.; Hospital General C.M.; Traumatología C.M.; Traumatología de La Villa; Leñero, Hospital Morelia, de Morelia, Mich.; Clínicas particulares del D.F.; Tacubaya, Espinosa de los Reyes y de Xoco.

En primer término, se informó el resultado de la entrevista que una comisión de médicos tuvo con el Lic. JOAQUIN CERNA-ROS MOLINA, Secretario Privado del Sr. Presidente de la República, quien surgió a dichos facultativos que su problema lo canalizaron a las dependencias correspondientes a cada institución.

Después de informar que el permiso solicitado para realizar una manifestación muda el día de mañana a las 9.00 horas, les fue negado.

En seguida, hicieron uso de la palabra varios representantes médicos, llegándose al acuerdo de celebrar mañana a las 9.00 horas, una concentración masiva en la Plaza de la Constitución, para la cual se reunirán a las 7.30 horas en el Hospital “20 de Noviembre”, para de ahí trasladarse al zócalo.

Para finalizar, se acordó que cada delegación porte un cartelón con el nombre del Hospital a que pertenecen, así como otros con la leyenda: “ESCuchen se Sr. PRESIDENTE”.

Se hace notar que los médicos del I.M.S.S., han tratado de dividir a la A.M.M.S.I.A.C., para evitar problemas al Gobierno, habiéndose escuchado a un representante del “20 de Noviembre”, quien dijo que el Lic. ROMULO SANCHEZ MIRELES, Director de dicho Instituto, está solucionando los problemas que afectan a los elementos que laboran en el propio I.M.S.S."

Respetuosamente,

EL SUBDIRECTOR FEDERAL DE SEGURIDAD
EN FUNCIÓNES DE DIRECTOR
CAP. FERNANDO GUTIERREZ BANJOS.

FCB/FLV.

Source: National General Archives, National Security Archives (13).
The interns and residents are trying to gain the support of medical students from the Universidad Autonoma de México and for that reason many of them are making an effort to convince the students to lend their support; it is known that the principle reason for not doing so is that students are in their final exam period and it would mean, for the moment, neglecting their studies. (17)

The agents’ reports warn that if this organization were allowed to prosper, Mexico City and the nation could be brought to a halt. These notes reveal that despite its clumsiness, the Mexican intelligence service perfectly understood the symbolic power of striking doctors. The doctors themselves would only take advantage of this fact some months later, marching in public protest dressed in their white lab coats. Equally important are the transcripts found among some of the reports, as they are clear evidence that some meetings were recorded, phones were tapped, and homes were bugged. It is indeed unusual for historians to have the actual words from phone conversations or private meetings where strategies were planned and future actions were deliberated. A historian can use these reports to explore how a personal grievance mutates into a global complaint and how this, in turn, transforms a movement. A researcher of the past can also observe they way in which a single idea or suggestion can acquire a very different value when considered in a meeting or, in the case of these doctors, taken to the streets of Mexico City.

It is also interesting to note how clearly leaders began to emerge from the initial mass of doctors and how the secret service opted "to deal" with each one (i). Trained secret agents began to note which doctors spoke eloquently, which silenced a room with their presence, or which seemed to exert control over the rest. This latter point is very significant and many agents make reference to it. In what little has been written on the medical strike, two or three doctors are often pointed to as having distinguished themselves as leaders (j). Nevertheless, what can be seen from these reports is that the young doctors were completely removed from those who previous academics considered to be their natural leaders. In other words, the secret service reports present evidence that challenges our prior understanding of the alliances among the doctors. While other archival sources, such as pamphlets, reveal the rifts between them, it is these sterile reports of meetings that record a personal slight, an applause cut short, or discussion among those at the head table that have not made it into official histories.

Recovering the daily activities realized and the "words" pronounced by individuals obviously has great appeal for historians; however, extreme caution is needed when using these sources. To openly rely on the intelligence service’s reports poses obvious problems. First of all, it is imperative to take into account the writer’s partiality. The agents were paid to identify potential discontent and they often exaggerated examples of problems to make their assertions more credible. In addition, and not surprisingly, the individual level of experience and education of each agent determined the kind of report they wrote. While some agents had an inquisitive nature, a keen eye for detail, and wrote about their findings in a clear and persuasive tone, others wrote in an almost incomprehensible prose with double meanings and a clear disdain for their privileged charges. Others transcribed flyers that have been lost or destroyed; although written with clumsy grammar, the words survive in the reports of these secret agents, as in the following fragment:

...now the doctors confront the capitalist exploitation of the Mexican bourgeoisie headed by Díaz Ordaz because it does not want to fairly resolve the medical conflict once and for all. By crushing the truck drivers’ protests, giving shrapnel to the peasants instead of land and freedom and, in a word, by defending its own interests, and by prolonging hunger, unhealthiness, and the slow death of our people, the government reveals itself to be the principal enemy of the people this government invests millions of pesos in public buildings and refuses to give the doctors a fair salary rise. The unity in the unyielding struggle of all those exploited will put an end to the exploitation of man by man. (18)
The ideas may not be clear, but what is interesting is how the doctors appear in the struggle alongside the peasants, truck drivers and workers.

Another problem is that the reports underwent a series of revisions before being sent to the President. Evidence was found of previous drafts of documents, in which words had been crossed out and substituted before the edited final version was sent to the government. It is not clear whether the author of the first report is also the editor of the subsequent versions, but what is evident is that, in some cases, the tone was changed or details were eliminated. This editing process becomes especially problematic in reports used to demonstrate that communist-oriented forces had infiltrated the movement and were trying to destabilize Mexico from within.

Lastly, and perhaps most importantly, despite the inaccuracy of secret service reports, they provide a unique perspective on the lives of the doctors; this is no minor detail. Most of the recorded history on the doctors, their work and their actions in Latin America and in the rest of the world come from their autobiographies or from the detailed reports of hospitals or patients.

Ironically, these declassified reports reveal that many of the government strategies and powerful images used against the doctors came from the doctors themselves. For example, on December 7, 1964, an anonymous doctor expressed his reservations about joining the movement because, by not treating patients, he did not want to be part of the “mass murder” of the Mexican people (12). Months later, on September 1, 1965, in his first Government Report to the nation, President Gustavo Díaz Ordaz severely reprimanded the doctors on strike, labeled the medical movement as criminal, and even classified the strike as “an act of homicide” (19) because the doctors had failed the Mexican people by breaking their sacred oath to protect life. In the cheers that exploded after Díaz Ordaz vowed to put an end to the movement it was forgotten that the conditions that had propelled young doctors to strike continued unchanged in most Mexican hospitals.

END NOTES


b. There is a significant amount of material about 1968 in Mexico; I only cite here works by Sergio Zermeño (1), Rubén Aréchiga Robles (2), Elaine Carrey and Lyman L. Johnson (3).

c. Comments of Miguel Cruz, from a personal interview carried out in Mexico City on June 29, 2009 by the author of this article.

d. The protest of the Canadian doctors is connected to the implementation of universal health insurance, whereby the economic benefits that they had enjoyed until that time would end up under the State’s control. Please see the book by Robin Wolfe and Samuel Badgley (5).

e. In the original document in Spanish, this quote was translated by the author. In this version, the original source in English is quoted.
f. For more detailed information on the "civil war" within the American medical profession, please see Paul Starr (6). For a more complete perspective on the hierarchy within the profession and its tensions, please see chapter 3: "The medical division of labor," by Elliot Friedson (7).

g. It is difficult to calculate the exact amount of material on file because the files on individuals are not public.

h. For instance, a list was drawn up with the names and domiciles of "communist doctors who have participated in the medical movement," though it is not clear what measures were taken to determine their political orientation (16).

i. A common practice for gifted orators was to offer them an unexpected fellowship to a prestigious American or European university.

j. Please see especially Democracia en blanco (11), in which two hospital medical directors are pointed to as leaders of the movement.

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