

# The University of the Philippines Institute of Hygiene and the Rise of a Filipino Sanitarian Regime: Some Provisional Notes

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The University of the Philippines (UP) Institute of Hygiene contributed greatly to the country's biopolitical landscape in the 1950s. At the helm of the public health system was a corps of Filipino sanitarians who advocated state-directed health programs as important recipes for the country's postcolonial development and modernization. Affiliated with the Institute of Hygiene in one way or another, this new class of public health officials combined ideas of health citizenship with their own nationalist moorings, but was nonetheless highly receptive to new health technologies coming out of the U.S.'s participation in the Second World War. In 1950, a Rockefeller Foundation (RF) commissioned study assessed the post-WWII Philippines as having a "more favorable standing" compared to Indonesia, Korea, Taiwan, and the People's Republic of China, because of the large number of Filipino doctors in active practice, a large percentage of which was employed by the government.<sup>1</sup> Filipino sanitarians, therefore, was a phenomenon by itself that calls for a serious historical examination. My research report is an initial effort at writing a history of Filipino sanitarianism. I do this by looking into the UP Institute of Hygiene's early pre-WWII history, as well as the Rockefeller Foundation's role in its establishment and institutional life. Using data sources gathered from a research trip at the Rockefeller Archive Center (RAC) in March 2018, I offer some provisional views on the Institute's influence to this corps of Filipino sanitarians, as well as the Institute's location in the history of colonial and postcolonial biopower in the Philippines.

The UP Institute of Hygiene's official story is a straightforward progress-oriented narrative involving visionaries and their statesmen allies who both took concrete steps to respond to the public health needs of a nascent nation-state.<sup>2</sup> The Institute's proverbial founder is the celebrated "father of the modern public health movement" in the Philippines, Hilario Lara.<sup>3</sup> Previously serving as the District Health Officer of the province of La Union, Lara went to Johns Hopkins School of Hygiene and Public Health, where he earned his Doctor of Public Health degree in 1924. Both his public health experience and his Hopkins education spurred him to envision a similar school in the Philippines. Upon his return to the Philippines, the UP Board of Regents sought his advice on improving the instruction of preventive medicine at the UP College of Medicine. Lara received an appointment as Associate Professor and subsequently chaired the UP College of Medicine's Department of Hygiene and Preventive Medicine. His enthusiasm and vision for a public health school soon found some sympathetic allies among UP school officials, chief among them was Fernando Calderon, the Dean of the College of Medicine and the Director of the Philippine General Hospital. In 1926, Calderon advocated for setting up an autonomous public health school during the Health

Officers' First General Assembly in Baguio City, where it was warmly accepted. This spurred a resolution submitted to Senate President Manuel L. Quezon and House Speaker Sergio Osmeña, who both endorsed Calderon's proposal in both houses. The American Governor-General also supported the project. With all the important government figures on board, the UP Board of Regents appointed a committee tasked to draw up plans for the school's organization and curriculum, which it submitted to the Philippine National Assembly in September 1926. In November of the same year, the National Assembly included a budgetary item of P20,000 in its annual appropriation, placed under the Bureau of Health's budget, and designated specifically for the school. In June 1927, the school formally opened.<sup>4</sup> Initially named as the UP School of Sanitation and Public Health, it shared a building with the UP College of Medicine but was nonetheless an autonomous university unit. Admitted exclusively were medical graduates or licensed practicing doctors, who were awarded a Certificate of Public Health (CPH) after completing a year of specialized courses.

Taking a longer view, the Institute's origin story locates itself in the early history of U.S. colonial biopower in the Philippines. Alongside its efforts to form a public health regime in its newly acquired tropical colony, the American colonial officials of the Philippine Commission opened in 1907 the UP College of Medicine. The following year, the Philippine General Hospital (PGH) opened as the College's affiliate hospital, showcasing up-to-date facilities able to offer treatment to a wide range of tropical ailments. Both institutions were celebrated as beaming sentinels of U.S. scientific expertise in the Islands, but more importantly they served as sites of biopolitical power where overzealous American physicians experimented on perilous drug therapeutics, and tried out regimes of hygienic discipline that were eventually implemented in other parts of the Philippine Islands.<sup>5</sup>

A similar institution that predated the Institute of Hygiene was the Graduate School of Sanitation and Tropical Medicine, emerging sometime between 1913 and 1914 as an affiliated postgraduate unit at the UP College of Medicine. The Graduate School offered two postgraduate degrees: Doctor of Tropical Medicine (DTM) and Doctor of Public Health (DPH) degrees.<sup>6</sup> By 1920, it had become inactive, existing only on paper but no longer offering graduate courses. Reasons for the Graduate School's inactivity varied from dwindling government support, strained relationship with the Bureau of Science, and the exodus of American professors. Around this time, a systematic effort had commenced to replace American colonial bureaucrats with Filipino appointees. Dubbed as "Filipinization," this campaign started upon the appointment of Woodrow Wilson's choice, Francis Burton

Harrison, as the Islands' governor general in 1914. In a way, the Graduate School was a casualty of Filipinization.

There were initiatives to reactivate the Graduate School. Filipino professors at the UP College of Medicine, however, were not keen in giving their support. While they were amenable to offering tropical medicine as undergraduate courses, they were opposed to offering it on the graduate level as they found it "unnecessary and redundant."<sup>7</sup> The aversion to offering tropical medicine on the graduate level was further compounded by an "active and bitter" opposition from the younger faction of the Filipino faculty, who fought the revival of the Graduate School on grounds that they no longer wanted to reinstate the old American professors who left, or to welcome any new American appointments in their ranks.<sup>8</sup>

American stakeholders in early colonial statecraft denounced the administration of Governor General Harrison for destroying the gains made in the Islands. For one, American sanitarians who previously served in the Philippine Bureau of Health blamed Filipinization for severely damaging public health due to the takeover of inept and untrained Filipinos, whom they considered to be the chief reason behind the high death rates incurred during the influenza pandemic of 1918–1919.<sup>9</sup> Filipino sanitarians, however, welcomed Filipinization as an opportunity to showcase their capacity to lead. A good contrast to American disdain is provided in Vicente De Jesus's review of sanitary activities between 1909 and 1921.<sup>10</sup> Having taken over the Philippine Health Service after the resignation of the American health director in 1915, De Jesus was not defensive about the high mortality rates. He instead chose to go over the milestones attained under the new Filipinized health service, emphasizing its success in organizing sanitary divisions all over the Islands. Whereas merely 54 divisions were organized previously under American leadership, the number of divisions increased to 307 when Filipinos took over, covering 839 municipalities of all provinces, 46 of which were located in the previously *terra incognita* Mindanao and Sulu. Far from deteriorating, public health actually improved with Filipinos at the helm. For De Jesus, more sanitary divisions meant that there were better ways of investigating outbreaks, and logically, higher mortality rates recorded.

The increase in the number of sanitary divisions also added urgency to a new public health school. Having ignored calls to revive the Graduate School (which they viewed as an American legacy), Filipinos had set their sights elsewhere. The Johns Hopkins School of Sanitation and Public Health was a fixture to Filipino visions of putting up a new public

health school. Hopkins promoted a specialized discipline allied to medicine that combined laboratory research and hygiene science, thus easily becoming a model that Filipino sanitarians wished to emulate.<sup>11</sup> As early as 1921, RF had received inquiries if it was interested in giving financial support to a Hopkins-styled school in the Philippines.<sup>12</sup> Around this time, Hopkins had become the Mecca for physician-bureaucrats around the world. Some of those who pursued doctorate studies in public health at Hopkins were Filipino sanitarians, including Hilario Lara.

Meanwhile, the RF had been making strides in establishing a presence in the Philippines. This effort was supported by the appointment of the Philippines' former health director, and a casualty of the Filipinization campaign himself, Victor Heiser, as the director for Far East operations of the RF's International Health Division (IHD). Unlike Filipinos who had ignored calls to revive the Graduate School, RF officers like Heiser viewed the efforts that led to the formation of a public health school as actually contributing to the revival of the Graduate School.<sup>13</sup> To them, the Graduate School did not just become inactive due to shifting government priorities, but it had fallen victim to what they saw as "pernicious politics" that had beleaguered the Philippines due to Filipinization. Inflected in this strong attitude against "politics" was a racist assumption that Filipinos were inferior administrators, both in statecraft and medical education. Heiser was famous for his contemptuous attitude toward Filipino officials, whom he viewed as always failing to meet his standards. For him and other RF officers active in the Philippines, the only way to reverse Filipinization's damage was to bring everything back under American control.

An opportune time arose when the post-Wilson Republican government set out to reverse Harrison's policies in 1921. Heiser received approval from the American governor-general of his plan to send "well qualified men" to bring back Philippine health conditions to satisfactory level. Recruited thereafter was University of Texas Medical School Dean and Professor of Physiology William S. Carter. The RF's original plan was to install Carter as dean of the UP College of Medicine and replace Calderon. Heiser, however, advised Carter to be installed as Calderon's associate dean instead. It was "the best way to achieve results," wrote Heiser, since Calderon "has his faculty very well in hand and is in position to put through any program that may seem desirable." The tension was already palpable, and it was unwise to create more problems.<sup>14</sup>

Carter served as UP College of Medicine's associate dean between 1922 and 1924. In the context of Filipinos' clamor for outside support for their plans to build a public health school, Heiser's proposal was welcomed by UP officials: "There is a fine spirit and desire among Filipinos to cooperate in every possible way and I doubt whether there has ever been a more propitious time," he wrote.<sup>15</sup> During this period, the College made significant changes to its curriculum by increasing the clinical medicine units and streamlining laboratory medicine units, such that a majority of the students was able to finish with laboratory courses during the first and second years. Steps were also taken to improve the College's budget process by requiring each department head to submit budget proposals. At the PGH, duties of residents, interns, and clinical clerks were streamlined.<sup>16</sup>

While in public, Carter was celebrated for his success in cooperating with Filipino UP officials, in private, Carter was actually unimpressed and harbored contempt toward them.<sup>17</sup> Writing in 1927, Carter took note of the high casualty rates at UP College of Medicine, whereby two-thirds of the pre-medicine students were dropping out the first year, and one-third to a half of medical students were failing during the first and second semesters.<sup>18</sup> He believed that UP was admitting a tremendous number of "weak students" despite requiring two years of college before admission. Carter also made a scathing remark about the medical school at the Dominican-run University of Santo Tomas. He described it as having failed to adapt to the changes of modern times, with an archaic building of 300 years old, an ancient library collection, and no modern laboratories. Calling the UST's medical facilities as "relics of medievalism," Carter accused the school of welcoming UP drop-outs, and thus having lax admission requirements and generally low standard of instruction. He claimed to have attempted to improve things. His major initiative was to do groundwork for insular government-level legislation that aimed to prevent nepotism in the Board of Medical Examiners, but the bill was opposed by various sections of the Filipino medical profession, the strongest coming from UST alumni.<sup>19</sup> Carter wrote that he just accepted Filipino medical educators to be inherently using "characteristically Oriental methods" as they lacked receptiveness to efforts to improve their ranks.<sup>20</sup>

Equally disparaging were Carter's opinions about Filipino politicians. While Carter was enthused by the 1927 Republican appointment as the Islands' governor-general, he warned that Filipino "political bosses" Quezon and Osmeña would oppose his appointment since they would "resent any interference with their political machine" and that they "naturally like to have a spoilsman politician of the Harrison type, or a spineless jellyfish whom they

could manipulate as a mere figure-head." Six years after Harrison left, Filipino politicians were still deemed nuisances. Carter did not mince words in expressing his contempt for Philippine independence:

It has been well said that the American occupation of the Philippines may be divided into three periods: (1) the period of construction up to 1913; (2) the period of destruction by Harrison from 1913 to 1920; and (3) the period of reconstruction . . . (which) brought order out of chaos and salvaged as much as possible from the wreckage left by Filipino politicians who demonstrated how unfit they are for self-government during Harrison's administration.

. . . the Filipinos will soon learn the futility of wasting their money on independence propaganda, although they will probably continue to be misled by their political leaders. There was no outward comment by the Filipinos to the effect that they need not expect independence at an early date, but the American newspapers in Manila made it clear that Quezon and Osmeña had gone to Washington without an invitation and that the President had not been influenced in any way by them in making such a good appointments.<sup>21</sup>

Carter soon joined the RF and rose as one of the top officers at the RF's Division of Medical Education (DME), the foundation's unit in charge of fellowship grants and school endowments. Carter's unflattering views toward Filipino (in)capacity for statecraft stalled the awarding of any kind of endowment for a public health school. Filipino officials were also acutely aware that the RF had been very active elsewhere in Asia, particularly the medical schools in Bangkok and Peking where the RF had made large financial commitments, whereas the foundation still refused to give a grant to UP.<sup>22</sup> Carter actively rejected Filipino requests, with the behest of U.S. colonial officials. In a 1925 visit, Carter received a request to fund a new building wing at the UP College of Medicine, which he rejected "because of continued political problem and the deterioration of the school under the present policy of Filipinization" (UP officials would eventually secure an appropriation from the National Assembly). In a 1926 meeting with the Governor-General's Adviser A. Parker Hitchens and Vice Governor Eugene A. Gilmore, the three agreed that "it would be inadvisable to request the Foundation to grant funds to be handled by the Filipinos because they would probably be dissipated in creating as many positions as possible."<sup>23</sup> Notwithstanding a shared belief that a public health school was sorely needed in the Islands, Carter and the colonial officials deemed that the sorry state of political affairs would only waste RF financial assistance. Even as late as December 1927, half a year since the formal

opening of the Institute of Hygiene, the RF had not openly made any commitment, and Carter was actually "very careful not to give encouragement in that direction or in fact of any assistance from RF."<sup>24</sup>

Among the U.S. colonial officials whom he closely worked with in the Philippines, Carter was most fond of Wisconsin lawyer and educator Eugene A. Gilmore. Carter credited Gilmore as having successfully revived the Graduate School in the form of the Institute (although impressed by Lara's work ethic, Carter wrote as if Gilmore founded the Institute, not Lara.) Gilmore prodded the National Assembly to pass a law providing for the Institute's initial funding, and took steps to incentivize medical graduates to enroll at the Institute. Gilmore spurred legislators to pass a law that exempted from civil service examination those who had completed a Certificate of Public Health (CPH) at the Institute of Hygiene. This exemption was a "tremendous fillip" to the Institute. With the prospect of receiving a commissioned officer position upon finishing a one-year certificate program, the insular government enticed medical graduates to choose public health work instead of private clinical practice, a preferred career route for medical graduates after obtaining their licentiate.

Despite his contributions to the Institute, Gilmore was on the same page with Carter regarding domestic politics, sharing Carter's disdain toward Filipino legislators and using his executive prerogatives to clip their political powers, especially in matters of higher education. As Vice Governor, Gilmore was also the ex-officio Secretary of Public Instruction, and the chair of the UP Board of Regents. He took steps to trim down the board by removing political appointees placed by Filipino politicians (but, at one point, retained his own appointee whose higher education qualifications were questionable). This move, according to Carter, saved UP from demoralization. In 1924, Gilmore attempted to make some administrative changes to UP, an effort "to bring about a complete reorganization of the university so as to take it out of politics as far as that is possible in the Philippines."<sup>25</sup> But Gilmore's efforts were defeated by Filipino politicians. Taking back political control from sinister Filipino politicians was an unfinished task. Carter wrote, "the greatest need of the University of the Philippines is to get it out of politics."<sup>26</sup>

By 1927, three years since leaving the UP College of Medicine, Carter had traveled to Manila on a few occasions and remained in touch with UP officials and Filipino RF fellows. He soon learned that UP had found itself in the red. Despite previous efforts to improve its budgeting process, and despite being granted by the National Assembly free rein in using school fees,



the university was anticipating financial woes, so much so that American members of the Board of Regents were proposing to downsize teaching and non-teaching staff, as well as prevent any effort to increase student admission (a proposal that some Filipino faculty opposed.) UP badly needed some outside support to fund its expansion. This was especially true for the Institute of Hygiene, which just started construction of its new school building. With political conditions looking better since Gilmore's appointment, UP's financial woes created an opening: "This is a peculiar opportunity for the RF to be of real service by making a grant which could be used for equipment, supplies, books, or journals, without the restrictions which are now put on the different items of the regular University appropriation... such an appropriation could not be dissipated by the creation of new positions or used for the payment of salaries or stipends." Carter proposed to the RF Board of Trustees to grant the Institute of Hygiene two separate endowments of P10,000 for equipment and books and P200,000 for the school building being completed. Attached to this award, however, were two conditions.

The first condition was that UP officials must work on consolidating the biological division of the Bureau of Science with the Institute of Hygiene, and the Alabang Laboratory, and place all three under the administrative responsibility of the UP Board of Regents. Consequently, the sale of sera and vaccines would be used as a revolving fund for the maintenance of the laboratories. Notwithstanding the bureaucratic complications of transferring government units under the university, Filipinos seemed to be amenable to this. Although it took almost a decade to come into fruition, the laboratories were finally transferred to UP in 1936, and stayed on as university units until the eve of the Pacific War.<sup>27</sup>

The second condition was more in line with Heiser's previous plan to increase American control over UP. The RF would send American professors to join the Institute's administrative and faculty staff as its "stabilizing and guiding influence." Realizing that this was a contentious matter, Carter wrote, "I am sure the Filippinos (sic) are so eager for financial assistance that they would be glad to accept a gift from the RF under such conditions without contending that the RF is attempting to control the institution or to dominate it by imposing conditions."<sup>28</sup>

Thus, in the period of 1929-1931, the Institute hosted four visiting professors "loaned" by the RF. With a higher salary grade provided by the RF (but still partly shouldered by UP) and the best accommodations around Manila, these American professors taught courses on

parasitology, protozoology, and sanitary bacteriology and immunology. More importantly, they enforced RF-set standards on the school. They regularly provided news to Carter and Heiser about the Institute. In their letters, they reported controversies and internal politics, passed judgment on UP officials with whom they worked, and scouted for potential RF fellows. When their Filipino colleagues proposed to expand the Institute beyond what the RF thought they were capable of doing, these American professors kept their ambitions in check. For instance, under orders from Carter, they convinced Hilario Lara to abandon plans of offering a Doctor of Public Health degree program. Carter advised William B. Wherry, a visiting professor in 1929 (and a previous scientist at the Bureau of Science) “There is a great tendency for the Filipinos in charge of the (Institute) to try to imitate the School of Hygiene and Public Health of Johns Hopkins... Perhaps that is the result of Lara’s *idealism and ambition*, but I am strongly of the opinion that it is best for them to do one thing well before they attempt to do too much” (emphasis mine).<sup>29</sup> Plans for a doctorate program were scrapped thereafter.

What Carter failed to recognize was that plans to expand the Institute were animated, not by misplaced idealism and ambition, but by an incipient view of Filipino health citizenship, whereby public health and medical practice should serve a national community. During this period, this view revealed itself in Filipino professors' opposition to plans to downsize the UP College of Medicine. In a study on past UP's student enrollment, co-authored with Arturo Garcia, Lara argued that the UP College of Medicine should be exempted from the BOR's moratorium on increase in admissions. The two authors bemoaned that the current doctor to population ratio in the Philippines was way below the rate noted in any "so-called civilized countries" of the world:

It is very sad to confess that with the disadvantage of our topographical situation in the tropics, so favorable to many human ailments, the actual number of practicing physicians in the country is so woefully small in proportion to our population, that for the next 50 years our two colleges of medicine (UP and UST), should still work to their utmost capacity before we can hope to come up to the normal ratio of physicians to population which is commonly seen in civilized countries and considered to be sufficient to safeguard public health and administer preventive medicine. The pandemic of influenza of 1918 and 1919 with its disastrous effect upon our people has vividly illustrated the lack of physicians in the Philippines.<sup>30</sup>

A problem they noted was that very few of the practicing physicians in the country had received any public health training, what they described as the "modern science of preventive medicine," or "the care of the general health of the community as a whole."<sup>31</sup> To them, such disadvantage would present itself if another outbreak of a dangerous epidemic—similar to the influenza outbreak in 1918-1919—occurred again in any of the Philippine provinces at once. Garcia and Lara saw that medical instruction played a very important role in nation-building. For them, the UP College of Medicine and the UP Institute of Hygiene's role was to train not only doctors who would take care of the patient-consumer who came to the clinic and paid for a medical remedy, but to produce a corps of sanitarians who would keep the whole community of patient-citizens safe from dangerous epidemic outbreaks.

The Institute might have postponed its plans to offer a doctorate program on advice by Carter, but its expansion continued nonetheless. In 1930, it offered a Master's degree thesis option to those able to complete the certificate program with at least an average grade of 2.0.<sup>32</sup> By the time the RF-loaned professors ended their term in 1931, the Institute had been organized into four departments that were headed by all Filipino professors who previously studied in the U.S. under RF Division of Medical Education (DME) fellowships.

From 1931 onward, RF officers visited the Institute on a few occasions, still expressing dissatisfaction.<sup>33</sup> But it would be a disservice to think that all RF-affiliated professors who visited the Institute held a scathing colonial disdain toward Filipinos. Generational variation might have been a factor. Whereas the older generation of American professors like Carter showed a predilection for adopting the colonial-subject position in commenting on Philippine affairs, the younger American professors came to the Institute perhaps on a more egalitarian footing, carrying with them their pleasant memories of being colleagues or classmates with Filipino sanitarians during their graduate studies. For instance, Hopkins malariologist Justin Andrews, who came to the Philippines as an RF-loaned professor in 1930, wrote reports with a tone far different from Carter's. Upon arriving in Manila, he wrote, "I do not find the students (here) much different—except for training and background from similar groups in the United States which I have had experience. They are... highly susceptible to suggestion."<sup>34</sup> Andrews saw his stay very rewarding, with Hilario Lara petitioning to the RF that he should be extended for another year (albeit to no avail, as Andrews was commissioned by the RF to work in Venezuela upon leaving Manila). Elsewhere, Andrews made a pained realization about his relationship with his previous Thai

students at Hopkins whom he met in Bangkok during the Far Eastern Association of Tropical Medicine conference in 1930. He wrote,

I saw seven Siamese doctors whom I had taught at Hopkins. The experience was a most enlightening one for me. I think at Hopkins, and I presume it is true in other places, that we do not treat many of our foreign students with the seriousness and consideration that their positions warrant. In the United States they appear at an extreme disadvantage as regards language and understanding our teaching methods and our customs. I may be admitting a horrible fault that is peculiar to me, but I know that many times I have been impatient and overbearing with these men. But when one sees them surrounded by the dignity of their own positions at home and sees the things they have accomplished and the esteem in which they are held by their associates and the people at large, it becomes a privilege more than a tedious part of one's work to have had some hand in teaching them.<sup>35</sup>

Thus, as much as these relationships started on a deep racial mistrust, they also paved the way for more collegial relations—one that Filipinos welcomed as a cultural currency, rather than as colonial baggage. These relations served Filipino sanitarians well after the war, turning them into valuable social capital that helped in expanding their international professional networks.<sup>36</sup> Meanwhile, institutional relationship with the RF also proved to be very valuable in the subsequent years. In April 1945, barely two months after Manila was turned into rubble during the fighting between the Japanese and the American-led liberation forces, Hilario Lara wrote to RF President Wilbur A. Sawyer and asked the RF for help in rehabilitating the Institute.<sup>37</sup> The RF heeded Lara's call and sent financial subsidy for rehabilitating the school building, restarting the library collection, and granting fellowships to its new batch of public health professors to study in the U.S. Meanwhile, Johns Hopkins University also sent a new batch of public health professors to help augment faculty teaching.<sup>38</sup> Somehow Lara's vision for the school all paid off, as the Philippines in 1949 stood out among Asian countries as having the most robust pool of active physicians in the country.<sup>39</sup> The UP Institute of Hygiene paved the way to what one Filipino health bureaucrat described as the Philippines's "Golden Era of Public Health."<sup>40</sup>

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## References

- <sup>1</sup> In 1949-50, there were 4,800 Filipino doctors in active practice, 37% of whom were employed by the government; 5,000 registered nurses where 1/5 of whom were in public health; 1,800 licensed midwives; 1,600 sanitary inspectors; and hospital beds at around 12,000 or 0.75 per thousand population, thus making the country favorable for a promising demographic transformation. Source: Marshall C. Balfour, Roger F. Evans, Frank W. Notestein, Irene B. Taeuber, *Public Health and Demography in the Far East: Report of a Survey Trip September 13-December 13, 1948*, (New York: The Rockefeller Foundation, 1950).
- <sup>2</sup> University of the Philippines School of Sanitation and Public Health, Catalogue and Announcement for 1927-1928, Rockefeller Archive Center (hereafter, RAC), RG 1.1, Series 242, Box 1, Folder 13.
- <sup>3</sup> "Did You Know: 124th Birth Anniversary of Dr. Hilario Lara," *Philippine Daily Inquirer Online* 15 Jan. 2018, accessed at <http://newsinfo.inquirer.net/960202/did-you-know-124th-birth-anniversary-of-dr-hilario-lara>, 14 May 2018.
- <sup>4</sup> University of the Philippines School of Sanitation and Public Health, Catalogue and Announcement for 1927-1928, p. 21.
- <sup>5</sup> Warwick Anderson, "Modern Sentinel and Colonial Microcosm: Science, Discipline, and Distress at the Philippine General Hospital," *Philippine Studies* 57, 2 (2009).
- <sup>6</sup> Howard W. Wade, "Medical Education in the Philippines: Data on the Graduate School of Tropical Medicine and Public Health Collected by H. W. Wade, 1919-1921," [1921?], RAC, RG 1.1, Series 242, Box 4, Folder 45.
- <sup>7</sup> Howard W. Wade, "Memorandum on the Present Status of the Graduate School of Tropical Medicine and Public Health, with Recommendations for its Resuscitation," [1921?], RAC, RG 1.1, Series 242, Box 4, Folder 45.
- <sup>8</sup> *ibid.*, p. 2. Interestingly, those who mounted the strongest opposition were the young Filipino physician-bureaucrats who earned their medical and postgraduate degrees in the U.S. These were Antonio G. Sison, 38, who earned his MD and postgrad degree from Pennsylvania in 1908 and 1918; Daniel De La Paz, 34, who earned a postgraduate degree from Harvard in 1911; Potenciano Guazon, 39, who earned his MD in Rush Medical Chicago in 1908 and a postgraduate degree from Johns Hopkins in 1920; and Arturo Garcia, 34, who earned his MD from Colorado in 1908, and postgraduate units from Tulane, Louisiana, and Minnesota in 1916-1917. Source: "Appendix A, Faculty List", RAC, RG 1.1, Series 242, Box 4, Folder 45.
- <sup>9</sup> See, e.g., Francis A. Gealogo, "The Philippines in the World of the Influenza Pandemic of 1918-1919," *Philippine Studies* Vol. 57, No. 2, (Jun. 2009), pp. 261-92.
- <sup>10</sup> Vicente De Jesus, Memorandum on Sanitary Activities in the Philippine Islands, 1909-1921 [1921?], RAC, RG 5, Series 2, Subseries 242, Box 20, Folder 128.
- <sup>11</sup> For a history of the "Hopkins model," see Elizabeth Fee, *Disease and Discovery: A History of the Johns Hopkins School of Hygiene and Public Health, 1916-1939* (Baltimore: Johns Hopkins University Press, 2016) and Karen Kruse Thomas, *Health and Humanity: The Story of the Johns Hopkins Bloomberg School of Public Health* (Baltimore: Johns Hopkins University Press, 2016).
- <sup>12</sup> See, e.g., Fernando Calderon, Letter to George E. Vincent, 31 Aug. 1921, RAC, RG 5, Series 1.2, Subseries 242, Box 109, Folder 1498. William S. Carter also wrote in 1927 that he received inquiries from various Filipino officials, but did not commit to any of them.
- <sup>13</sup> RAC records reveal RF officers insisted in referring to the Institute of Hygiene as the "Graduate School of Sanitation and Tropical Medicine" or the "Graduate School of Sanitation and Public Health," whereas the Institute's official name upon its inception in 1927 was "UP School of Sanitation and Public Health." In 1936, it became "UP Institute of Hygiene," mirroring Johns Hopkins' name changes.
- <sup>14</sup> Victor Heiser, Letter to Richard M. Pearce, 29 Oct. 1921, RAC, RG 5, Series 1.2, Subseries 242, Box 109, Folder 1498.
- <sup>15</sup> *ibid.*
- <sup>16</sup> "Source Book for a History of the Rockefeller Foundation," Volume 2 (Second Period: Medicine and Public Health 1919-1929), Chapter VII (Medical Education in the Far East, 1920-1940, including Australia, New Zealand, and South Africa), [1954?], p. 3110, RAC, RG 3, Series 900, Box 10, Folder 78. This massive series was the final draft of Lewis Hackett's manuscript on RF history which he failed to publish before his death in 1962.

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- <sup>17</sup> For a celebratory account of Carter's term in the Philippines, see, e.g., *ibid.*, p. 3112-13.
- <sup>18</sup> William S. Carter, "College of Medicine and Graduate School of Hygiene and Public Health of the University of the Philippines, Dec. 16-17, 1927," RAC, RG 1.1, Series 242, Box 4, Folder 37.
- <sup>19</sup> A legislation actually came to fruition that restructured the Board of Medical Examiners by limiting the number of its members who graduated from the same institution to two (thus making a balance between UP and UST graduates, and allotting the fifth position to an American member). But a year after the law was passed, despite a fairly "balanced" Board of Medical Examiners, the medical licensure exam was annulled by the Filipino Secretary of the Interior Jose P. Laurel on grounds that all of its five members were found to have sold examination questions. They were dismissed from their position and charged with bribery. Source: "Medical Education in the Philippines 1921-1928, RAC, RG 1.1, Series 242, Box 1, Folder 13.
- <sup>20</sup> "Source Book for a History of the Rockefeller Foundation," p. 3121.
- <sup>21</sup> Carter, "College of Medicine and Graduate School of Hygiene and Public Health of the University of the Philippines," p. 2.
- <sup>22</sup> On RF's activities at the Siriraj Medical School, see, e.g., Peter J. Donaldson, "Foreign Intervention in Medical Education: A Case Study of the Rockefeller Foundation's Involvement in a Thai Medical School," *International Journal of Health Service* Vol 6, No 2, 1976.
- <sup>23</sup> "Source Book for a History of the Rockefeller Foundation," p. 3136
- <sup>24</sup> Carter, "College of Medicine and Graduate School of Hygiene and Public Health of the University of the Philippines," p. 7
- <sup>25</sup> *ibid.*, p. 5.
- <sup>26</sup> *ibid.*, p. 6.
- <sup>27</sup> Victor C. Valenzuela and Teodora V. Tiglao, "History of the Institute of Hygiene," *Philippine Journal of Public Health* Vol 2, No. 5, Oct.-Dec. 1957, p. 7.
- <sup>28</sup> Carter, "College of Medicine and Graduate School of Hygiene and Public Health of the University of the Philippines," p. 5.
- <sup>29</sup> William S. Carter, Letter to William B. Wherry, 5 Apr. 1929, RAC, RG 1.1., Series 242, Box 4, Folder 45.
- <sup>30</sup> Arturo Garcia and Hilario Lara, "A Brief Study of Students' Records for the Last Twenty Years in the College of Medicine and Affiliated Schools and Possible Ill-Effects of the Ruling Recommended by the Special Committee on University Expansion 'to Maintain in the Future the Same Total Enrollment of 1927-28, in all Colleges and Schools of the University of the Philippines'" [1927?], RAC, RG 1.1, Series 242, Box 1, Folder 13, p. 3.
- <sup>31</sup> *ibid.*
- <sup>32</sup> Valenzuela and Tiglao, "History," p. 6-7.
- <sup>33</sup> A good example here is Selskar M. Gunn's 1933 visit where he expressed his strong views about the tragedy of giving Filipinos "too much independence." Celebrated by present-day historians as a doyen of social medicine, Gunn mirrored Carter's contempt toward Philippine affairs: "Politics in the Philippines are extremely *pernicious*, and the Public Services have suffered as a result. On the whole, I am of the opinion that the United States did a good job in the Philippines, and in general it was on an altruistic basis" (emphasis mine). He also made a sharp comment on the brewing ethnic tension between Filipinos and Moros, but credited the U.S. occupation as essential to hold the country together: "Various races who occupy the Islands are far from reconciled to each other, and serious civil wars are to be anticipated if the United States withdraws. The Moros in the South are especially opposed to independence, as they feel that they would be thrown over to the none too tender mercies of the Filipinos. They feel, and with justice, that the United States will be definitely going back on its sacred promises if the Filipinos should be given control over them." Source: Selskar M. Gunn, "Report on Visit to the Philippines, August 26, 1933-September 4, 1933," RAC, RG 1.1, Series 242, Box 1, Folder 4.
- <sup>34</sup> Justin Andrews, Letter to William S. Carter, 11 Nov. 1930, RAC, RG 1.1, Series 242, Box 3, Folder 30.
- <sup>35</sup> Justin Andrews, Letter to William S. Carter, 12 Jan. 1931, RAC, RG 1.1, Series 242, Box 3, Folder 25.
- <sup>36</sup> Helpful here is the 1950s correspondence between Wade W. Oliver and the Institute's Walfrido De Leon. Two decades removed from the time they met in UP in 1930, the two had elevated into leadership positions—Oliver as the RF Associate Director and De Leon as the head of the Alabang Public Health Laboratories. Each shared with the other news about their jobs, their family, even what

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ailed their aging bodies. In 1953, Oliver expressed his warmest gratitude after De Leon gifted him a case of San Miguel Beer: "I simply can not tell you how very much indeed I appreciate your thinking of me. Incidentally, that is a wonderfully fine beer, and it slips down mighty easily. God bless you, say I." Wade W. Oliver, Letter to Walfrido De Leon, 20 Apr. 1953, RAC, RG 2, Series 1953, Subseries 242, Box 31, Folder 198.

<sup>37</sup> Hilario Lara, Letter to Wilbur A. Sayer, 19 Apr. 1945, RAC, RG 2, Series 1945, Subseries 242, Box 300, Folder 2037.

<sup>38</sup> A large number Hopkins professors joined the Institute's faculty as visiting professors, including U.S. sanitarians who eventually became luminaries of U.S. public health: Ernest L. Stebbins, Thomas B. Turner, Abel Wolman, Lloyd Rozeboom, Carl Lamanna, and Cornelius Kruse in 1954-55; Philip Sartwell, Frederic Bang, Paul Lembcke, and Janice E. Mickey in 1955-56; William Cochran and Ruth B. Reeman in 1956-57; Paul Harper, Ruth Alice Davis, and Matthew Tayback in 1957-58. Source: Valenzuela and Tiglao, "History," p. 9.

<sup>39</sup> See, e.g., Marshall C. Balfour, "Public Health and Medical Care in the Philippines, March 1949," RAC, RG 2, Series 1949, Subseries 242, Box 454, Folder 3052.

<sup>40</sup> Regino G. Padua, "The Golden Era of Public Health in the Philippines," *Philippines' Public Health Yearbook* July 1953 (Manila: Department of Health), 10-11, 125-27.