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Body education and school hygiene in Rio de Janeiro press (1930 - 1939)^I

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Abstract

In the 1930s in Rio de Janeiro, there was an effective presence of intellectuals in government positions, which could ensure the implementation of a number of strategies aimed at the construction of a wider reform of a society guided by modernity, which lay in the reform of habits, such as hygiene and body education. Rio de Janeiro was the administrative center of the republic, so there was a need for coordinating government policy on education and health, especially in that city. This study has aimed to evaluate the influence and impact of hygienist strategies on the daily life of schools. Its sources were mainly *O Paiz* and *Jornal do Brazil* newspapers in the 1930s. The document corpus consisted of 37 newspaper articles, of which 21 were analyzed in this research, because they involved the following specific categories: school medicine, school hygiene and health education. The hypothesis pointed to the limited influence of intellectuals, with a gap between what was thought and what was executed. However, findings allow us to consider approaching the educational discourses and practices influenced by the actual participation of intellectuals such as Fernando de Azevedo and Anísio Teixeira in the organization of education in Rio de Janeiro, particularly in the early 1930s.

Keywords

History of education – Public health – Hygiene – Body education.

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Educação do corpo e higiene escolar na imprensa do Rio de Janeiro (1930-1939)^I

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Resumo

No Rio de Janeiro, na década de 1930, uma presença mais efetiva de intelectuais em cargos governamentais poderia garantir a efetivação de uma série de estratégias que visava à construção de uma reforma mais ampla da sociedade pautada pela modernidade, que residia também nas reformas de hábitos, como a higiene e a educação do corpo. Sendo o Rio de Janeiro, o centro administrativo da República, haveria a necessidade de articulação entre as políticas governamentais no âmbito da educação e saúde sobretudo naquela cidade. Na análise desse contexto, este estudo teve como objetivo avaliar a influência e o impacto de estratégias higienistas sobre o cotidiano das escolas. O estudo teve como fontes, principalmente, os jornais O Paiz e o Jornal do Brasil no período de 1930 a 1939. O corpo documental foi composto por 37 artigos de jornal, sendo que 21 foram analisados nesta pesquisa, pois envolviam as categorias específicas “medicina escolar”, “higiene escolar” e “educação higiênica”. A hipótese versava sobre uma influência limitada dos intelectuais, havendo uma distância entre o que era pensado e o que era executado. Contudo, os resultados obtidos permitem considerar uma aproximação entre os discursos e as práticas pedagógicas influenciada pela participação efetiva de intelectuais como Fernando de Azevedo e Anísio Teixeira, por exemplo, na organização da educação no Rio de Janeiro, sobretudo no início da década de 1930.

Palavras-chave

História da educação — Saúde pública — Higiene — Educação do corpo.

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Introduction

In the 1930s, in Rio de Janeiro, which was then the federal capital, the intellectual debate contributed to establishing a hygienist mentality with new contours. The political scene favored state centralization. Because Rio de Janeiro was the administrative center of the republic, there was a need for coordinating government education and health policies especially in that city. To this end, a greater presence of intellectuals in government positions could ensure the effectiveness of a number of strategies aimed at building a more comprehensive reform of society guided by modernity, which lay also in the reform of habits, such as hygiene and body education¹.

This study has sought to consider how these strategies, influenced by intellectuals' hygienist mentality, affected everyday school life. Our hypothesis is that this influence was limited and that there was a gap between what was thought and what was executed.

The study's sources were mainly *O Paiz* and *Jornal do Brazil* newspapers from 1930 to 1939. The document corpus consisted of 37 newspaper articles, of which 21 were analyzed in this research, because they involved specific categories: school medicine, school hygiene, and hygienic education.

The analysis of empirical data was performed from the perspective that any discourse is dated and, therefore, its decontextualized interpretation can only produce anachronisms (VEYNE, 2008). Disregarding the context and the specific values of that time would undermine this narrative, as this interpretation was to be conducted from the discourses typical of the 1930s, which involved a context of appreciation of public health and education. In the words of Paul Veyne (2008, p. 252), "[...] discourse occurs so naturally to designate what is said as the term practice to

designate what is practiced. [...] And discourse is not ideology: it is nearly the opposite; it is what is actually said without the speakers' knowing it".² Ultimately, if there is consistency, planning, logic in the ideological field, in the discourse what is said has a casual grammar, which is the randomness of history and not a logic that builds a structure. Therefore, we are concerned with analyzing the documents, constructing a narrative marked by time and space. To this end, we shall first consider the scene of Rio de Janeiro city in the 1920s regarding health and education policy, and we shall later observe how the hygienist interventions in schools in the 1930s were reported.

Links between health and education: A hygienist intervention

In the 1920s, the hygienist intervention was outlined from an initial perspective in the context of the capital, Rio de Janeiro. For Paulilo (2009), Carneiro Leão administration, from 1922 on, supported the subsequent administrations of Fernando de Azevedo (1927-1931) and Anísio Teixeira (1932-1935) of public education in the federal capital.

According to the author, Fernando de Azevedo continued the work of Carneiro Leão and part of his project was to "expand the influence of primary education, reshape vocational education and modify the standards of teaching and culture characteristic of the school system of that time" (PAULILO, 2007, p. 62). Azevedo also proposed the construction and establishment of various school buildings, aiming to "expand the services of educational and hygienic care and inspection, coordinate all school institutions, and re-organize their structure and educational purpose" (PAULILO, 2007, p. 63). Thus Azevedo sought to modify and extend public education service. However, the scene was adverse in 1926, "according to school physicians, their situation was the following: 130 of the facilities were

1- Body education lies in strategies, techniques, practices, and policies directed to the body, such as hygiene, gymnastics, sports, diet, and clothing, in various formal and non-formal educational settings (SOARES, 2014).

2- Translator's note: Translated from Veyne (2008), not from the original work.

well equipped, 133 were passable, and 57 were poor” (PAULILO, 2007, p. 214). Also according to Clarice Nunes, there was a gap between the liberal discourse and everyday educational practices. In her words:

The smiling and frank school also had less luminous versions, in which there was still physical and moral punishment; in which one exacerbated the surveillance of the cleanliness of bodies and clothes, and of the manners of pupils; in which teachers circumvented educational authorities, their measures of control and assessment of learning outcomes, and official literacy methods. (NUNES, 2000, p. 371).

In 1927, the school census published in *A Noite* newspaper showed that, among children in the age group of primary education, that is, aged six to twelve years, 48,5% were illiterate and 51.5% knew how to read. Out of the latter, 63.7% attended school and 36.3% did not (PAULILO, 2007, p. 300). The reform prescribed by Decree number 3,281 sought to re-organize the administrative structures into inspection and education tasks, re-define the powers of the general director as well as the rules and policies of schools, principals and teachers. The reform also provided for the common initial character of education aiming at “eliminating the separatism between popular education and the training of elites since primary schooling” (PAULILO, 2007, p. 181). This attempt supported the idea of national unity and the formation of a people, in other words, of education as a builder of national unity (CARVALHO, 1998).

Undoubtedly, when observing the newspapers of 1930s, we noted the support for this project. For example, in the “Education and Teaching” column, professor Antônio Fausto (1934), in the article “A Educação e a Higiene Escolar” [Education and School Hygiene], argued that a school without hygienic mentality represented an outdated scene, since hygiene was essential in the new school. In his words:

In the past, the school only provided intellectual instruction. Students were taken in isolation. Today, in addition to providing students with general education, the school accompanies them on the street and assists their families, aiming to socially and morally improve them. Order and hygiene are the first conditions, the starting point of the New School. Hygiene education is of great need. Because the intellectual world is a function of the physical one. Growth is a general law of our being: we grow mentally and physically (Greenwood). [...] To instill in students the need for cleaning from notebooks and books to clothes and body. [...] In the Mothers Circles, it will be explained that hygiene must accompany the pre-training of individuals. [...] These and other precepts should be taught primarily to women, as educating a man is to educate an individual, whereas educating a woman is to educate a generation. The primary school Hygiene notions will be passed on to the secondary school. Nurses who go to family homes should take these precepts and expand them there. (FAUSTO, 1934, p. 14).

One can observe that professor Antônio Fausto’s discourse emphasizes an adherence character to hygienist initiatives in education, a condition that undermines the hypothesis that these strategies were limited to everyday school life and that they were more present in the discourses. This document also provides indications of the hygienic education objectives in the new school, and of the implementation of some strategies, such as the presence of school nurses who visited the homes of students. Their role was to teach in the everyday home life the hygienic precepts that would help the physical and mental development of students. Integrating education and health, the focus was prevention, hygiene education, overcoming the campaign-police model (TELAROLLI JUNIOR, 1996) which emphasized the control of epidemics in Brazil

in the late nineteenth and early twentieth centuries. In the 1930s, what also changed was the representation of racial improvement, because in the discourse of the New School there is a characteristic of the Brazilian hygienists highlighted by Nancy Stepan (2005): they were predominantly influenced by puericulture, the care of childhood, of motherhood, and not by the idea of whitening, or racial segregation (HOCHMAN, 1998; HOCHMAN; LIMA, 1996). Because of this, they were different from the physicians who, in the thirties, advocated the *negative eugenics* of Francis Galton³. For example, the hygienist project of Fernando de Azevedo argued that:

The ethnic superiority of a people is an equation between the elements of their constitution and the historical conditions that have acted on them. Who attends in the heterogeneity of ancestral elements that, amalgamating, resulted in the hybrid and inaccurate product of our genes, and under the conditions that influenced them, cannot be surprised by the unpleasant spectacle of this people who still lacks a type that points to a defined ethnic type, but on the contrary, commanded rickety, and, thus, destined, according to the pessimists, to abortion or at least to the near-impossibility of becoming one day a living force of humanity and a real glory of Latin civilization. (AZEVEDO, 1933, p. 14).

The intellectual debate in the 1930s over racial and educational issues in Brazil was not homogeneous, because the Galtonian ideas were present. It can be observed that, in terms of government policy, hygienist intellectuals emitted discourses on the influence of puericulture and hygienized childhood education as it had occurred in France from

the perspective of Adolphe Pinard⁴ since early twentieth century (ROCHA, 2010; DIAS, 2008). On the other hand, some physicians argued for the *negative eugenics* of Francis Galton, using strategies such as the sterilization of the sick and the regulation of marriages aiming at selecting the “best genes”. This debate takes place in newspapers, as glimpsed in passages triggered by the following note of *Jornal do Brasil*:

One of the measures of the Hitler government that has impressed the world the most and that has been widely discussed in scientific circles everywhere is sterilization. No one is unaware that sterilization has been practiced at different times. [...] But nobody has ever made use of such measure in such a large scale and with an amplitude most scientists do not dare defend. (UMA LEI HITLERIANA, 1934, p. 5).

Three days after the publication of a note in *Jornal do Brasil* which emphasized the controversy of the Nazi government measure, a note by an anonymous reader was published contradicting the perspective of controversy surrounding sterilization. The note said:

In the Brazilian medical community, the issue that the recent German law on sterilization has brought about is not and cannot be controversial. It is unquestionable [...] A visit to Hospital Nacional attests it, and brings conviction to the spirit of those who, grounded in false principles of religion and morality, do not see this measure in a favorable light. Turned into law, this measure stems from facts. (A ESTERILIZAÇÃO, p. 5).

3- Francis Galton (1822-1911), English mathematician, conceived eugenics from strategies such as sterilization and regulation of marriages and from the criteria of eugenic science, the most influent conception in England, Germany, and the United States.

4- Adolphe Pinard (1844-1934), French physician who understood eugenics from puericulture, the quality of pregnancy, and of child care, and thus focused more on preventive and educational measures.

The answer of another reader was published on January 16th. This time, it was signed by Dr. Barbosa Lima, a physician from Minas Gerais state. In his words:

The newspaper of the day before yesterday published a statement that I qualify as evil, not only because it had no signature, but also because it contains untruths and denounces the pernicious materialism of who wrote it. I refer to sterilization, which is not at all “unquestionable” and “cannot be controversial”, as the anonymous writer argues. [...] Let me also express my opinion, which is, I am absolutely certain, the same as that of most Brazilians: the problem we are interested in is not sterilization, it is that of comprehensive and systemic education; science in itself does not solve human problems; without the support of religion, they will always remain insoluble, and men will be divided between the most extreme and inconsistent hypotheses, only concerned with the eternity of matter, forgetful of the eternity of the soul. (LIMA, 1934, p. 6).

The article by Dr. Barbosa Lima emphasizes a hallmark of Brazilian intellectual debate, that is, depending on the political scientific agenda, antagonistic groups in other discussions unite regarding a specific topic. The influence of the Catholic culture, both in France and in Brazil, opposed negative eugenics (DIAS, 2008). The same position was supported by New School educators, uniting two different groups in the field of education in that context: Catholics and “pioneers”⁵ (CARVALHO, 2005).

The thought that the people were sick becomes evident in the New School discourse. For example, Fernando de Azevedo saw the country in a situation characterized by degradation and abandonment. He saw the Brazilian childhood as the picture of a physically weak people. He also perceived the state as ineffective even in literacy

and emphasized the precarious conditions of the education system in Brazil. For him, one noticed the complete abandonment of schools at first glance in school inspections, by their material aspect, more accessible to observation. Schools were an attack on our cultural forums and on all the rudimentary principles of hygiene and education, since most of them were installed in old rented buildings and sometimes even in ruins, or ill-adapted buildings for school purposes. But, besides facilities, the proletarian children themselves were abandoned, as he reports:

[...] Whoever has had the opportunity to observe and experience live the physical and social misery of most of the school population of urban and rural centers cannot disregard the need to incorporate, in reforms, plans of hygiene and food assistance to poor children, of a population whose sap has been drained way less by poverty than by worms, syphilis, and endemics. But, devoting myself to a social welfare policy, I felt that all this effort would not meet its objectives if, at the same time, I did not seek to solve the issue of the treatment of sick children in public schools. (AZEVEDO, 1934, p. 184).

Therefore, it was about consolidating an education and health project as a hygienist initiative that brought together other intellectuals of heterogeneous political positions. When the agenda was hygiene education as a key tool for the development of education and health, and for opposition to sterilization as a strategy representative of Galtonians, traditional and liberal sectors were together, creating various hybridisms. In other debates, physicians and Catholic educators, materialists, interventional physicians, liberal educators, spiritual scientists, authoritarian physicians, conservative politicians, all of them were involved in relations of consensus or conflict, depending on the issue at hand, which hindered the homogeneous organization of political and

5- The term pioneers refers to the signatories of “Manifesto dos Pioneiros da Educação Nova de 1932” [1932 Manifesto of New Education Pioneers].

scientific positions. The scenario was heterodox and complex. However, in the 1930s, Azevedo, Anísio Teixeira, and other members of the New School movement took public offices at the federal, state and municipal levels in a power centralization scene marked by the first decade of Getúlio Vargas government. The order was to intervene in social reality, an aspiration of the hygienist mentality, especially in everyday school life, as society demanded on the pages of newspapers. An example of that was the article “Problemas Infantis” [Child problems], 1931, in which *Jornal do Brasil* evidences that State intervention in the issue was beginning:

We have not started a certain school hygiene until now, although we do not lack worthy professionals. In Rio, who watches children leaving school soon notices the lack of hygienic care. (PROBLEMAS INFANTIS, 1931, p. 5).

As an example of the most interventionist character of the state, we can highlight the city hall of the federal district, which created a government apparatus to carry out the hygienist precepts. In 1933, Decree No. 4387 of September 8, 1933, of the federal intervenor (ATOS..., 1933, p. 21) consolidates and organizes the administrative apparatus of the Education Department, which now had seven superintendents, two of them linked to aspects of hygiene education: the Superintendence of Health Education and School Hygiene and the Superintendence of Physical Education, Recreation and Games. The first one had:

Article 16 - The Superintendence of Health Education and School Hygiene with the tasks established by Decree No. 3281 of 23 January 1928 for medical school inspection and also those of this decree, will be performed by:

- twenty-eight (28) superintendents of Health Education and School Hygiene;
- one (1) superintendent of dental education and care;

- twelve (12) assistant physicians, appointed among the employees of the staff of the Department, with the advantages and salaries they are entitled to today;
- the necessary number of health teachers.
- the necessary number of nurses;
- three (3) head dentists;
- the necessary number of dentists.

The Superintendence of Physical Education, Recreation and Games had:

Article 18 - Each of the superintendences of Physical Education, Recreation and Games, Musical and Artistic Education, and Drawing and Applied Arts Teaching will be led by a superintendent, with the necessary immediate assistants, appointed among the employees of the department. (ATOS..., 1933, p. 21).

We stress that the only superintendence which had its staff defined by a federal intervenor, notably and also in relation to costs, was that of Health Education and School Hygiene, which demonstrates its relevance to the apparatus of the Education Department. Twenty-nine out of the sixty superintendents of the Education Department belonged to this specific sector. They had a salary of 24,000 reis, second only to that of the general director (30,000 reis) and the director of Education Institute (27,000 thousand réis), which clearly shows the influence of hygienists in the administrative apparatus of schools in the federal capital. Therefore, the number of physicians, nurses, dentists, and gymnastics teachers evidences the important role played by hygienic education in those schools. The growth of physical education in schools was also steep:

- The establishment of orientation courses for teachers of the first and second grades, similarly to what was done in 1935, and taking into account their results, will allow unburdening the specialized, who will give

the 1st and 2nd grades to the classroom teacher, if she has attended the orientation course, and will thus be able to work with more advanced students.

- Schools are more or less equipped. However, there is a need for an annual budget, especially for the acquisition of equipment.

- The following comparative table translates a simple assessment of the growing movement of the physical education service since the beginning of its organization:

Year	1932	1933	1934	1935
Enrollment	12,280	27,618	35,854	40,554
Number of groups	509	751	1,013	1,203
Number of classes	19,825	30,589	28,699	30,886
Schools	29	54	58	60
Teachers	29	55	50	53

If we compare the figures of schools and teachers in 1932 with those of the following years, we find that the control agency and guidance has improved and increased, and that there has also been a gradual increase in schools.

In 1932, when each teacher worked for a school (29 teachers - 29 schools), 12,280 children were provided with physical education and recreation, in 500 groups. In 1935, when some teachers worked in guidance and control service, it was possible to increase the number of schools in higher proportion than that of teachers (53 teachers, 60 schools) and lead 1,205 groups, totaling 40,554 students. (EDUCAÇÃO PHYSICA, 1936, p. 19).

The official arguments advocated an increase in the care of children in schools not only specifically in relation to access to physical education, but also with regard to hygiene in a broader sense. The discourses favorable to its practice and to hygiene brought together various groups of intellectuals who influenced the political bodies. Demanded by civil society, diagnoses like this, with official figures of the executive bodies responsible for the education

field, appeared in newspapers, especially in the first half of the 1930s. An example of that is a report with statistical data which seems to inculcate this perspective of government intervention in schools. This is the report of the head of the Education and School Hygiene Service, in 1932.

The publication of the results above brought forth the school hygiene theme and caused the support of Rio's press. In the 1932 report, *Jornal do Brasil* published an article called "Pela saude das crianças" [For children's health], authored by Nicolau Clancio, early in 1933, which led school physicians to send a thank-you telegram and teachers to demand for the recognition of their work in the field of hygiene, which evidenced that hygiene in everyday school life was not restricted to the work of school physicians and nurses:

Concerning the same article, we have also received the following telegram: "On behalf of the School Medical Inspectors Association, now gathered in general assembly, we thank the brilliant article of *Jornal do Brasil* in which you show the high usefulness of school physicians. - Mendes Vianna, president; Ruy Carneiro Cunha, vice-president; Joaquim Vidal, secretary". - Naturally, we have not mentioned teachers in the aforementioned article because it was inspired by the medical report. We are not unaware that the situation of the teaching profession among us demands not a newspaper article, but an entire study! This is about the letter that some teachers have sent us. (CLANCIO, 1933, p. 13).

Another reference present on the pages of *O Paiz* newspaper relates to Fernando de Azevedo's intervention in school nutrition as the manager of public education. The writings were by Dr. Oscar Clark, head of medical inspectors of the federal district, in an interview for *O Paiz*

STATISTICS OF SCHOOL MEDICAL AND DENTAL SERVICES IN 1932

Medical Service:

Number of inspection visits to public schools.	6,716
Number of students examined.....	30,891
Number of health records.....	14,495
Number of students removed	893
Number of teachers examined.....	1,096
Number of teachers removed.....	34
Number of employees examined.....	209
Number of employees removed.....	11
Number of laboratory tests.....	763
Number of RX tests.....	177
Number of vaccinations.....	3,357
Number of revaccinations	5,040
Number of surgeries.....	174
Number of bandages.....	513
Number of prescriptions.....	1,485
Number of lectures.....	667
Number of building inspections.....	84
Number of information.....	3
Number of documents	100
Number of students referred to preventoriums	354
Number of health inspections of municipal teachers.....	1,558
Number of health inspections of private teachers	2,030
Number of health inspections of vocational school students ...	1,157
Number of health inspections of physical education teachers.....	80

Service of Dental Inspectors:

Number of visits to public schools.....	730
Number of dental inspections in class.....	811
Number of visits to dental offices	718
Number of students inspected	4,927
Number of students examined to fill out forms	3,175

School Dental Service:

Number of appointments.....	76,598
Number of extractions.....	25,400
Number of diagnoses.....	20,188
Number of bandages.....	42,942
Number of urgent interventions	6,613
Number of preparatory interventions	5,558
Number of dental fillings	18,419
Number of new clients	3,270
Number of discharges.....	3,348

School Nurse Service:

Number of public schools visited.....	6,700
Number of home visits.....	3,645
Notice to parents.....	2,127
Number of students treated in schools.....	2,810
Number of students referred to hospitalization.....	4,199

(SABOIA, 1933, p. 22).

in 1930. Logically, the physician alluded to the work done by the Public Instruction Board⁶:

- For many years, there has been no record in Rio of a movement of such a great impact as the one of food assistance to our poor children. It is not luxurious charity, nor work of purely social intentions: It is an obscure apostolate, in which the very teachers who are not satisfied about the service they provide to the city and Brazil spontaneously engage in raising funds to provide their poor students with supplementary meals. Such meals properly compensate for the food deficit at home, thus avoiding evils arising from scarce and imperfect nutrition. The work has the generic title of Glass of Milk, but in fact, not only this precious food, but many others are the objective of the support, such as soup, white hominy, noodles, porridge, rice pudding, various snacks, cooked bananas, cups of coffee with bread, cups of chocolate, eggs, tea, cakes, coconut sweets, fruit etc, in short, all food that is considered healthy and can help poorly nourished children. The enthusiasm with which this work is clearly reflected in the figures in my recent report to Dr. Fernando de Azevedo, which evidence for example that 27,635 glasses of milk were distributed in September 1929, a figure that rose to 76,286 in October, which is more than three times the number of glasses of milk distributed in that first month! In all, in this short time of four months, 249,305 glasses of milk, 191,835 plates of soup, and 67,940 different snacks were distributed, as well as white hominy, noodles, porridge and all the nutritious and tasty meals teachers obtained with admirable, unsurpassed effort! Another point of great value of our work last year concerns the hygiene and preventive medicine courses, opened by the current public instruction board and entrusted to

school physicians. Nurses had, for example, a complete theoretical and practical course of development and specialization in school hygiene. They delivered 1,360 lectures on hygiene and teachers organized health squads in several schools, seeking above all to instill in the spirit of our children love for clean and healthy practices of existence. Only with regard to the fight against yellow fever, our school inspectors conducted nearly six hundred lectures on this disease, (transmission mode, prophylaxis, etc.), organized 789 health squads, which extinguished about two thousand mosquito foci. As one can see, all this is work, dedication, the strict fulfillment of duties... (SALVANDO..., 1930, p. 1;6).

In 1936, the Superintendence of Education and School Hygiene used the newspapers to give a report to civil society. However, in a different tone, praising some initiatives, but also requesting greater parental involvement in campaigns for the examination of preschool-aged children, and revealing the need for improvements in government structure, which, despite having increased considerably in the 1930s, was still incipient for the demands generated in the capital of the Republic:

[...] how necessary medical examination is at preschool age and how valuable the cooperation of the press is in certain public interest campaigns. Enough to say that in 1934 only a few dozen children at preschool age had attended the inspection which they had been provided with in schools.

Today the important role that preschool age plays has been proven, for that is when we should lay the foundation for a program that aims at health protection, promotion and education. It is easy to assess how much the efficiency of School would increase if thousands of students enrolled in the first grade were already free from physical and even mental defects,

6- Diretoria de Instrução Pública.

easier to correct than at school age. However, the health examination carried out every six months with preschool-aged children, and annually with schoolchildren, would be an ideal way to tackle the defects still early and to correct them more easily, drawing the attention of parents or guardians, would have a great educational and prophylactic influence, needless to endear its practical use for the child.

- The number of school nurses is insufficient for the needs of the service, which is complex and requires great stamina and constant encouragement. Underpaid, they do not even have a small budget or transport in service, and sometimes travel long distances, which increases their fatigue. Each superintendent should have at his disposal at least five school nurses. However, most only have one.

It would be desirable that the current number of nurses were gradually increased by Health Educators, more in line with the current trends and the progress of school hygiene: higher cultivation of health and less concern about diseases.

To take advantage of the teachers with diplomas who like and the ability for that work (health educators) is what is appropriate to do.

Held last year, the hygiene improvement course will probably be a decisive step towards wider achievements.

- The role of the Education and Health and School Hygiene in secondary technical schools has been remarkably expanded. Among other initiatives, the following should be cited: the installation of medical offices in 7 schools; the systematic preparation of reports on students for which a medical morpho-physiological record of the adolescent was organized; the examination of faculty and administrative staff; the use of clinical services and research; educational work with the organization of lessons and lectures on

practical matters of adolescence hygiene and health protection; inquiries and studies on undernourishment and malnutrition of students; the organization, on a scientific basis, of current tables for the diet of boarding schools. (SUPERINTENDENCIA..., 1936, p. 19).

However, the intervention of government agencies in the issue of school hygiene also raised criticism. Some physicians cautioned that their role lay in the prophylaxis, prevention, hygiene education, and not in the treatment of diseases. That is, the treatment should occur in another field, in hospitals and private clinics. Obviously, a dispute between clinical medicine and school medicine reveals a trade confrontation, for the market of the care of sick children. Apart from this, clinicians stressed that hygienic prevention should occur not at school age, but, at preschool age, in early childhood, and should not take place in the spaces of schools. A professional who stood out in the pages of newspapers with this argument was Dr. Zopyro Goulart, a school physician, one of the founders of the Brazilian Society of Dermatology, who, in two articles on *Jornal do Brasil*, entitled "As directrizes da hygiene escolar" [School hygiene guidelines], in 1931, and "As clinicas escolares" [School clinics], in 1932, criticized the assistance and clinical character of the school medicine intervention. In his writings:

However, the function that should prevail in the organization of school hygiene is that of the educator. Not that of the physician, but that of the hygienist who educates. [...] Although the physician-inspector has to be, first and foremost, a health educator, a propagator of social hygiene, and is responsible for a role of first magnitude in the hygienic education of students and teachers, he cannot fail to play a clinical role and to take care of the treatment of patients. But the school physician is not to undertake this work himself. (GOULART, 1931, p. 5).

Having established the role of school physicians, investing in school clinics caused a more critical reaction:

The school clinic is pressingly an archaic institution. When children come to school, remediable diseases in preschool should already have been dealt with or cured.

In a city where assistance to sick children is still so precarious, it would be interesting and convincing to convert the four new centers into child clinics. School children would still be succored and we would have a more updated technical organization. (GOULART, 1932, p. 5).

According to Sônia Câmara (2004), there was a different interpretation by Oscar Clark, head of the medical inspection service of the General Board of Public Instruction, regarding Zopyro Goulart's opinion, because, in Clark's view, food assistance and medical clinics allowed a broader medical school performance.

Despite internal disputes regarding school hygiene, it became increasingly present in the daily life of schools. In school curricula, as in the reform of Fernando de Azevedo in the late 1920s and early 1930s (CÂMARA, 2004), and in the content of the normal school exams of the federal district. For example, in 1931, the practical exam of the make-up test of the normal school of the Federal District, regarding the points of pedagogy, emphasized the education of hygienic habits:

Point 1 – Nature of the educational phenomenon and its characterization. General aspects of education: genetic problems and [...] School hygiene and pedagogy and its relations with the method. (ESCOLA NORMAL, 1931, p. 22).

Similarly, the points of the courses of school nurses:

Dear interim school nurses: The improvement and specialization course for school nurses will be held at José de Alencar School (Largo do Machado), on Thursdays, at the following times:

Dr. Bueno de Andrade – Mental Hygiene – (9 to 10 p.m.).

Dr. Leonel Gonzaga – School Hygiene – (10 to 11p.m.).

Dr. Joaquim Nicolau – Preventive medicine – (1 to 2 p.m.).

Dr. Bastos de Avila – Anatomy and physiology – (2 to 3 p.m.).

Dr. Pires Ferrão – General and individual hygiene – (3 to 4 p.m.). (CLARK, *Jornal do Brasil*, 1 April, 1930, p. 6).

Another strategy that had repercussions in the newspapers was the creation of Healthcare Clubs to replace the squads. These organizations put students at the center of the hygienist debate, allowing them to discuss, propose, and intervene in the matters related to health at school. Present in festivities, students who belonged to the club represented the ideals of hygiene education, and were role models to be emulated at school and at home. For Goulart:

They are expected to comply with this morality that health education made them know. In order to make this educational goal become a reality, the Instruction Board has just established and published the statutes of the "Healthcare club", intelligently prepared by the industrious head of the social work service. It is an association of public school students, whose program is ultimately culture and health improvement. By example and propaganda, each member must also strive to make the "health sense" cultivated in his individual life extend to every school and home. The healthcare club happily replaces the former health squad, to which it lends more educational amplitude and effectiveness. (GOULART, 1932. p. 5).

Regarding this government initiative, we can see, in the following years, notes on *Jornal do Brasil* on the presence of Healthcare Clubs in festivities of several municipal schools of Rio de Janeiro. For example, in the column “Education and Teaching” of *Jornal do Brasil*, published in 1938 and 1939, some notes praised the actions of the clubs. At Ferreira Vianna school:

The Emergency Pharmacy of Oswaldo Cruz Healthcare Club opened on the 13th at 9 a.m. [...] After the session was opened, there was a flag contest for the Healthcare Club, and student number 195, José Silva, a fourth grader, was the winner. Immediately after toothbrushes were distributed. [...] The students of Ferreira Viana pre-vocational school deserve congratulations. (EDUCAÇÃO e ENSINO, 1938, p. 12).

Francisco Mendes Vianna school highlighted in its program of festivities the presentation of its Healthcare Club (EDUCAÇÃO E ENSINO, 1938, p. 14). At Santa Cruz school, the Healthcare Club took part in a civic event and was responsible for the national flag parade and guard (EDUCAÇÃO E ENSINO, 1938, p. 10). At Bernardo de Vasconcelos school, to celebrate the opening of the medical office, the student president of the Healthcare Club was responsible for greeting the medical superintendent, Dr. Gilberto Gonzaga Romeiro, and for a drama entitled “Ter saúde é ter felicidade” [Being healthy is being happy] (EDUCAÇÃO E ENSINO, 1939, p. 13). At Piauí school, the Healthcare Club also took part in the school’s festivities, making the oath of the new monitors (EDUCAÇÃO E ENSINO, 1939, p. 9).

The hygienist project clearly saw in childhood its chance for redemption, which is not particularly typical of that space and time, since, in the twentieth century (GONDRA, 2000; 2004), in the first decades of the twentieth century in São Paulo (ROCHA, 2003), or even in the 1920s in Rio de Janeiro (SILVA; PAULILO, 2012), the intentions of the medicalization of education were present. Nevertheless, the

structuring of hygienist demands into more forceful public policy is observed in the federal capital schools from 1930 onwards. We observe in the newspapers that the technical apparatus was expanded throughout the 1930s, but mostly in the administrations of Fernando de Azevedo and Anísio Teixeira, intending to make the state more present in public schools by means of hygiene education.

Final thoughts

We hypothesized that the influence of Brazilian intellectual production in the 1930s, together with national projects, interfered to a limited extent in the daily life of primary education schools in Rio de Janeiro city in that period. Nevertheless, we observed the opposite in the newspapers, that is, the intellectual debate influenced public policy and, in some specific contexts, impacted on a large universe of schools in Rio de Janeiro. We noticed that, particularly in the 1930s, in the federal capital, intellectuals such as Fernando de Azevedo and Anísio Teixeira occupied strategic public positions in the field of education, especially early in the decade, which allowed considerable advances in the hygienist intervention.

On the other hand, it is worth emphasizing that, from an external review of documents (PROST, 2008), newspapers are a limited source for the understanding and interpretation of how teachers working in public education systems received these ideas, that is, how hygienist demands circulated among them. Regarding that point, Marta Maria Chagas de Carvalho (2005) warns us that it is impossible to adopt the discourses and their respective strategies as mirrors of the pedagogical practices of the schools of that period. In other words, there was a need for a change in the mentality of teachers for the hygienist and New School ideas to materialize. In her words:

[...] despite some differences, such strategies did have characteristics in common, arising

from the affinity between the principles and objectives that guided them: those of a program of reform of society through the reform of school that had, in the change in teachers' mentality, a sine qua non and, in the compliance with certain New School principles to promote it, a requirement resulting from the faith they placed in what they considered incontestable achievements of scientific advancement in the field of human sciences, especially psychology. (CARVALHO, 2005, p. 94).

Therefore, it is perfectly plausible to understand that the adherence and resistance of teachers operated in the confrontation of a hygienist and New School perspective in the

1930s with other influences, such as those of the Catholic, Presbyterian, Methodist, military education, which have caused a number of hybridisms, as we reported here in the case of the debate on eugenics in the hygienist intervention. Yet, it is also plausible to glimpse that the increase in the technical apparatus which involved the hygienist initiatives, especially in Fernando de Azevedo and Anísio Teixeira administrations, attests an increase in state intervention in public health and education, which undoubtedly contributed to a reform of habits related to hygiene and body education, with the execution of a number of strategies, such as lectures, medical and dental appointments, visits to schools and households, exams, vaccinations, and even surgeries.

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