

Medicalization logic in social assistance, assistance logic in health

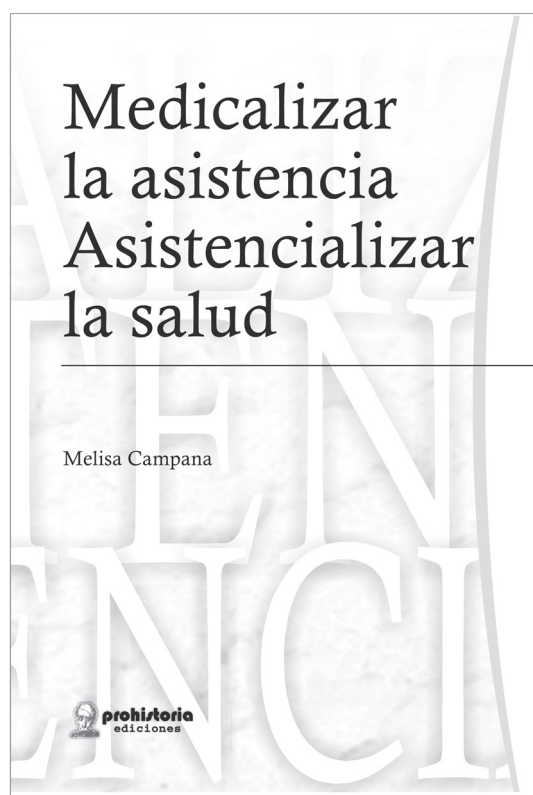
Medicalizar la asistencia, asistencializar la salud

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Melisa Campana. *Medicalizar la asistencia, asistencializar la salud*. Rosario: Prohistoria Ediciones; 2012. 296 p. ISBN 978-987-1855-32-2.

This book is the result of the work carried out by the author in her doctoral thesis within the framework of the PhD program in Social Work of the Faculty of Political Science and International Relations of the Universidad Nacional de Rosario, between 2006 and 2010. This work starts with an emphatic Preface where the political-strategic character of the book stands out as a relevant input to the formulation of government policies with an effective public incidence.

From the generally spread idea that emphasizes that the assistentialization^(b) is a characteristic product of neoliberal governmentality,^(a) the author states that, in the specific case of public health, that *assistential element* is constitutive of its genesis and development. In that sense, she discusses three hypotheses that act as a trigger for the analysis and the description of the way in which the connection between public health and social assistance is established, along with the consequent strategies of intervention. The first hypothesis holds that the emergence of an assistential mechanism was possible as a result of the action of the medical hygiene discourse that created the conditions for its existence. The second hypothesis suggests that the close connection between public health and social assistance generated different



forms of a government of poverty, based on historical moments that are traced back from the formation of Argentina as a Nation-State until the end of the 1990s. In the third hypothesis that also guides the subsequent analysis, the author addresses the occurrence of a process of reassistentialization of

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public health within the framework of neoliberal governmentality, given that in the case of public health, there would be an overprinting of the assistential component that historically characterized its operation.

This research study has been carried out from a genealogic perspective,^(c) and at the same time, it is interested in the way in which the exercise of power is rationalized and how it is actually exerted, inscribed on the practices, and how it generates multiple effects. Two fundamental pillars of analysis are highlighted: the rationalities of government and its technologies, that is to say, the ways of thinking and the actual ways of intervening. The task performed in this book invites the reader to “examine the real, specific, and observable mechanisms through which certain subjects and populations are governed.”^(1 p.32)

The first part of the book, entitled “Assistentialization of public health,” consists of four chapters about the historiographical reconstruction that gives account of the birth and development of the mechanisms of public health and social assistance in Argentina. The description is focused on the overlapping between these two mechanisms and the ways in which the government of poverty becomes effective, historically anchoring them from the end of the 19th century with the constitution of the Nation-State until the 1990s. The analysis aims to show how the assistance logic has been constituted as an intrinsic part of public health, at the same time that the medical discourse permeated and composed the categories and the techniques with which the State attempted to give an answer to the *problem of poverty*. The author shows how:

The medical hygiene discourse (1830-1940) thematized poverty in terms of social illness, and activated an arsenal of technologies for its respective treatment, ranging from large institutions such as the Central File or the Public Assistance to much more specific practices, like the inspection of residences, the granting of subsidies in exchange for the strict fulfillment of the prescriptions, or, plainly and simply, the certification of the “state of necessity” to obtain free medical attention.^(2 p.129)
[Own translation]

In the two chapters of the second part, entitled “The reassistentialization of public health: primary health care in the municipality of Rosario,” the author analyzes the modifications that, after the development of neoliberal governmentality, were produced in terms of reassistentialization of public health within the framework of the wider phenomenon of assistentialization of social policies. The analyzer that gives account of these processes is primary health care (PHC) in the municipality of Rosario, which helps to illustrate how public health became in charge of the functions of assistance, constituting itself as a privileged modality of the government of poverty. The reprogramming of the scheme of close protection and the medicalization of assistance are the selected dimensions to describe the deepening of the assistential component in local public health. As the first dimension regards, it shows how PHC made possible the processes of territorialization in the municipality, beginning with the placement of health centers in peripheral districts. Even today, these institutions are important State points of reference. In this connection, the author claims that:

This tendency towards the territorial management of the problems reprograms the structure of close protection, as the growing localization of the interventions boosts the process of reprimarization, which revalues the proximity supports and the communal and neighborhood capacities.^(1 p.226) [Own translation]

In this regard, Campana highlights that in the case of the city of Rosario, the diagnoses and proposals of international organizations such as the World Health Organization (WHO), the Pan-American Health Organization (PAHO), or the United Nations Development Programme (UNDP) were taken up, as well as the principles of collective health in their founding axes based on the notions of health promotion, prevention, and integrality, which allowed the processes of medicalization of assistance.

The author’s analytical bet does not lie in the claim of solving a problem, but in suggesting a way of addressing it, proposing to that purpose a grid with which the assistance function of public health could be understood and identified, taking

social policies as a field of analysis, which helps enlighten the institutional sectorial view and the interventions of the State in a different way:

The reflective prism here proposed withdraws assistance from its subsidiary and residual order to place it in the center of attention as a transversal element to the different modalities of social intervention by the State.^(1 p.35) [Own translation]

The book shows a good command of theoretical and methodological tools, used strategically, in

terms of a history of the present while counting on the formulation of questions “directed to show *how* – rather than *why* – a certain system of practices has been developed in one way and not in another,”^(1 p.24) placing emphasis in the concrete mechanisms by which power is effectively exercised, abandoning the pursuit of essentialisms or hidden intentions. This piece of work successfully addresses the intention of denaturalizing and defamiliarizing the way in which power is exercised and the strategic effects that certain apparently banal mechanisms exert over specific populations or subjects.

ENDNOTES

a. The concept of “governmentality,”⁽³⁾ coined in 1978 by Michel Foucault (French author of the 20th century) in his lessons at the Collège de France, makes reference to a specific way of exercising power which has a population as its object (and not people, as it occurred with the sovereign power), and which will use “political economy” as its knowledge, and safety devices as technical instruments. The Foucauldian concept of governmentality is closely related to government, but not just to state government or the one exercised by the State; its deployment goes beyond it. Undoubtedly, the different state agencies deploy a central role, but when referring to government, all the efforts to conduct behaviors are being addressed. Therefore, beyond the purely state level, the study of governmental practices refers to the systematic efforts oriented to the production of subjectivities.

b. Assistentialization of social policies means the phenomenon by which the whole system of social policies is focused on the assistential function or, in other words, the assistential function is constituted as the key component of the social interven-

tion forms of the State. That is to say, it refers to a model in which government agencies establish paternalistic relationships with their populations, creating dependency through top-down, verticalist programs that do not make room for local realities and initiatives.

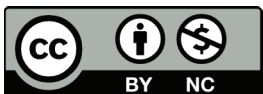
c. The genealogical perspective attempts to overcome the exercise from which, to write the story of a certain event or interrelation of phenomena, variables, or policies, the classic chronological count is used. Instead, this book intends to carry out an exercise of “*history of the present*, considering the aforementioned perspective. That is to say, to take a current problem as a starting point and track its emergency condition, in order to identify the continuity lines as well as the breaking points in that path.”^(1 p.1) The author presents the question that has sparked her research and that implied a return to the origins of social-assistance matters, in the dawns of the formation of the Argentine State, namely: “How was such a close relationship built between the health and the assistance systems, to such an extent that, for example, almost all benefits from assistance programs or plans are dependent on a medical certification?”^(1 p.1)

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