REFLEXIONES

Dra. Graciela Rodríguez Ortega

Miembro del Comité Científico de la Revista de Patrimonio: Economía Cultural y Educación para la Paz de la UNAM.

Graciela Rodríguez fue una incansable promotora de la psicología política y en especial, de los derechos humanos, la dignidad de la persona humana y en particular, del Programa de Patrimonio Cívico Cultural y Combate a la Pobreza (MEC-EDUPAZ) en el que se funda y sostiene la presente plataforma de divulgación científica.



DRA. GRACIELA RODRÍGUEZ ORTEGA IN MEMORIAM

Por Mariela Fletes Costa Rica

Por su destacada e incansable labor como primera directora de la Facultad de Psicología de la UNAM en 1981, y en 2004 profesora emérita de la misma.

Designada en 1997 como Miembro de la Junta de Gobierno, sobresale el haber fungido como Secretaria Ejecutiva del Consejo Consultivo de Ciencias de la Presidencia de la República,

Coordinadora de asesores del Consejo Nacional de Ciencia y Tecnología (CONACYT), Miembro de la Comisión Nacional de Arbitraje Médico, así como Miembro Consultivo de

la Comisión Nacional de Derechos Humanos, además de participar como miembro del Consejo Consultivo de la Comisión de Derechos Humanos ante el Senado de la República.

Reonocimiento del Premio Sor Juana Inés de la Cruz.

Académica pionera, persistente y comprometida con los grandes retos que enfrenta México

"...lo único que se me ofrece es que te encuentres llena de entusiasmo...", fueron las últimas palabras que me enviara por vía electrónica mi mentora y amiga, a quien cariñosamente llamaba desde hace algunos años "Tía Chela"

Conocí a Graciela Rodríguez una tarde en Cartagena de Indias, Colombia, al finalizar una sesión de trabajo en un congreso. Se acercó, me habló de mi país y me felicitó por el trabajo realizado. Me comentó que tenía un hijo viviendo por acá, que había nietos y que posiblemente nos visitaría pronto.

A diferencia de muchas de las personas conocidas en actividades de esa índole, donde la relación enfría conforme pasa el tiempo, con ella fue al revés.

Lo que empezó como una relación casual y meramente profesional, se transformó en una relación de amistad, que se tornó familiar, de confianza y de respeto mutuo. No existían las distancias físicas, generacionales, geográficas o académicas. Para Graciela una amistad era un tesoro, una familia por escogencia, un pétalo de una flor que se guarda para recordar lo irrepetible de los momentos. ... Guardaba ella con mucho cariño y cuidado un conjunto de pétalos de las tantas flores que le regalaron a lo largo de su vida...

Sentarse a tomar un café, comer, ir de compras, pasear y conversar con Graciela, eran actividades en las que el tiempo se escurría por las agujas del reloj. Podía haber muchísima seriedad en los

Fiel creyente de los seres humanos, a la Dra. Graciela Rodríguez Ortega no le gustaba lo que hacía, ¡le encantaba! Académica pionera, persistente y comprometida con los grandes retos que enfrenta México.



Durante la Inauguración del Seminario Interdisiciplinario de Educación para la Paz, y Patrimonio Cívico-Cultural y Natural. Acompañada por la Arq. Olga Orive Bellinger Presidente del Icomos Mexicano y Miembro del Comité Ejecutivo del Consejo Internacional de Sitios y Monumentos, Organismo « A » de la UNESCO.

TESTIMONIOS Mariela Fletes 259

temas o situaciones, pero siempre sabía cómo hacer para que hubiera humor, risas y esa picardía suya que le era tan característica.

Con ella no existía la aburrición, siempre había aprendizaje, podíamos igual pasar una tarde en Antares o en Gandhi de Miguel Ángel de Quevedo. Poco importaba el lugar, lo que ella enseñaba era cómo ser amiga, cómo hacer sentir bien a los demás, cómo manifestarte de todas las formas posibles que te quería. Si a esto le sumábamos un buen libro, un consejo profesional o la idea de una próxima investigación, estábamos hablando de Graciela Rodríguez. Esa cuya humildad la caracterizaba, la misma que reía diciendo no merecer su premio como Profesora Emérita de la UNAM, y me decía, "... ¡ha de ser por vieja 'sobrina' se equivocaron y querían decir profesora decrépita!"

Graciela trasciende las distancias, desde hace décadas, desde que yo ni idea tuviera que la llegaría a conocer. Ella ya destacaba como psicóloga experimental cuando yo nacía; ya corría autos cuando yo aún no vivía, posiblemente cantaba sus rancheras desde antes de nacer.



Con el Dr. Narro Robles, Rector de la UNAM.

Su aporte a la psicología y a su país es de todos conocido. Innumerables premios y reconocimientos le fueron entregados en vida; pero lo que tal vez no sea tan sabido, es que si bien es cierto fue conocida en muchísimos lugares, su influencia, alcance y conocimiento llegó también a lugares pequeñitos y en vías de desarrollo como Costa Rica.

Durante los últimos tiempos se vió afectada por diferentes padecimientos, crónicos la gran mayoría de ellos. Era frecuente que me comentara sobre sus dolencias o sufrimientos por algún motivo, destacando siempre el distanciamiento con sus nietos que viven en Costa Rica. Soñaba con poderlos ver con mayor frecuencia... Ella, la que hacía invisibles los kilómetros, era víctima al mismo tiempo de ellos. Sin embargo, a pesar de los pesares tenía una fortaleza ejemplar, no se doblegaba por nada, siempre sabía sacarle energía y positivismo a la peor de las situaciones, era de las personas que dejaba sus problemas por ayudar y aliviar a quienes estaban a su alrededor.

¡Qué difícil Tía Chela, hacer una semblanza tuya!

Una persona que abarcaba tanto, que me enseñó el valor de la verdadera amistad, que me impulsó a buscar lo mejor en lo que hiciera, que me motivó a nunca dejar de estudiar e investigar.

Quien me abrió las puertas de su casa, de la Sociedad Mexicana de Medicina Conductual, de la UNAM y como si esto fuera poco, me dejó el corazón lleno de amor por México y por



A nombre de los psicólogos cubanos de la salud, hacemos llegar a familiares y colegas mexicanos nuestro profundo pesar por el fallecimiento de la Dra. Graciela Rodriguez Ortega, verdadero ícono de la Psicología en el hermano país de México. Deja una herencia cultural no sólo en el campo de la Psicología, sino en el corazón de muchos coterráneos y colegas de otros países que la conocieron y le admirarán siempre. Su recuerdo y su obra siempre ayudarán a guiar nuestra actividad cotidiana.

Sociedad Cubana de Psicología de la Salud/ Grupo Nacional de Psicología del Ministerio de Salud Pública



las grandes personas que me presentó, a Y como me dijera un día, "hace daño estar familia mexicana.

por copiar y la creencia de que siempre se creerlo; me deja el valor de la verdadera rancheras en su nombre. amistad, la que es incondicional, la que no pide nada y siempre da, la que se resume en ella, en Graciela Rodríguez.

quienes hoy en día puedo llamar mi triste, por lo que vete a escuchar unos mariachis...", así que tomo fuerza en su Deja una huella imborrable, una fortaleza ausencia física y guardo sus enseñanzas para aplicarlas en mi vida, y claro, de vez puede ser mejor, lo único que se ocupa es en cuando, ir a escuchar algunas



Semblanza Curricular

La Dra. Rodríguez, obtuvo el grado de Doctora en Psicología General Experimental en la Facultad de Psicología de la UNAM. Desarrolló estancias postdoctorales en las universidades de Texas, en Austin, y de Florida, en los EE.UU. Como primera mujer directora de la Facultad de Psicología, entre 1977 y 1981, impulsó a la Psicología mexicana en el ámbito internacional.

Trabajó como docente e investigadora en la Facultad de Psicología, desde 1966, en donde impartió más de 20 diferentes asignaturas de nivel Licenciatura, Maestría y Doctorado. A su vez, fue docente de las Facultades de Medicina y Filosofía y Letras de la UNAM, Universidad Iberoamericana, Universidad Anáhuac, Universidad Autónoma de Yucatán, Universidad de Texas Medical Branch at Gaveston y The University of Texas, en Austin.

La Dra. Rodríguez desempeñó los siguientes cargos académicos: directora general de Orientación Vocacional, UNAM, y miembro de la Junta de Gobierno de la UNAM, además de diversos cargos administrativos, entre ellos, sobresalen el de secretaria ejecutiva del Consejo Consultivo de Ciencias de la Presidencia de la República, Miembro de la Comisión Nacional de Arbitraje Médico, Coordinadora de Asesores del Consejo Nacional de Ciencia y Tecnología (CONACyT), miembro del Consejo Consultivo de la Comisión Nacional de Derechos Humanos y representante del Chair and Organizational Liason Committee of the International Society of Behavioral Medicine.

Con la finalidad de desarrollar la formación de recursos humanos en Psicología, en colaboración con un grupo de investigadores, la Dra. Rodríguez creó la Residencia en Psicología de la Salud en la Facultad de Psicología. Asimismo, proporcionó asesoría en la creación y desarrollo de la Residencia en Psicología en la hoy FES Zaragoza y en la hoy FES Iztacala (antes ENEP), y también a la creación del Diplomado Interdisciplinario de Bioética, en conjunto con las Facultades de Medicina y Filosofía y Letras,

Tuvo a bien participar como consultora y comentarista en numerosas actividades científicas y académicas de gran impacto y beneficio en México y alrededor del mundo, acerca de temas relevantes en las Ciencias del Comportamiento. Sus principales líneas de investigación fueron Medicina Conductual, Bioética,

Reconocida como investigadora nacional de nivel III dentro del Sistema Nacional de Investigadores del CONACYT y Profesora Emérita de la UNAM.



Académica, investigadora y defensora de los derechos humanos, pero ante todo, mujer de gran humanismo y comprensión de la naturaleza humana que transmitía y contagiaba alegría y desparramaba lo que Chela Rodríguez siempre supo dar: VIDA.

La doctora Graciela Rodríguez tiene en su haber más de 80 publicaciones, fue también la primera editora de la Revista Mexicana de Psicología, miembro del comité editorial de la Revista de Patrimonio: Economía Cultural y Educación para la Paz (MEC-EDUPAZ) y fundadora de la Revista de la Sociedad Mexicana de Medicina Conductual, ambas correspondientes al catálogo de journals electrónicos de la UNAM.

Consejera de la Comisión Nacional de los Derechos Humanos, con especial inclinación hacia la defensa de los derechos de las mujeres y los grupos vulnerables, la Dra. Graciela Rodríguez Ortega fue una académica, investigadora y defensora de los derechos humanos, pero ante todo, mujer de gran humanismo y comprensión de la naturaleza humana que transmitía y contagiaba alegría y desparramaba lo que Chela Rodríguez siempre supo dar: VIDA.

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- Miembro Del Consejo Consultivo De la Comisión Nacional De Derechos Humanos(http:// www.cndh.org.mx/sites/all/fuentes/images/banners/ esquela.jpg)
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ANEXO:

A continuación se reproduce la entrevista publicada en 2010, por el Boletín No. 16 de la **International Society** of Behabioral Medicine (ISBM), de la cual formaba parte del Consejo Directivo (Chair) encabezando la Cartera de Enlace y Organización Internacional

Interview with Graciela Rodriguez, PhD

This special series covers individuals who are long-term members of ISBM and have contributed to behavioral medicine in a significant manner.

Q1. Graciela, thank you so much for agreeing to be the fourth interviewee in this series. How did you get into research?

A1. I think the roots go back to my father, who was a physician in Ciudad Juárez, Chihuahua in 1940; he was my main mentor, also my grandfather who was a teacher in rural areas and worked as secretary of the National Polytechnic Institute's School for higher education. My grandmother and my aunts were all teachers. My father was a most enthusiastic man, beyond his times, always helping those who were in need; I used to help him in surgery since I was 15. Of course, I was a spoilt child, a rich child who had the chance to meet James Dean and Elvis Presley. Hence, my interest in Medicine and care to people who are vulnerable and have low income. On my mother's side, my grand mother was called Laura Ingalls; her ancestors were English who came to Veracruz to build the railway in the port. I think that the most important figures for me in my family were women: strong, dynamic, certainly not run of the mill.

Q2. Could you please tell us about your educational and scientific background? Where do you come from scientifically and how did you get into the field of behavioral medicine?

A2. After I graduated in the school of Psychology in Mexico's University, I was asked by Dr. Rogelio Díaz Guerrero and Dr. Wayne Holtzman to go to the Menninger Foundation. There, it was my privilege to work with Dr. Gardner Murphy, Abraham Maslow, Riley Gardner, John F. Santos in a research project called "Reality Testing". At the time, the Menninger Clinic was renown in the world of orthodox psychoanalysis and I think it was there that I learnt to respect and study different scientific schools, while looking for similarities and differences between them. After this wonderful experience, we came to the conclusion that it was necessary for me to get my Ph.D and I chose the School of Psychology of the Texas University in Austin. After a year and a half there I came back to Mexico, went to Medical School again, got married, had two children, Ramón and José Luis, and for three years was basically dedicated to them. Afterwards, I joint the faculty in Mexico at the National University of Mexico, I think this had been the best choice in my life, working with students from different levels, from various social classes has meant for me an experience comparable to no other. For 44 years, and through many different subjects, I have worked with students who now occupy prominent places in the discipline of Psychology, in different educational centers, and in the government. The hardest work of my life was being the first woman dean in a school with 5000 students, 600 teachers and 250 workers, who were on a strike dictated by the self governing students. Notwithstanding this, I am not mistaken when I say that I was the dean with the best team, because at the time psychologists who had studied in the US and Europe, in the world's best universities, were



coming back to Mexico. Those were the roots when dealing with subjects such as Clinical Psychology, health scenarios and my own training as general experimental psychologist helped me have a broader horizon when solving all kinds of problems, for instance, public policies, organization of institutions, organiza-

tion of societies, congresses, etc. My lectures were not limited to my area of priority which was self control and my great friend Michael Mahoney taught me the scientific and conceptual basis of a discipline that encompassed more than what I had learnt and investigated that far: behavioral medicine.

I must also say that Steven Weiss has given ample support to the development of Health Psychology and of Behavioral Medicine. Also, we appreciate the visit with Brian Oldenburg who welcomed us, me and my colleagues, as true friends in Brisbane, Australia. Similarly, we thank the Executive Committee and the Government Council for their help to the First Latin American Meeting on Behavioral Medicine in Mexico, June 2005.

Q3. Could you tell us how behavioral medicine developed in Mexico (and Latin American in general, if it's not too long a story to tell)?

A3. To speak of the development of Behavioral Medicine in Mexico, we must make a parallel of what was happening in other countries. As an example, in the early '60s, Víctor

Alcaraz, Emilio Ribes, Antonio Gago, Florente López and Serafín Mercado began the analysis of behavior in Mexico when they were at the Universidad Veracruzana promoting scientific psychology based on an experimental analysis of behavior.

> of Behavioral Medicine in Mexico undertaken by Xóchitl Gallegos and Victor Alcaraz in the '80s, when they applied biofeedback to treat migraine, facial heart arrythmia, palsy, sphincter control and certain paresis and types of epilepsy (Alcaraz, 1977; Alcaraz, Castro-Velázquez, De la Cruz & Del Valle, 1981; Gallegos & Torres Torrija, Gallegos, Medina, 1983;

> > Espinoza & Bustamante, 1987).

There were significant breakthroughs

In the Laboratory for Cerebral Plasticity, coordinated by Jorge Palacios and founded in 1984 in the School of Psychology of UNAM, biofeedback was also used to treat various forms of neuromuscular paralysis very successfully.

In the Zaragoza National School of Higher Studies (UNAM) Luis Flores Alarcón from Colombia headed a work group whose goal was to create a line of investigation on the clinical application of instrumental conditioning of autonomous responses. This group later initiate conjointly with the school of psychology, the most representative at that time, and the school of psychology in Iztacala campus the



program of health psychology jointly launched by representatives by Lilia Duran and myself.

This program was enriched by the participation of Victor Alcaraz and Ana Eugenia Díaz de León, from the School of Psychology, who jointly developed the first research project on the conditioning of brain electric rhythms for the treatment of epilepsy (Rojas, 2002). Seminars were later organized with the participation of Palacios, Rodríguez, Sánchez Sosa, Rodríguez c., Domínguez and Mercado.

During the late '80s, the program had gradually and significantly changed; Mario Rojas Russell took over its direction and he did research on diabetes mellitus and body weight as risk factors (Anaya, Carvajal, Charles, Hurtado, Mayor, Rojas y Sánchez, 2002), organ and tissue transplants in the Mexican population (Rodríguez, Pérez, Rojas, Reyes y Méndez, 2004), as well as writing relevant documents on clinical psychology and health (García, Rojas, Vargas, 2001; Rojas, 2002; 2005). It is worth mentioning that presently this School has a Unit of Behavioral Cardiology where interdisciplinary research on psychosocial factors that favor the appearance and development of heart diseases is done. (Figueroa, Domínguez, Ramos del Rio, 2009).

Rocío Hernández Pozo founded the School of Psychology in the Iztacala Campus (UNAM) a Laboratory of Complex Human Behavior and launched research projects related to the evaluation of heart risk factors with computerized systems (Rodríguez, Hernández-Pozo, Álvarez y Negrete, 1989); on the creation of an expert computerized system of evaluation (Rodríguez, Hernández-Pozo, Álvarez and Negrete, 1992); a computer program to assess tolerance to frustration in Mexican athletes (Hernández-Pozo, Serrano, Méndez, Montes y Rodríguez, 1992); as well as teaching healthy behavior through virtual scenarios (Hernández-Pozo, Harzem v Rossi, 1990: Hernández-Pozo, 1998).

In parallel, work to contribute to Behavioral Medicine was being undertaken at the School of Psychology of UNAM. Such is the case of Benjamín Domínguez Trejo, who has worked on management of chronic pain (Domínguez, 1995; 1999, 2000), stress producing events related to the onset of psychological disorders and diseases (Domínguez, 1996, 1998, 2002), in the area of psychoneuroimmunology (Domínguez, 2000, 2001); as well as biofeedback (Domínguez, 2000, 2001). These works have been nationally and internationally recognized.

In Latin America, Brazil has a predominant role because the discipline is called hospital psychology. In Venezuela and Colombia, courses of Behavioral Medicine have been set up.

However, we are bound by one same factor, a lack of resources to undertake longitudinal studies, to attend meetings on the subject which, contrary to Clinical Psychology and Health Psychology, is a new field. Behavioral Medicine is not sufficiently known by decision makers who are still not ready to fund attendance to meetings and congresses. Notwithstanding, both Mexico and Venezuela are known for organizing symposia, meetings and workshops to disseminate the findings of Behavioral Medicine.



Q4. You have been the second female member of the Governing Board of your University, and the first woman as Dean of the School of Psychology. These are great accomplishments in a male-dominated research world and a testimony to your research excellence. How do you see gender issues in research today, both in general and in Latin America specifically?

A4. Conditions in Mexico for women scientists have been changing little by little; an example of this is that we had the first chairperson for the Academy of Science in Mexico, Dr. Rosaura Ruiz, and the chancellor of the National Polytechnic Institute is also a woman, while the number of deans in various universities of Mexico and other parts of Latin America has been increasing. We must remember that Chile had a woman president. 30% of members of Congress in Mexico, deputies and senators, are women. Nevertheless, there still is a difference in wages between men and women. According to ECLAC, women get 30% less than men. When I worked as chief of consultants for the Director General of Mexico's Science and Technology Council (CONACYT), I was able to open up support for psychologists in Mexico. I also organized the Science week for primary school students that is still taking place in primary schools across the country, in a joint effort with research institutes.

Q5. You have served in many official capacities in Mexico and thus greatly influenced health policies in your home country. As examples, you had the position of Director General for Human Resources in the Health Services Coordinating Department of the President of Mexico and you were Executive Secretary in the Consulting Council of Science and Technology of the President of Mexico. Could you briefly summarize your roles? Do you think it is necessary as a researcher to actively influence health policies?



Neal Miller and Graciela Rodriguez at the Latin American Congress in 1967.

A5. First of all, one has to have a sound scientific training to be able to work in these capacities, because the job is not administrative but geared to creating public policies for the government, in this case, Mexico's government. I worked in the commission charged with defining the National Health System, under the direction of Dr. Guillermo Soberón, former chancellor of UNAM. In this project I participated as Human Resources in Health Services, and consultant for Mental Health, from 1981 to 1982. After that I was appointed executive secretary for the President's Consultative Council for Science and Technology. My main assignment was to take the president's questions directly and then consult with the country's winners of the National Science Awards to give an answer to the president's queries. I had to organize the various commit-



tees according to areas of research and make results known through books, conferences, congresses, etc. State Secretaries were previously consulted about all these problems which had to do with electric power, social sciences, astronomy. This obviously gave me a broader vision of different disciplines and although the work was most challenging, I always had the understanding disposition of scientists, because life has taught me to say "I don't know, let me find out", even to the president of the Republic.

Another significant job I did was as executive secretary of the National Human Rights Commission, and this gave me the opportunity to meet many ombudsmen from all over the world and to take part in activities of WHO, UN and OECD as representative of Mexico's Commission. This was certainly not an easy task, but we were able to accomplish significant things, like pioneering the defense of indigenous peoples' human rights. I could do this while still being professor at UNAM, because these are assignments by the President of Mexico and thus you can leave the university for some time and attend to them. I have participated in many commissions in the health sector, the social and political arenas, always trying to implement public policies related to human behavior. Presently I am working with the National Human Rights Commission in the field of health, as consultant mainly on mental health and human rights, family violence, home violence, public health problems, jail inmates' problems, crime prevention, etc.

Q6. Where do you think is behavioral medicine as a field headed? In a more and more specialized world, is behavioral medicine too broad a field or could also be a chance to encompass various smaller research fields?

A6. Nowadays, the term behavioral medicine is much confused with behaviorism and we have to continue explaining the definition of our discipline. After we define and show evidence, scientists from other disciplines find it easier to understand the development of our subject matter. However, since in Mexico Health Psychology is well developed, it is not easy to find professionals with multidisciplinary characteristics who can perform easily in behavioral medicine: this means we have to be constantly promoting behavioral medicine in all cases. To my mind, it has been easier in UNAM's School of Medicine that has more than 14 programs in different areas. One of the first works is on Bioethics and Behavioral Medicine, which we have developed in the Bioethics program of the School of Medicine.

I think that Behavioral Medicine will tend to split up, which is already happening, for instance in the area of cardiovascular, physical activity, obesity; nonetheless, I believe that in Mexico and Latin America we still need to implement better tools to take measurements according to the discipline and more resources for longitudinal research. I think all these disciplines that have to do with behavior should be called behavioral sciences (genetics, human genetics, complex information systems, systems based on empirical evidence, etc.).

Q7. On a more personal note, what will the future bring for you? You have just completed a term as Chair of the Organizational Liaison



Committee. Any new involvements planned in ISBM? As a Professor Emeritus, how does your everyday work look like?

A7. I completed as Chair of the Organizational Liaison Committee. My relationship with ISBM will be, as always, one based on recognizing the merit of the most outstanding scientists in the International Society and I hope this association recognizes that countries are different, with different levels of development and that it becomes more democratic in the best sense of the word, because so far I feel it is much oriented toward European countries, and to Asian ones. I think that the Society should be organized regionally, and that there should be more communication between the various committees. Finally, I believe all these changes will be done in the future.

My work as Professor Emeritus is just like the work of any professor in the University, we teach, we do research, but we do have a broader recognition in the part of the university community and a little more possibility to choose our activities, apart from representing the UNAM in different events.

Thanks so much for your time, I really appreciate it!



Graciela Rodríguez-Ortega, Ph. D., is a Professor Emeritus at the School of Psychology at National University of Mexico. She is also a guest professor at several Schools at her university and at other Mexican, Latin American Universities and in others parts of the world. Her research has focused on multidisciplinary fields of Health Psychology, Behavioral Medicine, Bioethics, Human Rights and Psychology and Law, among others. She served as founder and president of the Mexican Society of Behavioral Medicine. At the present time she is responsible of International Affairs in the same society. She has just finished her term as Chair of the Communication and Liaison Committee of ISBM.

