

Tuberculosis, Medicine and Politics: Public Health in the Early Republican Turkey

This paper explores health policies in Turkey in the 1930s focusing on the case of tuberculosis. The 1930s was the recovery period of Turkey after the wars that began in 1912 and ended with the foundation of the Republic in 1923. Health policies in this period were defined by the population problem, which designated the harmful effects of the wars to the quality and quantity of the population. People living in Turkey were within war conditions for a decade until 1923, when peace was finally secured. 1920s and 1930s indicated the construction of a new regime, whose leaders and elites were the pioneers of a project on the creation of a new Republican generation, through nationalism and modernism, forming heterogeneous, loyal citizens.

The period in question was the time in which a new regime was being settled. The leaders and elites of this regime were the pioneers of the creation of the new Republican generation, whose male population had almost disappeared, and female population was located in a central position for the birth and education of new children to compensate those dying in great numbers. This new generation would form the loyal citizens of the Republic, the manpower for the economy, and soldiers for the army. For this, a sanitary reform was needed.

Within this context, the paper examines the case of tuberculosis as an important part of the struggle against contagious diseases, which was on the agenda of the sanitary reform of the regime. Tuberculosis, syphilis, malaria and trachoma were the most destructive diseases of the post- World War I period in Turkey. In addition to these, the increased rate of child

deaths due to malnutrition and the insufficient number of sanitary institutions and staff had detrimental effects on the demographics of the period.

The sanitary reform of the 1930s aimed to overcome the population problem and improve the sanitary conditions of the population. However, this target was not easy to reach due to financial shortcomings. Thus, it was realized by the direct and indirect intervention of the state. The state formed sanitary institutions like hospitals, and trained health professionals. For public education about hygiene, nutrition and daily habits, and for the prevention of epidemics, the regime profited from voluntary associations, as well as its own resources. The coexistence of state institutions and sanitary institutions went on until the transition to the multi-party regime, which took place after 1946. With the state's limited capacity to reach the ideal capacity of the population and its rendering that duty to semi-official associations by giving subsidies, the idealization of everydayness in terms of sanitary practices, together with the formation of the social state in Turkey, was accomplished through legal proceedings, reconstructing sanitary institutions, and public discourse.

Because sanitary issues gained such an immense importance, so did physicians, the professional class concerning health. The early Republican period was very susceptible to the acquisition of special status for some social groups, since a new regime was being formed. Physicians were one of these. Through their medical knowledge, they were able to position themselves in a higher position. They made themselves the teachers of the ordinary people via such means as conferences, journals, books, and pamphlets.

From the articles written by physicians, it was seen that they identified themselves with the ideology of the regime, and were in a position to spread this ideology to the people. While performing propaganda – a term used by the physicians in a positive sense,

with the idea that propaganda was a synonym for public education, not only in medical field, but also in ideological one,- they were not only positioning themselves within the regime. From their experiences and their writings, it seems that they themselves believed in the prevalent ideology.

To increase the population meant to redefine family, and the role of woman within the family. Family was defined as the nucleus of the population, where basic roles were acquired. It belonged to the society, so did its children. Women were encouraged to marry and have children, bachelorhood was strongly discouraged, and dissolving a marriage was almost condemned. Forming a family and expanding it were presented as national duties.

In the case of tuberculosis, as well, family and the survival of children were given priority in the struggle. Public education was given first of all in schools, believing that children would transfer the information given in schools to their families. In addition, women were taught to obey hygienic rules, to have as many children as possible, and to avoid abortion. The communicable character of tuberculosis was stressed, and creating a healthy environment, with fresh air and sun, was recommended, sanatorium treatment was given primary importance. Measures like medical examination before marriage targeted the prevention of the spread of tuberculosis.

However, as seen from both the institutional struggle against tuberculosis, and the public education about the disease via sanitary journals, it is observed that during the 1930s, the responsibility was given to the individual. The articles of the journals and speeches on the radio emphasized that obeying to hygienic rules was also a national duty. Through hygienic suggestions, an ideal modern man was to be created. This man was to obey sanitary rules; he was physically fit, and mentally healthy. By giving the responsibility to the individuals, the regime sought to diminish the financial burden of the struggle. The

physicians were trying to create a public awareness about the personal prevention of the disease. Voluntary societies were cooperating with state institutions; being even more active sometimes.

The history of the struggle against tuberculosis in Turkey is a history of a transition from semi-official, voluntary societies to a fully organized, nationally defined and officially-governed sanitary entity. The first steps in the struggle against tuberculosis were taken in the Ottoman Empire. The regime of the Early Republican Turkey took this modernization project and transformed it into a modernizing-nationalist project. That is why sanitary developments that had already begun to be considered as a problem of public health were turned into a medium of enlarging the sphere that the nationalist ideals could reach. Nevertheless, for economic reasons, the state was able to fulfill this duty of maintaining the health of the population through subsidizing voluntary societies during the single-party period.

During the first period of the struggle, that is the struggle carried out through voluntary societies until the late 1940s, we see the foundation of sanitary institutions, public hygienic education through radio, press media and schools, and the education of the qualified staff. However, these are generally voluntary and unorganized works, insufficiently supported by state. The result has been an accent given to the individual, who needed to preserve his/her health against the bacillus of tuberculosis. The actual struggle against this disease was made under the organized and determined body of the state. With the pervading medical institutions like tuberculosis hospitals, and dispensaries, the medical staff that was increasing in number, the vaccination and stamp campaigns, propaganda activities, the congresses, and the detailed laws, tuberculosis was brought under control and stabilized finally in the 1970s.