R Registration

MAY 1 • THURSDAY			
8:00am – 8:00pm	0	AAHM Conference Art Guide: Medically-Themed Works of Art in Enjoy medically-themed works of art in the collections of the Isabella Stewa Harvard Art Museums, and the Museum of Fine Arts, Boston using this deta	art Gardner Museum, Self-directed
		Information gathered by Christine Bentley (PhD). Assisted by: Jen Thum (P (EdM), Corinne Zimmermann (MA, MEd), and Dabney Hailey (MA). Design	-
12:30pm – 5:00pm	М	AAHM Council Meeting Annual in-person meeting of the AAHM Council. Lunch is served.	Hampton (Sheraton, Level 3)
1:00pm – 6:30pm	R	AAHM Registration Come to the AAHM Registration Desk with your questions or needs for assi Visitors Guide tab in Sched for useful information.	Grand Ballroom Foyer (Sheraton, Level 2) istance. Please see the AAHM
		Wi-Fi Network: Marriott Bonvoy Conference Access Code: AAHM2025	
		A lactation room is available on the 3rd level of the hotel. Ask for the key at registration desk for the key.	registration. Please see the AAHM
		Gender-neutral restrooms are available on the 3rd level of the hotel near the	e Commonwealth Ballroom.
2:00pm – 2:30pm	М	Sigerist Circle Business Meeting	Gardner (Sheraton, Level 3)
3:00pm – 5:00pm	S	Sigerist Circle Panel: "Health Activists Meet the Moment: Sharin Speakers: Jason Chernesky, Jason Glenn	ng Knowledge, Taking Action" Gardner (Sheraton, Level 3)
		1. Health Activists Meet the Moment: Sharing Knowledge, Taking Act	tion
		President Trump's various executive orders and actions since his inaugurat disrupted the work of federal workers, educators, and healthcare workers. T made immigrants, people of color, women, poor people, and queer and tran As we near the end of the first hundred days of President Trump's second to activists from the realms of medicine, public health, public policy and educa attacks on health and healthcare. Panelists on this roundtable will share the examples of how they and others are responding to the political moment, an be done.	These attacks, in turn, have also ns people more vulnerable to danger. term, the Sigerist Circle gathers health ation to take stock of the recent eir perspective on the crisis, offer
		Roundtable Panelists: Jason Chernesky, The Organization of American Historians' Federal En Project Jason E. Glenn, The Consortium for Humanities, Arts, and Social Scien (CHASSME) Gregg Gonsalves, Defend Public Health Tiffany Joseph, Author of <i>Not All In: Race, Immigration, and Healthcare</i> Nancy Krieger, Organizer, Data Preservation Hackathons Jocelyn Sargent, The American Medical Association's Center for Health	nces in Medical Education

	S	Special Plenary Session: Engaging in the De	ebates about the Uses of Race in Medicine
		Moderators: David Jones	Commonwealth Ballroom (Sheraton, Level 3)
		Speakers: Evelynn Hammonds, Aaron Panofsk	y, Jenny Reardon, Michael Yudell
		Special Plenary Session funded by the Doris Du	ke Foundation
		"Engaging in the Debates about the Uses of Rac	e in Medicine"
		Moderator: David Jones, Harvard University	
		Evelynn Hammonds, Harvard University	
		Aaron Panofsky, University of California, Los Angele	9S
		Jenny Reardon, University of California, Santa Cruz	
		Michael Yudell, Arizona State University	
			ace in medicine have given historians and other social
		of the complexities of race. The panelists will share	and medical scientists in an effort to enhance understanding what they have learned from their efforts to participate in hopes to launch a discussion with conference attendees that
6:30pm – 8:00pm	N	of the complexities of race. The panelists will share these important and difficult discussions. The panel	what they have learned from their efforts to participate in
6:30pm – 8:00pm 8:00pm – 9:00pm	N	of the complexities of race. The panelists will share these important and difficult discussions. The panel will continue throughout the sessions that follow.	what they have learned from their efforts to participate in hopes to launch a discussion with conference attendees that
· ·		of the complexities of race. The panelists will share these important and difficult discussions. The panel will continue throughout the sessions that follow. Opening Reception	what they have learned from their efforts to participate in hopes to launch a discussion with conference attendees that Republic
8:00pm – 9:00pm	N	of the complexities of race. The panelists will share these important and difficult discussions. The panel will continue throughout the sessions that follow. Opening Reception Remembering John Parascandola Graduate Student Meeting and Greet The Corner Tavern is .4 miles away up Massachuse	what they have learned from their efforts to participate in hopes to launch a discussion with conference attendees that Republic Gardner (Sheraton, Level 3) The Corner Tavern (421 Marlborough St, Boston, MA 02115, USA) its Avenue from the Sheraton at 421 Marlborough Street in
8:00pm – 9:00pm	N	of the complexities of race. The panelists will share these important and difficult discussions. The panel will continue throughout the sessions that follow. Opening Reception Remembering John Parascandola Graduate Student Meeting and Greet The Corner Tavern is .4 miles away up Massachuse	what they have learned from their efforts to participate in hopes to launch a discussion with conference attendees that Republic Gardner (Sheraton, Level 3) The Corner Tavern (421 Marlborough St, Boston, MA 02115, USA)

B Book Exhibit	K Break C Concurrent Session M Meeting N Networking O On Your Own
R Registration	S Special Session
MAY 2 • FRIDAY	
7:00am – 8:00am	M Bulletin of the History of Medicine Editorial Board Meeting Back Bay B (Sheraton, Level 2) Pick up your breakfast from the Republic Ballroom Foyer and go to your meeting in the Hampton A on Level 3.
7:00am – 8:00am	M Nursing History Reivew Meeting Clarendon (Sheraton, Level 3) Pick up your breakfast from the Republic Ballroom Foyer and go to your meeting in Clarendon on Level 3.
7:00am – 8:00am	M President's New Member and First-Time Attendees Breakfast Berkeley (Sheraton, Level 3) Pick up your breakfast from the Republic Ballroom Foyer and come meet AAHM President Mary Fissell. New members and first-time meeting attendees are encouraged to attend to learn about the association and the annual meeting. Join the meeting with your breakfast in Berkeley on Level 3.
7:00am – 8:00am	N Themed Breakfasts Republic Ballroom (Sheraton, Level 2) Speakers: Eric T. Jones, Alexander Parry, Mindy Schwartz, Ahmed Ragab, Wayne Soon, Jerry Kantor Themed Breakfasts
	Pick up your breakfast from the Republic Ballroom Foyer and joined the discussion at one of the themed breakfast tables in the Republic Ballroom.
	T1Teaching Relevant Histories of Medicine and Public Health, led by Alex Parry, University of Rochester T2Academic Suppression and Challenges Related to Researching the History of Psychiatric Hospitals, led by Jerry Kantor, Vital Force Healthcare LLC T3The Clio Project - Teaching History in clinical settings and beyond the classroom led by Mindy Schwartz, University of Chicago
	T4Post/Colonial and Global Medicine, led by Ahmed Ragab, Johns Hopkins University T5Medicine in Asia/AAHM Asia Network, led by Wayne Soon, University of Minnesota T6-Beyond Biological and Cultural Determinism: How the History of Medicine Contextualizes the Interplay between Race, the Environment, and Health Inequity, led by Eric T. Jones, Brown University
7:00am – 6:00pm	R AAHM Registration Grand Ballroom Foyer (Sheraton, Level 2) Come to the AAHM Registration Desk with your questions or needs for assistance. Please see the AAHM Visitors Guide tab in Sched for useful information.
	Wi-Fi Network: Marriott Bonvoy Conference Access Code: AAHM2025
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	Gender-neutral restrooms are available on the 3rd level of the hotel near the Commonwealth Ballroom.
8:00am – 8:00pm	O AAHM Conference Art Guide: Medically-Themed Works of Art in Local Museum Collections Enjoy medically-themed works of art in the collections of the Isabella Stewart Gardner Museum, Self-directed Harvard Art Museums, and the Museum of Fine Arts, Boston using this detailed guide.
	Information gathered by Christine Bentley (PhD). Assisted by: Jen Thum (PhD), Brooke DiGiovanni Evans (EdM), Corinne Zimmermann (MA, MEd), and Dabney Hailey (MA). Design by Elmira Bagherzadeh (MFA).

8:30am – 10:00am	S		Grand Ballroom
		Speakers: Osaremen Okolo, Jason Chernesky, Keith Wailoo, E Welcome and Plenary Session	velynn Hammonds, Susan Reverby
		Mary Fissell, AAHM President, presiding	
		Rebecca Kluchin and Johanna Schoen, Co-Chairs, 2025 Program Co	ommittee
		David Jones, Co-Chair, 2025 Local Arrangement Committee	
		Ahistoric Administration: The Crisis of Historical Expertise in U. Emergency Response	S. Health Policymaking, Politics, and
		Chair: Allan Brandt, Harvard University	
		Jason Chernesky, former Food and Drug Administration Historian	
		Evelynn Hammonds, Harvard University	
		Osaremen Okolo, Harvard University	
		Susan Reverby, Wellesley College Emerita	
		Keith Wailoo, Princeton University	
		This roundtable is prompted by an emergency: the unique political mo urgent implications for history, medicine, and public health. Each parti	
		and direct relationship with the federal government: working as a histo serving in the White House Office of the COVID-19 Response during	orian within a critical federal agency;
		groundbreaking archival research that prompted a Presidential apolog panels and committees on the most pressing issues in health equity, I	gy; and serving on expert governmental
		plenary, panelists will place our current political moment within a broa	-
		health; untangle the relationship that historians of medicine and public	-
		practitioners and health policymakers over the course of the twentieth implications of tacit silence from historians of medicine and public hea	
		health, and health equity. Most critically, this roundtable aims to begin	to identify tangible methods for historians
		to engage with local, state, and federal government-offering an impo	ortant frame for the entirety of the 100th
		anniversary meeting of the American Association for the History of Me	edicine.
10:00am – 5:00pm	В	Book Exhibit	Independence Ballroom (Sheraton, Level 2)
	2	Visit the AAHM Book Exhibit. Learn more about the exhibitors here.	
10:00am – 10:30pm	N	Refreshment Break	Grand Ballroom Foyer (Sheraton, Level 2)

C A1. Human Remains in and for Historical Research. What Can We Do? Fairfax (Sheraton, Level 3) Moderators: JoAnn Zeise Speakers: Hugo Rueda-Ramirez, Joanna Radin, Deborah Dubald, Tricia Close-Koenig A1. Human Remains in and for Historical Research. What Can We Do?

Chair: JoAnn Zeise, University of South Carolina

- 1. Hugo Rueda Ramirez, McGill University: *Ethics of Care in the Medical Museum: From Caring About to Caring For* WITHDRAWN
- 2. Joanna Radin, Yale University School of Medicine, and Megann Licskai, Yale University: *Brain Trust: Human Remains and Historical Praxis at an American Medical School*
- 3. Deborah Dubald, University of Strasbourg, and Tricia Close-Koenig, University of Strasbourg: Caring for the Neglected: Writing the History of the Strasbourg Histopathology Collections

This panel will bring together scholars from Europe and North America to address questions related to how historians (can) use collections of human remains – and how they can contribute to questions related to the sensitivities of legacy/historical human tissue collections. Ethical issues related to human remains and human tissues are often discussed within museum studies and anthropology, but there are not many medical historians engaged in the discussions, despite the fact that the questions are historically rooted. Medical historical studies address the history of medical collections and the many facets of death, bodies and medical practices, and this can be a way to confront ethics or questions of contestability.

Medical collections and medical museums are places of heritage and preserve human remains, that is they are places rich in materiality and historicity. Although the origins are always traced to a biomedical collecting way of knowing, their current state and status is varied: from wholly neglected to properly preserved and curated, from scientifically obsolete and isolated from medical spheres to integral place in an anatomy department. In all cases, the notion of heritage, as a common good to be passed on from one generation to the next, can be contemptuous when speaking of human remains, medical or otherwise. Heritage can be criticized for conveying a universalist viewpoint, where in fact human remains are deeply situated. Situated histories are an important part in evaluating and undertaking historical perspectives of medical collections, be it a history of a collection or of the individual preparations in a collection. This panel will bring together ongoing work by historians, the practicalities and difficulties of working with historical human materials, as a means of drawing out just where sensitivities lie and what to do with them.

Chair: Patricia Kruk, University of South Florida

- 1. Lauren Maclvor Thompson, Kennesaw State University: The Comstock Act's Medical Exemption: What Did It Mean?
- 2. Kristen C. Leng, University of Massachusetts Amherst: "We could help each other if we only knew more": Feminist Publications and Pregnancy Loss in the Later Twentieth Century
- 3. Janet Greenlees, Glasgow Caledonian University: *Maternity Care and the Indigent During the Depression: 'without distinction of color, creed or nationality'*

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10:30am – 12:00pm	С	 A3. Roundtable Do Less Harm: Ethical Questions for Health Historians Back Bay B (Sheraton, Level 2) Moderators: Kylie Smith Speakers: Richard McKay, Jonathan Sadowsky, Shannon Withycombe, Melissa Grafe, Barron Lerner A3. Roundtable Do Less Harm: Ethical Questions for Health Historians Chair: Kylie Smith, Emory University
		Richard McKay, University of Cambridge Barron Lerner, New York University, Langone Health Melissa Grafe, Yale School of Medicine Jonathan Sadowsky, Case Western Reserve Shannon Withycombe, University of New Mexico
		This roundtable is moderated by one of the two editors, Kylie Smith, who will set out the background and rationale for the book, and then authors of various chapters will describe briefly their contribution. Richard McKay will reflect on his journey toward becoming an ethical historian; Barron Lerner will discuss issues around the ethics of positionality in the history of medicine; Melissa Grafe will speak to the ethics of human remains collections; Jonathan Sadowsky will talk about developing an ethics of care towards patients and survivors; and Shannon Withycombe will reflect on the challenges of the lack of ethical preparation given to graduate students. We hope to spark a discussion about and engage with efforts being made in AAHM to develop guidelines for a more ethical history of health care.
10:30am – 12:00pm	С	A4. Roundtable Absent and Present: Children's Perspectives in the History of Medicine Speakers: Jason Chernesky, Sandra Eder, Jessica Martucci Gardner (Sheraton, Level 3) A4. Roundtable Absent and Present: Children's Perspectives in the History of Medicine
		Chair: Heather Dron, University of California, Los Angeles
		Sandra Eder, University of California, Berkeley Jessica Martucci, University of Pennsylvania Jason Chernesky, Food and Drug Administration History Office
		This roundtable brings together historians who work at the intersections of the history of medicine, science, childhood, race, gender, and disability. While the history of pediatrics and health have been productive historical fields, calls to include children's perspectives have not animated the history of science and medicine in quite the same way, despite Roy Porter's famous call for more medical history from the "patient's perspective."
		How have those studying the history of medicine and science worked to connect these fields and address the limitations of archival resources? In what ways do categories like race, gender, class, and disability shape children's experiences with medicine and their representation in historical records? How have scholars expanded official archives to better reflect children from diverse backgrounds as historical figures? How can we uncover the perspectives of children from the past, moving beyond the adults who often shaped their lives? What does a child-centered approach look like in the history of medicine, and how can we recognize children as active historical actors?
		To address these questions and themes, this roundtable offers the reflections from five historians of medicine. Sandra Eder examines pediatric hospital records of children with intersex traits to reveal children's experiences in the clinic. She raises questions about patients' 'voices' and the narratives surrounding medical care. Jessica Martucci employs oral histories, disability memoirs, and writings by pediatric nurses to highlight the voices and agency of children in the context of hospitalization after World War II. Jason M. Chernesky examines private patient records of predominantly Latinx or Black children who died from HIV/AIDS, raising critical questions about

erasure, ethics, and the historian's racial positionality. Heather Dron reflects on how we can account for the missing narratives of children, including those with disabilities and adolescents who experienced eugenic sterilizations in California. What are the ethics and obligations of historians who seek to give voice to past trauma?

10:30am –	12:00pm
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С	A5. Roundtable Above and Beyond the Archives: Documenting the Bla	ck AIDS Epidemic
	Speakers: Evelynn Hammonds, Marlon Bailey, Jennifer Brier, Angelique	Back Bay C (Sheraton, Level 2)
	Harris, Polina Ilieva	
	A5. Roundtable Above and Beyond the Archives: Documenting the Black AID	S Epidemic

Chair: Antoine S. Johnson, University of California, Davis

Evelynn M. Hammonds, Harvard University Angelique Harris, Boston University Jennifer Brier, University of Illinois-Chicago Marlon M. Bailey, Washington University, St. Louis Polina Illieva, University of California, San Francisco

The medical historian Ayah Nuriddin has a phrase "silences and violences" about the ways in which health inequities affecting African Americans largely go ignored. Many poor and working-class people's experiences are not documented in archive records. To tell such communities' stories accurately has required going beyond institutional archive collections. In this session, we explore the trials and tribulations of covering groups who lack archival records and how to tell their stories ethically. By making this a roundtable discussion, we anticipate audience members whose research interests include HIV/AIDS and health activism to share their past and current methods. We also intend to converse on how we as researchers can continue to change our field by collaborating with archivists, organizers, and those closely impacted by our research topic.

Dr. Evelynn M. Hammonds was the first African American historian covering the Black AIDS epidemic. As a participant, she will discuss the challenges of covering a new disease in real time from a historian's perspective. Similarly, Dr. Angelique Harris's fieldwork with Black religious leaders on AIDS, gender, and sexuality in Black communities helps scholars contextualize leadership and marginalization among African Americans. As academic scholars, we must consider our target audiences and their access to our material. Dr. Jennifer Brier's oral history project "I'm Still Surviving" offers ways in which one can see the women's histories, hear their voices, read about their lives, and teach the project.

Dr. Marlon M. Bailey's work with Black gay men and men who have sex with men (MSMs) who do not identify as gay or bisexual in underground economies offers a new lens through which to understand sexual health and Black men's kinship networks. A partnership with the University of California, San Francisco's Center for AIDS Prevention Studies (CAPS) provided Bailey the opportunity to conduct such important research. Polina Ilieva, UCSF's head archivist, has worked exhaustively with local organizers and scholars to expand the university's AIDS archives. Together, the contributors will discuss their past and current experiences of such work, with room for conversation on future directions in histories of HIV/AIDS and AIDS activism.

10:30am – 12:00pm	C A6. Medic	al Provider's Impact on Patient Care	Back Bay A (Sheraton, Level 2)
	Moderator	s: Christopher Willoughby	
	Speakers:	Chang Xu, Yinghua Luo 罗英华, Robin Rohrer, Lesli	e-William Robinson
	A6. Medica	I Provider's Impact on Patient Care	
	Chair: Chris	topher Willoughby, University of Nevada, Las Vegas	
	1. Chang	Xu, Rice University: Who's the Doctor? The Physician-En	nperor-Patient Triad in Late Imperial China
	0	a Luo, Nankai University: "Why Can't I Live the Same Kind of Nurses in Modern China	d of Life as Other Girls": The Multifaceted
	3. Robin L	Rohrer, Seton Hill University: Advancing the Discipline of	f Pediatric Oncology: Historical Roles of
	Pediatr	c Oncology Nursing in the United States, 1930s to the Pre	esent
	4. Leslie V	Villiam Robinson, Harvard University: Soldiers' Minds, Wo	orkers' Lives: Neuropsychiatric Legacies
	from W	orld War I to the Workplace	

12:00pm – 1:00pm	К	Lunch BreakTry the "Grab and Go" Grand Ballroom Foyer (Sheraton, Level 2) For a quick lunch, try out the "Grab and Go" available from the Sheraton in the Liberty/Grand Ballroom Foyer area.
		Hot honey chicken, brussels sprout slaw, sweet pickle chip, sub roll @ \$12.00
		Grilled portobello tzatziki, grilled red onion, shredded carrot, pita pocket @ \$11.00
		Roasted turkey cured tomatoes, baby spinach, Brie, pesto mayonnaise on focaccia @ \$12.00
		Grilled Chicken & Chopped Romaine Salad, avocado, tomato, blue cheese, onion, bacon, cucumber, balsa @ \$12.00
		Individual Bags of Frito, Lays Potato Chips and Pretzels @ \$3.00 Each
		Soft Drinks – Assorted Pepsi Products Still & Sparkling Bubly @ \$3.00 Each
1:00pm – 2:30pm	С	B1. Medicine, Technology, and Representations in Global East AsiaGardner (Sheraton, Level 3)Speakers: Wayne Soon, Ryan Moran, Shu Wan, Sonja KimB1. Medicine, Technology, and Representations in Global East AsiaChair: Sonja Kim, Binghamton University, State University of New YorkYork
		 Wayne Soon, University of Minnesota: Beyond Efficacy and Convenience: A History of the National Health Insurance Electronic IC Card in Taiwan Ryan Moran, University of Utah: Measuring the Minds and Bodies of Laborers in Interwar Japan Shu Wan, University at Buffalo: From Introduction to Indigenization: A Technology History of Hearing Aids in Republican and Early Socialist China
		East Asia has become a powerhouse in technological advances and widely praised for its robust responses towards infectious diseases and healthcare inequities. Existing scholarship, however, has yet to seriously consider inextricable connections between technology, medicine, and photographic representations in East Asia, while downplaying myriad challenges that brought forth such progressive changes in a region marked by colonial and authoritarian pasts, religious valances, and industrial transformations. This panel aims to identify how Chinese, Taiwanese, and Japanese society and governments dealt with the challenges of using technology to shape medical practices and change representations of medicine. In contrast with typical perspectives of state and high-tech entities, this panel reveals unexpected agencies of technologists such as missionaries, criminal enterprises, insurance agents, actuarial science experts, and labor institute scientists in shaping medicine and society in the region.
		Wayne Soon reveals how banks, criminal enterprises, photography studios, and precinct-level wardens did as much as the health insurance bureau, technology companies, semiconductor industry, hospitals, and government to normalize uses of smart health insurance integrated circuit cards in Taiwan. Ryan Moran traces collaborations between interwar Japanese industry, doctors, and scientists to understand the impact of labor on the body, with analysis based on intelligence testing and blood type. Across all of these papers, our panel seeks to illuminate technologies and technocratic encounters in non-state and state engagements with medicine, borne out in East Asia's institutional, cultural, and social developments over time.

1:00pm – 2:30pm	C B2. Ethics and Patient Data Initiative: Discussing Draft Guidelines Back Bay D (Sheraton, Level 2) All who research and write about the history of medicine will at some point in their work encounter ethical questions about how to do their work. Whether this relates to how to maintain the privacy of patients and caregivers whom we encounter in archival materials; whether, when, and how to obtain permission from the communities about whom we are writing; how to present sensitive materials and images to a larger audience without being exploitative of the individuals and communities that we are studying, etc. This panel will propose some guidelines and a framework for thinking about these issues that can help medical historians address the ethical issues they encounter. We are inviting AAHM members to come and discuss potential paths for addressing ethical issues.
	Guidelines Committee:
	Adam Biggs
	Polina Ilieva
	Carla Keirns
	Richard McKay
	Susan Lawrence Barron Lerner
	Alexandra Lord
	Richard Mizelle
	Wangui Muigai
	Scott Podolsky
	Susan Reverby
	Kylie Smith
	Courtney Thompson
	Jai Virdi
1:00pm – 2:30pm	C B3. Pregnancy and Abortion in Twentieth Century America Back Bay B (Sheraton, Level 2) Moderators: Simone M. Caron
	Speakers: Cara Delay, Diane B Paul, Rima Apple
	B3. Pregnancy and Abortion in Twentieth Century America
	Chair: Simone Caron, Wake Forest University
	1. Cara Delay, University of South Carolina, and Madeleine Ware, Yale University: Black Providers in the 'Back
	Alley': Abortion in the Pre-Roe American Southeast
	2. Diane B. Paul, University of Massachusetts Boston: <i>In the Name of Anti-Eugenics: History as a Political</i>
	Resource in Struggles over Abortion 3. Rima Apple, University of Wisconsin: Delayed Motherhood: An Intersection of Medicine, Gender, and
	e. Rand Apple, envelory of Wisconsin. Delayed Methomolog. An interfection of Methomol, envelored, and
	Cultural Imperatives
1:00pm – 2:30pm	
1:00pm – 2:30pm	
1:00pm – 2:30pm	C B4. HIV/AIDS Technology and Politics Fairfax (Sheraton, Level 3
1:00pm – 2:30pm	C B4. HIV/AIDS Technology and Politics Moderators: Judy Houck
1:00pm – 2:30pm	C B4. HIV/AIDS Technology and Politics Fairfax (Sheraton, Level 3 Moderators: Judy Houck Speakers: Qurat Khan, Lukas Engelmann, Aishah Scott
1:00pm – 2:30pm	C B4. HIV/AIDS Technology and Politics Moderators: Judy Houck Speakers: Qurat Khan, Lukas Engelmann, Aishah Scott B4. HIV/AIDS Technology and Politics Chair: Judy Houck, University of Wisconsin-Madison 1. Qurat Khan, Princeton University: The Mathematical Definition of Promiscuity: How the AIDS Epidemic
1:00pm – 2:30pm	C B4. HIV/AIDS Technology and Politics Moderators: Judy Houck Speakers: Qurat Khan, Lukas Engelmann, Aishah Scott B4. HIV/AIDS Technology and Politics Chair: Judy Houck, University of Wisconsin-Madison 1. Qurat Khan, Princeton University: The Mathematical Definition of Promiscuity: How the AIDS Epidemic Changed Mathematical Models of Diseases
1:00pm – 2:30pm	C B4. HIV/AIDS Technology and Politics Moderators: Judy Houck Speakers: Qurat Khan, Lukas Engelmann, Aishah Scott B4. HIV/AIDS Technology and Politics Chair: Judy Houck, University of Wisconsin-Madison 1. Qurat Khan, Princeton University: The Mathematical Definition of Promiscuity: How the AIDS Epidemic

2:30pm – 2:45pm	К	Break	Anywhere
		4. David R. Carey Loyola University Maryland, and Esyllt Jones, University and Local Resilience in Canada and Guatemala, 1918-2022	sity of Manitoba: <i>Pandemics, Inequality,</i>
		Susceptibility in San Francisco's Chinatown, 1870-1904	
		3. Emily Martin, University of California, Berkley: The Risks of Rice-Eati	ing: Diet, Plague, and Racial
		Puerto Rican:" Tuberculosis and the Politics of Disease in Post-War I	•
		2. John A. Gutierrez, John Jay College of Criminal Justice/CUNY: "The	Outstanding Health Problem of the
		1. Angel Ricardo Rodriguez, Harvard Kennedy School of Government: Authority, and Syphilis Diagnostics in Historical Perspective	The Hinton Test: Race, Institutional
		Chair: Dana Landress, University of Wisconsin-Madison	
		Speakers: David Carey, John Gutierrez, Emily Martin, Angel Rodrig B6. Disease, Race, and Ethnicity in the Americas	Juez
		Moderators: Dana Landress	
1:00pm – 2:30pm	С	B6. Disease, Race, and Ethnicity in the Americas	Back Bay A (Sheraton, Level 2
		Competing Definitions of Socialist Medicine	
		3. Dora Vargha, Humboldt-Universität: At the Intersection of the Social a	
		 Kalman Rotstein, Binghamton University: 'Biggest Bacteriological Ent Punjab Vaccination Campaign and the Mulkowal Tragedy, 1902-1906 	
		Vaccination	terrise the World has yet Seen ' The
		1. Andrea Rusnock, University of Rhode Island: Who is the Vaccinator?	? Women's Work in the Early History of
		Chair: Theodore Brown, University of Rochester Medical Center	
		B5. Vaccination Campaigns in Global Perspective	
		Speakers: Andrea Rusnock, Kalman Rotstein, Dora Vargha	
		Moderators: Theodore Brown	
1:00pm – 2:30pm	С	B5. Vaccination Campaigns in Global Perspective	Back Bay C (Sheraton, Level 2

1. Mary J. Hunter, McGill University: The Dark Side of Motherhood: Artistic and Medical Entanglements in Impressionist Images of Pregnancy

- 2. Christine Slobogin, University of Rochester Medical Center: "Noses Reshaped": Plastic Surgery, the Cosmetic Gaze, and Racialized Connoisseurship in Andy Warhol's Before and After (1961-1962)
- 3. Fiona Johnstone, Durham University: Becoming an Image: Contemporary Art History, Artists' Books, and the Clinical Gaze

As is the case with studying medicine and the body, studying art and visual culture is about close looking; the art historian's way of seeing can be as "clinical" as the Foucauldian medical gaze. The research presented in this panel demonstrates that histories of art and visual culture offer unique inroads into understanding histories of medicine and the body. By analyzing works of art, these three historians make a case for using the history of art in writing histories of medicine, and vice versa.

The papers in this panel show that, like medicine, art history and its ways of looking are intertwined with social histories and constructions of gender, sex, race, and class. Mary Hunter reframes Impressionism, particularly the paintings of Edgar Degas, in the context of contemporaneous medical conceptions of pregnancy, birth, miscarriages, and infant mortality. Christine Slobogin speaks to the histories of plastic surgery that can be read into Andy Warhol's paintings of rhinoplasties, arguing that the surgical gaze and the cosmetic gaze that these artworks encourage construct their racial meanings. And continuing this focus on close looking common to both art and medicine, Fiona Johnstone uses twenty-first-century collaborations between physicians and contemporary artists – particularly through the vehicle of the artist's book – to rethink the construction and purposes of the clinical gaze. Johnstone examines how consent, coercion, and collaboration are implicated in both the clinical and the artistic gazes.

When looking at artworks about or related to the body or medicine, art historical concepts such as style and composition can reveal – as these panelists show – historical attitudes towards reproduction, plastic surgery, and clinical care. This panel places the histories of childbirth, the body, surgery, beauty, and medicine squarely within the history of art, utilizing the visual methodologies of art history to open up new ways of seeing within medical history.

2:45pm - 4:15pm

C C2. Roundtable: Make America Healthy Again: Audience Discussion of the Role of Historians in Public Health Today Back Bay D (Sheraton, Level 2)

Moderators: Elena Conis, Lara Freidenfelds

Speakers: Jacqueline Wolf, Merlin Chowkwanyun, Lauren MacIvor Thompson, Richard Mizelle C2. Roundtable Make America Healthy Again: Audience Discussion of the Role of Historians in Public Health Today

Chairs: Lara Freidenfelds (co-chair) and Elena Conis (co-chair), University of California, Berkeley

Lauren Maclvor Thompson, Kennesaw State University Richard Mizelle, University of Houston Jacqueline Wolf, Ohio University Merlin Chowkwanyun, Columbia University

Historians of medicine have a variety of potential roles in this moment: providers of testimony about the past; supporters of public health professionals and policy-makers; scholar-activists; nuanced critics. Join us to discuss the variety of ways in which we, as historians, plan to respond to MAHA, to recognize challenges and pitfalls, and to share inspiration and insight.

C C3. Acupuncture Beyond Medicine: Global Perspectives from the Late Nineteenth to Twenty-First Century Back Bay B (Sheraton, Level 2) Moderators: Emily Baum Speakers: Po-Hsun Chen, Ling-yi Tsai, Ling-yi Tsai C3 Acupuncture Beyond Medicine: Global Perspectives from the Late Nineteenth to Twenty-First

Century

Chair: Emily Baum, University of California, Irvine

- 1. Jean Tzu-yin Chou, University of Glasgow: Commodification of Acupuncture in the UK: Examining the Perceptions of TCM Patients/Customers from 1970s to the Post-Covid Period
- 2. Ling-yi Tsai, Vanderbilt University: Occupation for the Blind: Acupuncture in Japanese Colonial Taiwan (1895–1945)
- 3. Po-Hsun Chen, Taipei Municipal Gan-Dau Hospital: Stimulated by Acupuncture Anesthesia: Scientization and Institutionalization of Acupuncture Research in Cold War Taiwan

Apart from representing a significant part of Chinese medicine and an emblem of Chinese civilization, acupuncture and its uses appeared in diverse forms with different functions worldwide. In fact, the role of acupuncture extends beyond being a mere medicinal technique; it also functions as a welfare policy, a diplomatic instrument, and a spiritual commodity. This panel comprises three diverse papers that collectively elucidate the complex global landscape of acupuncture from the late nineteenth to the twenty-first century.

Ling-yi Tsai explores how acupuncture was introduced to Taiwan during its colonial period and functioned as a welfare policy for the blind. Acupuncture has a long history in Japan, and due to the heightened sensitivity of blind individuals, it was regarded as a suitable occupation for the blind. However, this (dis)ability of the blind still required governmental support to maintain its occupational exclusivity. In post-war Taiwan, acupuncture shifted from a welfare policy in the Japanese colonial regime to a tool in diplomatic competition under the Kuomintang government. Notably, after US President Nixon's historic visit to China in the 1970s, acupuncture not only gained popularity in the West but also became a point of focus in the delicate US-China relationship. Po-hsun Chen demonstrates how improved PRC-US diplomatic relations in the 1970s prompted the Kuomintang government in Taiwan to conduct scientific research, particularly on acupuncture anesthesia, in an effort to bridge acupuncture with neuroscience and showcase its scientific value. At the same time, acupuncture gained momentum through the burgeoning New Age movement, which fueled significant market demand for acupuncture in the West. Despite its adoption, acupuncture remains primarily categorized as an alternative and complementary medical practice outside of biomedicine in most global contexts. Tzu-yin Chou traces how acupuncture became commodified in the UK, a process that blurred the boundaries between "patients" and "customers" as individuals seek options outside the NHS provision.

C C4. Roundtable Everything Everywhere All at Once: Historical Legacies of Eugenics Moderators: Kathryn Irving Back Bay A (Sheraton, Level 2) Speakers: Sarah Rose, Catherine Mas, Michael Rembis C4. Roundtable Everything Everywhere All at Once: Historical Legacies of Eugenics

Kathryn Irving, University of Melbourne Catherine Mas, Florida International University Michael Rembis, University at Buffalo Sarah Rose, University of Texas at Arlington

Since Francis Galton coined the term "eugenics" in 1883, its meaning has been far from stable. As historian Alexandra Minna Stern recognised two decades ago, if eugenics is about "better breeding," interpretations hinge around contested definitions of "better." Although many scholars come at eugenics through its association with race and ethnicity, it is also central to histories of disability and labor, medicine and public health, genetics and the social sciences, gender, sexuality, and reproductive rights ... Eugenic logic is not confined to the past, but continues to shape debates about ideal personhood – from molecular genetics to public policy.

This roundtable brings together historians from diverse backgrounds to add complexity and richness to historical analysis of eugenics. Rather than suggesting that eugenics can be "anything to anyone," we use intersectional approaches to argue that analysis of eugenics requires historical specificity. We reflect on our historical research, public engagement, and teaching work; we will also draw on the experiences and expertise of our audience.

Michael Rembis explores the relationships between racism, ablism, and gender and sexuality in histories of eugenics. Sarah Rose examines how ideas of productivity shape access to civil rights. Catherine Mas considers the intersections between anthropology and racial science in Latin America. Kate Irving reflects on the continuities between nineteenth century institutionalization and contemporary genomic testing for disabled children.

The roundtable will demonstrate how using multiple lenses allows us to more accurately define and describe the various eugenics movements of the long twentieth century, and highlight the sometimes unexpected connections between eugenic advocates. Finally, we will consider the historian's role in contemporary debates about racial justice, reproductive choice, disability rights, and genetic technologies – these are the legacies of eugenics.

C C5. Roundtable New Directions in the History of Public Health in the Nineteenth Century: Reflections on the Work of Christopher Hamlin Back Bay C (Sheraton, Level 2) Moderators: Jacob Steere-Williams Speakers: David Barnes, Nicholas Bonneau, Ian Burney, Graham Mooney, Sarah Naramore C5. Roundtable New Directions in the History of Public Health in the Nineteenth Century: Reflections on the Work of Christopher Hamlin

Chair: Jacob Steere-Williams, College of Charleston

David Barnes, University of Pennsylvania Ian Burney, University of Manchester Graham Mooney, Johns Hopkins University Sarah Naramore, Northwest Missouri State University Nicholas Bonneau, University of Maryland

This Roundtable brings together a range of scholars to consider new methods, questions, and sources for exploring the history of public health in the long nineteenth century. A sharp historiographical turn in the late 1990s saw historians move away from administrative and technical histories of public health towards a bottom-up revisionism that coalesced around the question: public health...but for whom? Long wedded to the idea that public health arose in the Global North in response to infectious disease crisis and ecological breakdowns caused by industrial capitalism, scholars began to ask new questions about surveillance, technocracy, and contested knowledge. More recently, historians of public health have worked to understand the global entanglements of western public health and the ways in which human and environmental disasters are bound with shifting ideas of the built and natural environments—urban and rural, local and global.

Our launching point is a reconsideration of the breadth and impact of the work of Christopher Hamlin, who has done more than anyone in the last thirty years to push historiographical boundaries in this field. We bring together scholars at various career stages who have been influenced by Hamlin's work to engage in a conversation about where the history of nineteenth-century public health stands today and where it is heading in the future. While scholarly attention has increasingly shifted to the twentieth century in the past two decades, there is a growing consensus—particularly as a result of the COVID-19 pandemic—that we still have much to learn about the global development of public health in the age of industrialization, imperialism, and the birth of laboratory medicine. Topics in this forum cover the gamut of Hamlin's influence, including new work in the history of disease (Jacob Steere-Williams), epistemology and politics (David Barnes), forensic medicine (Ian Burney), health and nationalism (Sarah Naramore), surveillance technology (Graham Mooney) and public health and demography (Nicholas Bonneau).

1: To engage with new theoretical and methodological approaches in the history of 19th century public health

2: To push historiographical boundaries in studying 19th century public health by bringing together a wide-range of scholars from different institutions and at various career stages.

3: To provide new insight on sources, teaching methods, and topics for understanding the contemporary relevance of 19th century public health.

C C6. Imperialism, Western Medical Standards, and the Interests of Medical Go-Betweens in Asia from the Cold War to the Present Gardner (Sheraton, Level 3) *Moderators: Eram Alam Speakers: Adrien Gau, Shinyi Hsieh, Andre Rosario* C6. Imperialism, Western Medical Standards, and the Interests of Medical Go-Betweens in Asia from the Cold War to the Present

Chair: Eram Alam, Harvard University

- 1. Adrien Gau, University of Pennsylvania: Expertise in Transgender Chest Reconstructive Surgery Between Plastic Surgeons and Lay Activists in Taiwan, 1950s–Present
- 2. Shinyi Hsieh, National Taiwan University: Strategic Use of Imperial Power: Delayed Translation of U.S. Health Research and Feminist Critiques in Racialized-Gendered Population Discourses (1970s–Present)
- 3. Andre Rosario, Rutgers University: Foreign Body: Immigrant Professional Organizations and International Nurse Migration Policy, 2002-2008

The establishment of western medicine in non-western societies has long been considered a hallmark of modernity not only by western medical and political elites, but also by medical professionals in non-western societies who aspired to westernized medical education and care. Rather than view these actors as tools of imperialism or label them as imperialists, however, this panel reconceptualizes imperialism less as a political ideology or identity and more as a category of analysis, one that, as Paul Kramer has described, recognizes connections between the west and other societies; and, following Wen-yuan Lin and John Law, underscores the power dynamics inherent in the circulation of knowledge. This panel emphasizes the paradoxical role of medical elites in non-western societies who promoted westernized medical standards. In what ways do they relate western education, policy, and healthcare to "catching up"? What are the local pressures that ironically encourage them to renew or maintain Western models, rather than developing standards specific to their local needs?

This panel examines imperialism in three case studies of medical go-betweens across Asia and the West. First, Adrien Gau compares Taiwanese plastic surgeons training abroad to develop transgender healthcare starting from the Cold War, with present-day activists adapting American and international standards of trans medicine and health policy. Then, Shinyi Hsieh analyzes Taiwan's 'population quality' debate on marriage migration with Southeast Asia, wherein a racialized-gendered hierarchy was shaped by Taiwanese physicians' use of 1970s U.S. refugee studies; local activists embraced second-wave feminism, leading to policies transforming immigrant women into healthcare brokers. Finally, Andre Rosario follows with Filipino immigrant nurses in the U.S. in the 2000s. Leaders in the Philippine Nurses Association of America brokered connections between U.S. nursing professional organizations and Philippine central government officials to aid the Philippine educational system in meeting U.S. nursing requirements. Their participation in policymaking would aid the Philippine government, which had an explicit policy of exporting laborers such as nurses to the U.S. to send back remittances into the Philippine economy. Through these case studies, this panel studies non-western medical go-betweens to rethink imperialism, medical modernity, and westernization.

4:15pm – 4:45pm N Refreshment Break

Grand Ballroom Foyer (Sheraton, Level 2)

C D1. Reparative Historical Inquiry (RHI)—Refining A Theoretical Approach and Methodology Moderators: Aimee Medeiros Fairfax (Sheraton, Level 3) Speakers: Jason Glenn, Norlissa Cooper, Carmaletta Williams D1 Reparative Historical Inquiry (RHI)—Refining A Theoretical Approach and Methodology Chair: Aimee Medeiros, University of California, San Francisco

Jason E. Glenn, University of Kansas Medical Center Carmaletta Williams, Black Archives of Mid-America Norlissa M. Cooper, University of California, San Francisco

Academic medicine is a field in the earliest stages of decolonization. As scholars engaged in decolonizing work at Academic Health Centers (AHCs) begin to interrogate and challenge the legacies of colonialism, empire, and racism that shape the knowledge systems in which we educate learners, we must do so with an eye toward understanding the local histories of colonized medicine. This workshop introduces the concept of Reparative Historical Inquiry (RHI) as a methodology grounded in a commitment to the idea that decolonization must include the voices and expert knowledge of the people harmed by colonization. In essence, RHI represents a type of guerrilla history from the perspective of the people Frantz Fanon called "the wretched of the earth." In doing so, RHI makes a case for developing a reparative ethos to orient historians and scholars working in colonial sites, from the laboratory to the public health clinic. History is about the production and operationalization of truths. RHI aims to expose truth-making and the motivations driving the development of historical narratives as colonial projects. In doing so, we no longer engage in distracting debate around truths but rather motivations and consequences to dismantle racism in the health sciences. And we do so with a sense of urgency and in the spirit of health justice. As James Baldwin reminds us, "History is not the past. History is the present."

1. Understand Reparative Historical Inquiry (RHI) as a theoretical approach and a methodology for engaging in anti-racist community-based collaborative research.

2. Critically explore the essential tenets of RHI as a methodology.

3. Learn to use the RHI method to promote reparative history telling and reconciliatory action.

Chimwemwe Phiri, University of Manchester Bertrand Taithe, University of Manchester

Humanitarian archives are full of absences: the voices of recipients and patients, evidence of wrongdoing and certain decision trails often never make it into the official archives, whether they are either never created, destroyed, neglected or indefinitely closed off. This workshop will explore how these absences are (and often aren't) supplemented by other sources, including oral history interviews, research data, social media, instant messaging and community history projects.

Drawing together researchers and archivists who work with humanitarian archives and evidence (particularly those relating to humanitarian medicine) we will discuss how these alternative sources prove challenging to the strict traditional concept of archives, which defines them as objective traces of institutional or personal transactions which are 'not drawn up in the interest or for the information of Posterity' (Jenkinson, 1922). It will also touch on the ethics of producing, collecting and using these sources, and how patient and recipient perspectives can be captured in spheres of work that generally prioritize the views of practitioners.

It will also explore the challenges and opportunities presented to archivists and researchers by such sources, particularly those produced that are produced 'for Posterity', such as oral histories. We will also reflect on whether they can fit into an archive, or if they even should: are they better suited to being preserved and accessed in a different setting, and should we question the dominance of the archive in historical research? Keywords: archives, research, oral history

* Understand and be able to critically evaluate key archiving principles, how they affect the use and presentation of material defined as archives, and how these practices have developed over time.

* Develop an understanding of how and why archives can be a tool of exclusion and oppression for certain categories of patients and recipients.

* Gain an awareness of the ethics of capturing, collecting, storing and using archives relating to medical treatment, and the legal frameworks that govern this.

C D3. Mentorship Pods: Insights on Publishing, Funding, and Careers, From Faculty for Students D3. Mentorship Pods: Insights on Publishing, Funding, and Careers, From Back Bay C (Sheraton, Level 2) Faculty for Students

Sponsored and facilitated by the AAHM Student Affairs Committee

Mentors: Kristen Ehrenberger (University of Pittsburgh), Antoine Johnson (UC Davis), Rebecca Kluchin (California State University, Sacramento), Jodi Koste (Virginia Commonwealth University), Alex Parry (Johns Hopkins University), Naomi Rogers (Yale University), Pyar Seth (University of Notre Dame), Christopher Willoughby (University of Nevada, Las Vegas)

After a great response last year, we're doing it again! Sponsored by the Committee on Student Affairs, this workshop is an opportunity for graduate students to learn from scholars and professionals outside academia about navigating the PhD and the many potential paths that might come next. Participants will have the opportunity to meet with faculty, editors, and professionals in small groups for candid conversations about a number of prompts, with time for additional Q&A.

Most "Mentorship Pods" will focus on a specific topic, from publishing to the academic job market, transitioning to non-academic jobs, teaching and research, and the state of the field. If participants do not want to go deep on any one particular topic, they can join a pod that will touch briefly on each bucket of prompts (one such group will meet in person, and another via a room on Zoom).

To let us know which pod you'd like to join—and suggest particular mentors you'd like to hear from—fill out this Google Form: https://forms.gle/R38SFZQAjsn7TBhd9

If you aren't able to fill out the form ahead of time, no problem. We can assign you to a pod at the door!, To build community among graduate students and between graduate students and faculty and professionals at various stages of their careers

*To demystify the processes of publishing, job searching, and other elements of professional development *To introduce students to opportunities for enriching their graduate school experiences and preparing for next steps

4:45pm – 5:45pm	С	D4. Humanities Labs and the History of Medicine/HealthcareBack Bay B (Sheraton, Level 2)Moderators: Ayah NuriddinSpeakers: Kylie Smith, Megann Licskai, Anthony Hatch, Natalie Lira, Marco Ramos
		D4. Humanities Labs and the History of Medicine/Healthcare Chair: Ayah Nuriddin, Yale University
		Marco Ramos, Yale University Megann Licskai, Yale University
		Anthony Hatch, Wesleyan University
		Kylie Smith, Emory University
		Natalie Lira, University of Illinois Urbana-Champaign
		This roundtable explores the work of humanities labs in expanding what it means to do the history of medicine and healthcare. Humanities labs can be broadly defined as transdisciplinary spaces and communities for collaborative and/or public facing scholarship. For historians of medicine and healthcare, humanities labs build on a longer history of engaged scholarship. They create opportunities for collaboration with students, healthcare professionals, and community members on issues of systemic harm and structural inequality. With increasing
		attacks on the humanities in higher education and ongoing health disparities in the United States, humanities labs are important for making the history of medicine and healthcare legible for a wider audience and translating historical insights into tangible interventions for addressing structural and medical challenges. They also create important spaces for academic institutions to work with local communities to alleviate harm, address histories of violence, and repair trust.
		The roundtable will discuss the work of building humanities labs in universities including issues of lab management, space, and funding. Participants will discuss both the opportunities and challenges of the "laboratory" as a site for collaboration and community engagement. The roundtable will feature the work of the emerging Critical Histories Lab at Yale, the Historically Informed Policy (HIP) Lab at Emory, the Sterilization and Social Justice Lab at UCLA, and the Black Box Lab at Wesleyan. Keywords: Humanities lab, transdisciplinary, pedagogy.
		* Respond to changes in medical practice guided by a historically informed concept of professional responsibility and patient advocacy.
		* Recognize the dynamic interrelationship between medicine and society through history * Understand the role of humanities labs for transdisciplinary and collaborative learning and teaching
4:45pm – 5:45pm	С	D5. Women and Gender-Diverse Historians of Health and Medicine Coffee Speakers: Lara Freidenfelds Back Bay A (Sheraton, Level 2)
		Speakers: Lara Freidenfelds Back Bay A (Sheraton, Level 2) D5. Women and Gender-Diverse Historians of Health and Medicine Coffee Facilitator: Lara Freidenfelds
		Networking opportunity to meet and talk with women and gender-diverse historians of medicine and healthcare.
4:45pm – 5:45pm	С	D6. What Is To Be Done?—Building a Movement and Crafting Alternatives Gardner (Sheraton, Level 3) Speakers: Ahmed Ragab D6. What Is To Be Done?—Building a Movement and Crafting Alternatives Convener: Ahmed Ragab
		Description: In this get-together, we will discuss different ways that scholars, activists and artists can work together to craft solutions and alternatives for the problems that face our communities. The event is organized by the Center for Progressive Research—a newly established 501c3 research center dedicated to mobilizing, supporting, and connecting scholars, academics, activists, and other actors interested in envisioning new progressive solutions for contemporary problems facing our societies.

Ilana Lowy, Centre National de la Recherche Scientifique What is Diagnosis: Tribute to Ludwik Fleck and Charles Rosenberg

7:00pm – 9:00pm N Garrison Reception and Centennial Celebration

Constitution Ballroom (Sheraton, Level 2)

B Book Exhibit	Break C Concurrent Session M Meeting N Networking O On Your Own	
P Posters R Re	stration S Special Session	
MAY 3 • SATURDAY		
7:00am – 8:00am	M Clinician Historians Meeting Back Bay C (Sheraton, Le Coffee provided at the meeting. Pick up your breakfast food from the Grand Ballroom Foyer and join the grad Back Bay C.	,
7:00am – 5:15pm	R AAHM Registration Grand Ballroom Foyer (Sheraton, Le Come to the AAHM Registration Desk with your questions or needs for assistance. Please see the AAHM Visitors Guide tab in Sched for useful information.	∍vel 2)
	Wi-Fi Network: Marriott Bonvoy Conference Access Code: AAHM2025	
	A lactation room is available on the 3rd level of the hotel. Ask for the key at registration. Please see the AAH registration desk for the key.	IM
	Gender-neutral restrooms are available on the 3rd level of the hotel near the Commonwealth Ballroom.	
8:00am – 8:00pm	O AAHM Conference Art Guide: Medically-Themed Works of Art in Local Museum Collections Enjoy medically-themed works of art in the collections of the Isabella Stewart Gardner Museum, Self-di Harvard Art Museums, and the Museum of Fine Arts, Boston using this detailed guide.	rected
	Information gathered by Christine Bentley (PhD). Assisted by: Jen Thum (PhD), Brooke DiGiovanni Evans (EdM), Corinne Zimmermann (MA, MEd), and Dabney Hailey (MA). Design by Elmira Bagherzadeh (MFA).	
8:30am – 10:00am	S AAHM Awards Breakfast Grand Ba	Ilroom
9:00am – 5:00pm	B Book Exhibit Independence Ballroom (Sheraton, Le Visit the AAHM Book Exhibit. Learn more about the exhibitors here.	evel 2)
10:00am – 10:15am	K Break Any	where

	Speakers: Prinisha Badassy, Sarah Duff, Brooke LeFevre
	E1. Women's Health in Global Perspective
	Chair: Vincenza Mazzeo, Johns Hopkins University
	1. Sarah Duff, Colby College: <u>"I am also oppad again": Histories of Menopause in the Nineteenth-Century Cape</u> <u>Colony</u>
	 Prinisha Badassy, University of the Witwatersrand: "I am not a train for Glasgow": Medico-legal Discourses of Puerperal Insanity and Infanticide in Colonial Natal, 1890-1920
	 Brooke LeFevre, Baylor University: "Evidently a Case of Extra-Uterine Pregnancy': Analyzing Race, Class, and Queerness in the Cincinnati Hospital Obstetrics Ward, 1878-1881"
	To paraphrase Utathya Chattopadhyaya, research frameworks in which certain ideas and practices transition in and out of the status 'medicine' can risk reifying 'medicalization' as a concept. Tracking processes of medicalization in colonial settings have certainly helped to reveal key political and social impacts of biomedical
	diagnostic and treatment regimes in the global south, demonstrating how they have risen to dominance. Empirical cases also necessarily speak to the unevenness of their spread and the limits of their legitimation, across diverse lifeworlds in settings of inequality, resistance and neglect. The papers in this panel highlight four different case studies showing medicalization in South Africa as dynamic and contingent. In South Africa, quests
	for wellbeing have long involved multiple sites of knowledge-making, shaped by racial and economic formations of power and by cultures of formal and informal provisions of care and control. The authors here consider how institutions of the family, the courts, the laboratory/field, the clinic – and how different communicative forms – shaped expert, moral and relational pursuits of being well. These accounts, based on rich and diverse archival
	materials, help to unsettle and nuance approaches to medical histories in colonial contexts.
10:15am – 11:45am	C E2. The (Sometimes) Uneasy Relationship between History of Medicine and Disability Studies: Audience Discussion. Co-sponsored by Disability History Association (DHA) and AAHM
	Moderators: Sarah Handley-Cousin Back Bay D (Sheraton, Level 2)
	Speakers: Elaine LaFay, Sarah Rose, Beth Linker, Michael Rembis, Hannah Zaves-Greene
	E2. The (Sometimes) Uneasy Relationship between History of Medicine and Disability Studies: Audience Discussion. Co-sponsored by Disability History Association (DHA) and AAHM
	Chair: Sarah Handley-Cousins, University at Buffalo
	Hannah Zaves-Greene, New York University
	Beth Linker, University of Pennsylvania

Elaine Lafay, Rutgers University

Michael Rembis, University at Buffalo

Sarah Rose, University of Texas at Arlington

In this roundtable, join the panelists for a conversation about the long and complex relationship between the History of Medicine and Disability Studies. Panelists will discuss the 2013 special issue of the Bulletin of the History of Medicine that focused on disability history and considered how the fields have progressed. The panelists will offer their perspectives and make some suggestions for how conferences can be made more accessible for all scholars in attendance. In addition, the panelists will engage the audience in a discussion about how to foster more connections between these two interrelated but distinct fields.

C E3. Roundtable: Resuscitating the History of Nursing: A Roundtable on New Methods, Clinical Audiences, and Institutional Challenges Gardner (Sheraton, Level 3) Moderators: Dominique Tobbell Speakers: Marissa Nichols, Ren Capucao, Andre Rosario E3 Roundtable: Resuscitating the History of Nursing: A Roundtable on New Methods, Clinical Audiences, and Institutional Challenges Dominique Tobbell, University of Virginia (chair)

Ren Capucao, University of Virginia Marissa L. Nichols, Emory University Andre Rosario, Rutgers University

In her 2022 Bulletin of the History of Medicine positioning paper, nurse and historian Patricia D'Antonio related nursing history to the history of medicine and called for new directions in the history of nursing. Theoretically and conceptually, nursing history has heeded critical cues from postcolonial studies, ethnic studies, queer theory, and disability studies. Historians have also engaged audiences of nurses and health policymakers through the digital humanities and collaborative interdisciplinary articles in health-science journals. Thus, this roundtable explores the following questions: How have nurses–as historical actors, care laborers, and as people–navigated their social and political contexts? What are new methodological approaches for studying the history of nursing? Also, what are the practical, material, and institutional circumstances that have forced historians–especially those working in nursing and health-sciences schools–to undertake these new approaches?

This roundtable brings together a diverse group of scholars who study nursing history in various contexts around the globe. Ravenne Aponte's project, "Nurses You Should Know," utilizes an Equity-Centered Community Design Framework to showcase the contributions of past and present nurses of color, serving as a resource for clinicians and educators. Ren Capucao explores the transnational history of Filipino nurses between the Philippines and the United States through a critical disability lens. Marissa Nichols's work utilizes a linguistic analysis to center Indigenous nurses in twentieth-century histories of healthcare and development in Mexico. Andre Rosario "speaks two languages" when addressing historians and nursing or health researchers about his work, which focuses on immigrant nurses in the United States and examines their roles in shaping policies that protect other foreign-trained nurses from predatory international recruitment companies. The roundtable will be chaired by Dominique Tobbell, Centennial Distinguished Professor of Nursing and Director of the Eleanor Crowder Bjoring Center for Nursing Historical Inquiry at the University of Virginia.

 10:15am – 11:45am
 C
 E4. Ethics and Patient Data Initiative: Drafting Guidelines

 E4. Ethics and Patient Data Initiative: Drafting Guidelines
 Closed session for members of the committee to meet and review draft.

Fairfax (Sheraton, Level 3)

C E5. Roundtable Geographies of Medicine in the Early Modern World: An Exploration in

Pedagogy Back Bay C (Sheraton, Level 2) Speakers: Alisha Rankin, Pablo Gomez, Marta Hanson, Lauren Kassell, Harun Kucuk, Elaine Leong, Chris Parsons

E5. Roundtable Geographies of Medicine in the Early Modern World: An Exploration in Pedagogy Chair: Lauren Kassell, European University Institute

Pablo Gómez, University of Wisconsin-Madison Marta Hanson, Johns Hopkins University Harun Küçük, University of Pennsylvania Elaine Leong, University College London Chris Parsons, Northeastern University Alisha Rankin, Tufts University

This roundtable examines the diverse health cultures and ideas of the body across the premodern world, with a focus on how best to teach a global history of early modern medicine to students. The six roundtable participants represent a range of geographies of early modern medicine: Latin America, China, the Ottoman Empire, North America/Atlantic World, and Europe. We also teach students at a variety of levels: undergraduates, graduate students, medical students. The goal of the roundtable is to spark a conversation that will lead to a co-written chapter, aimed at introductory students, on the geographies of early modern medicine.

The roundtable focuses on three key questions: how can we teach histories of medicine across the early modern world without "dumbing down" the nuances of the material? How can we foster connections and dialogues across the rich and diverse historiographies? What kind of resources might we create to make this topic accessible to undergraduates and medical students? We hope to provoke a lively conversation on the possibilities and perils of trying to teach truly global histories of early modern medicine.

* Develop knowledge and understanding of the rich geographies of early modern medicine

* Develop strategies for teaching global histories of early modern medicine to students

C E6. Gendered Approaches to Fertility, Contraception and Abortion in the Medieval and Early Modern West Back Bay A (Sheraton, Level 2)

Moderators: Scottie Buehler

Speakers: Nichola Harris, Anne Leone

E6. Gendered Approaches to Fertility, Contraception and Abortion in the Medieval and Early Modern West

Scottie Buehler, Sam Houston State University (chair)

- 1. Nichola Harris, State University of New York Ulster: Concubines & Cockstones: Fertility, Contraception and Abortion in the Medieval English Lapidary Tradition
- 2. Anne Leone, Syracuse University: Gestational Development and Terminating Pregnancy in Boccaccio

This panel focuses on premodern medical advice and pharmaceutical aids for fertility, contraception, and abortion in the medieval and early modern West. Three complimentary papers explore these topics using Italian, French and English sources from both religious and secular male authors. Research findings presented in this panel not only provide insights into these important aspects of premodern women's health and healing, but also highlight the fact that much of this information circulated in male-authored texts offering a singularly male perspective of reproduction and the use of female bodies. The first paper "Gestational Development and Terminating Pregnancy in Boccaccio" investigates the theological, legal and medical opinions on abortion contrasted with the lived female experience. The second paper, "Concubines & Cockstones: Fertility, Contraception and Abortion in the Medieval English Lapidary Tradition," examines medical advice within vernacular Middle English lapidaries aimed at male audiences seeking reproductive control of female bodies. "Henry Daniel's Family Planning: Omissions, Additions, and Ambiguities in Aaron Danielis," the third and final paper in the panel, discusses pharmaceutical remedies involved in medieval family planning but also considers the ambiguity in the language used in Latin sources on the topics of abortion and contraception that often complicate modern inquiries. Such considerations of the historical use of contraception and abortifacients are especially timely in light of SCOTUS' Dobbs v. Jackson decision, which includes references drawn from a thirteenth-century treatise and English Common Law. The use of historical sources by a modern jurist has spawned significant debate among researchers in the field of premodern medicine. As part of this ongoing debate, the proposed papers of this panel provide important evidence and insight into historical practices related to fertility, contraception, and abortion as well as offering substantive analysis of premodern Western cultural norms and attitudes in regard to women's reproductive health.

11:30am – 12:45pm	Ν	Coffee Break and "Grab and Go" Lunch	Grand Ballroom Foyer (Sheraton, Level 2)
		Grab a cup of coffee or try out the "Grab and Go" lunch and head to the	Poster Presentations starting at
		11:45am. All will be located in the Liberty/Grand Ballroom Foyer	
		"Grab and Go" menu	
		Hot honey chicken, brussels sprout slaw, sweet pickle chip, sub roll @	12.00
		Grilled portobello tzatziki, grilled red onion, shredded carrot, pita pocket (@ \$11.00
		Roasted turkey cured tomatoes, baby spinach, Brie, pesto mayonnaise c	on focaccia @ \$12.00
		Grilled Chicken & Chopped Romaine Salad, avocado, tomato, blue chee \$12.00	se, onion, bacon, cucumber, balsa @
		Individual Bags of Frito, Lays Potato Chips and Pretzels @ \$3.00 Each	
		Soft Drinks – Assorted Pepsi Products Still & Sparkling Bubly @ \$3.00	Each

P Poster Presentations

Grand Ballroom Foyer (Sheraton, Level 2)

Speakers: Kimberly Monroe, Rena Patricia Seeger, Nora O'Neill, Alexandria Soto, Jesse F. Ballenger, Yating Li, Sohini Mukhopadhyay, Knowledge Moyo, Sophie Qi, Zoe Bekelova, Cadence Brown, Semaj Campbell-Blakes, Isabella Cantor, Ashley Cooper, Alice Fan, Alex Hsu-Chun Liu, Geremy Lowe, Marcus Milani, Kyle Patel, Peper Rivers, Evan Roberts, Yash Wadwekar, Sloane Wesloh, Daniela Krahe, Jonathan Kuo, Melanie S Lorenz, Hannah Carlson, Erika Leane Acosta, Cameron Bernstein, Emi Glass, Sara Hollar, Julie Lemmon

Poster Presentations

(Some poster titles have been abbreviated. Complete titles available in the attached Poster Abstract Document)

P1. Erika Acosta, University of Pennsylvania, Steps Towards Self-Help and Solidarity: Cross-Racial Coalition Building in Philadelphia

P2. Cameron Bernstein, University of Queensland-Ochsner Clinical School, Volatile Wellsprings: Offshore Oil Rigs and Early Adoption of Helicopter MEDEVAC

P3. Carlson, Hannah, University of Minnesota, "A Uniform Exchange": Defining the Nursing Profession Through International Exchange

P4. Emi Glass, Yale University, "Women's Right to Know": Mandatory Ultrasound Requirements, the Fetal Image, and Informed Consent in Abortion Access

P5. Sara Hollar, Yale University, Fetal Portraits: Specimens from the Yale School of Medicine's Forgotten Anatomical Collection

P6. Jonathan Kuo, Johns Hopkins University, Revisiting "The San Francisco Experience": Emotional Encounters and Intellectual Exchanges during the HIV/AIDS Study Tour

P7.Julie Lemmon, Johns Hopkins University, *Multiple Missions: The Army Medical Museum as Maker of Medical Knowledge and Site of Memory*

P8. Melanie Lorenz, Marquette University, From Choice to Control: The Marginalization of Midwives in the Early 20th Century.

P9. Marcus Milani, University of Minnesota *The Value of Incorporating History in Medical Training: Insights from a Chest Tube Skills Workshop*

P10. Kimberly Monroe, Trinity Washington University, *Medical Oppression and Resistance: The Health Struggles of Assata Shakur*

P11. Knowledge Moyo, The University of Texas at Austin, *"Feluna Pills for Females Only": Blood, Advertisements, and the Gendered Medicalization of Women's Bodies in Colonial Zimbabwe*

P12. Sohini Mukhopadhyay, University of Illinois-Chicago, Experts' Against 'Quacks' : How Sexology and the Popular Interacted in Late Colonial Bengal

P13. Nora O'Neill, Yale University, *The Programmed Patient: The Standardization of the Doctor-Patient Relationship in US Medical Education*

P14. Kyle Patel, Johns Hopkins University, Anti-Colonial Medicine and the Indian State: The Life of Dr. Jivraj Mehta

P15. Sophie Qi, Columbia University, Black Rage: Pathologizing Race Riots in the 1960s and 70s

P16. Peper Rivers, Indiana University, "Passive Cooperation" and "Artificial Motivation" at the Lexington Narcotics Hospital

P17. Alexandria Soto, Duke University, "Sew What?": Stapling Instruments and Their Impact on 20th Century

Surgical Practice

P18. Yash Wadwekar, Yale University, "Masked Altruism: Colonial Public Health and the Economic Exploitation of Bombay's Poor (1896–1910)

P19. Sloane Wesloh, Sloane, University of Pittsburgh, *Computerization, the International Classification of Disease, and Diagnostic Precision*

P20. Jesse Ballenger, Drexel University and Sharrona Pearl, Texas Christian University, *Facing Forgetfulness: The Iconography of Dementia in Medical and Popular Discourse since the 19th Century.*

P21. Zoe Beketova, Yale University, Malleable Minds, Controlled Bodies: Walter E. Fernald and the Social Eugenics of Feeblemindedness

P22. Cadence Brown, Yale University, Secrecy in Pregnancy and Adoption: Lorraine Dusky's Adoption Politics and Reproductive Justice

P23. Semaj Campbell-Blakes, Syracuse University, Agents of Change: The Impact of Black Women Public Health Leaders on Teenage Mothers' Reproductive Care

P24. Isabella Cantor, University of Rochester, Behind the Bars: Anonymity in Patient Imagery in the British Medical Journal, 1870-1930

P25. Ashley Cooper, Yale University, Suicide as a Racialized Phenomenon: Unveiling the Cultural Image of Youth Suicide within the U.S. Public Imaginary

P26. Alice Fan, Yale University, *Memorializing Fetal Death: Buddhism, Grief, and Pregnancy Loss in the U.S.,* 1990-2013

P27. Yating Li, University of Illinois Urbana- Champaign, Starting from Symptoms: The Rise of "Womb Maladies" in Republican China

P28. Alex Hsu-Chun Liu, Institute of STS, National Yang Ming Chiao Tung University, *Indigenous Minds Acculturated: A Transculturalist's Fieldwork Amid the Crisis of Identity and Masculinity in a Settler Colony*

P29. Evan Roberts, University of Minnesota, "Such a rash act": Wartime experiences and veteran suicides after the Great War

P30. Rena Patricia Seeger, University of Ottawa, *The Evolution of Patient-Centered Decision-Making in Lung Cancer Surgery*

P31. Daniela Krahe, Johns Hopkins University, Do or Do Not Resuscitate, Who Decides? The Emergence of...

12:45pm – 1:00pm K Break

Anywhere

C F1. Reclaiming Black Health and Reimagining Black Futures in the Civil Rights Era and its Wake Moderators: Samuel Kelton Roberts Fairfax (Sheraton, Level 3) Speakers: Udodiri R. Okwandu, Kelsey Henry, Angelica Clayton, Alexandra Fair F1. Reclaiming Black Health and Reimagining Black Futures in the Civil Rights Era and its Wake

Chair: Samuel Kelton Roberts, Columbia University

- 1. Udodiri Okwandu, Rutgers University: The War on Postpartum Psychosis: Dr. Elizabeth B. Davis, Family Planning, and Racial Uplift in 1960s Black Harlem
- 2. Kelsey Henry, Princeton University: "Deprivatized Emotions, Public Feelings: Kenneth B. Clark and the Psychologization of Antiblack Environments in the U.S., 1950s – 1960s"
- 3. Angelica Clayton, University of Pennsylvania: Cycles of Grief and Mourning Absence: The Origins of Intergenerational Trauma and its Critiques, c. 1970-2000
- 4. Alexandra Fair, Harvard University: "Black Panther Party Challenges Racist to Intellectual Duel": The Black Panther Party's Anti- Eugenic Activism

In Listening to Images, Tina M. Campt defines "black futurity" as the "power to imagine beyond current fact and envision that which is not but must be" to resist the subordination of Black communities. A commitment to black futurity was central to the Civil Rights Movement, which catalyzed the eventual abolishment of legalized racial segregation and discrimination. Yet, as Campt aptly observes, black futurity is not only evident in "political movements and acts of resistance" but also "less likely places." In this vein, this panel explores how a diverse range of Black practitioners - including community organizers, developmental psychologists, social workers, psychiatrists, and psychoanalysts - articulated and advanced black futurity in both the scientific and medical domains, ultimately envisioning them as critical sites to achieve social, political, and economic liberation. While cognizant that legal disenfranchisement and economic marginalization were central to racial oppression, they also interrogated how, for example, contradictory scientific discourses and postwar policies, racial biases embedded in clinical interactions, unequal access to healthcare, and psychiatric and psychological conceptual frameworks normed around white populations, perpetuated Black marginalization. As the Civil Rights Movement spawned countercultures, the movement's heterogeneous offshoots reflected novel political ideologies and approaches to achieving Black liberation, many of which exemplified the Black Panther Party's holistic commitment to "Serve the people body and soul." Foregrounding the anti-eugenic politics of the Black Panther's Intercommunal News Service, Kenneth B. Clark's quest for an antiracist social psychiatry at the Northside Center for Child Development, Black psychiatrist Elizabeth Bishop's efforts to depathologize Black motherhood through family planning at Harlem Hospital Center, and Black researchers' alternative models of intergenerational trauma and healing, this panel positions Black health activism as integral to the success of Black social movements more broadly. Thus, this panel not only highlights understudied and undertheorized interventions at the intersection of health politics and liberatory movement toward Black futurity, but also emphasizes their significance for understanding the historical struggle for Black freedom.

1:00pm - 2:30pm

Back Bay D (Sheraton, Level 2)

Moderators: Raul Necochea Speakers: Pamela Maddock, Gabriela Soto Laveaga, Nathan Chaplin, John Eicher F2. Public Health in Global Perspective

Raúl Necochea López, University of North Carolina

C F2. Public Health in Global Perspective

- 1. Gabriela Soto Laveaga, Harvard University: Nutrition, Race, and the Value of Corn
- 2. John Eicher, Pennsylvania State University: Your Lying Eyes: Government Mistrust During the 1918 Influenza Pandemic at the End of WWI
- 3. Nathan Chaplin, University of Iowa: The Servicio Cooperativo Interamericano de Salud Pública: Negotiating Race, Gender, and Public Health in Nicaragua, 1942-1946
- 4. Pamela Maddock, University of Sydney: Disease control, gendered tools, and imperial work: Women navigating labor and public health in US-occupied Manila, 1902

C F3. Roundtable HIPAA, Privacy and Accessing Historical Medical Records Moderators: Alexandra Lord Back Bay C (Sheraton, Level 2) Speakers: Jamie Bronstein, Jonathan Crispin, Sarah Handley-Cousin, Susan Lawrence, Elizabeth Stauber, Ryan Thibodeau F3. Roundtable HIPAA, Privacy and Accessing Historical Medical Records

Chair: Alexandra Lord, National Museum of American History

Susan Lawrence, University of Tennessee, Knoxville Elizabeth Stauber, University of Texas at Austin Jamie Bronstein, New Mexico State University Jon Crispin, Independent Community Historian Sarah Handley-Cousins, University of at Buffalo Ryan Thibodeau, St. John Fisher University

In 1996, HIPAA created national standards to protect a patient's health information from being disclosed without the patient's consent or knowledge. As it was originally written, HIPAA also effectively prevented historians and descendants from ever accessing medical records if they were stored in entities covered by the law. By 2013, the US Department of Health and Human Services (HHS) had recognized the problem caused by "the lack of access to ancient or old records of historical value." That year, HHS published 45 CFR 164.502(f), a rule amending HIPAA and allowing patient records to be accessed 50 years after the patient's death.

While some states opened their medical archives, laws banning or sharply limiting access to these records are still widespread. New York State, for example, requires historians seeking access to nineteenth-century asylum records to submit to an IRB. Michigan recommends that researchers hire an attorney and obtain a court order. But the situation is even worse in states such as Massachusetts where historians and descendants are barred from accessing these records.

To some degree, these restrictions are understandable. After all, medical records include sensitive private information. But banning or, more simply, imposing requirements which make these records inaccessible puts them at risk of destruction. It also prevents scholars from using them to develop a nuanced and deep understanding of the experiences of patients in the past.

In 2016, an AAHM panel explored the potential destruction of these records along with issues around Privacy Boards and researchers' access. Building on that conversation, this proposed roundtable will focus on both changes over the last nine years as well as the impact of state laws on care of and access to these records. Bringing together key stakeholders, including archivists, community historians, academic historians and public historians, this roundtable will also explore the ways in which historians, archivists, and practitioners can work together to develop best practices for safeguarding records while providing scholars and others with access. This roundtable will encourage the following Learning Objectives:

* Develop knowledge and understanding of professional behaviors and values:

* Understand the dynamic history of medical ideas and practices, their implications for patients and health care providers, and the need for lifelong learning by promoting an understanding of how concepts of patient privacy have shifted over time

* Promote tolerance for ambiguity of theories, the nature of evidence, and the evaluation of appropriate patient care, research, and education by promoting an understanding of how concepts of patient privacy have shifted over time

Contribute to the improvement of patient care

* Acquire a historically nuanced understanding of the organization of the U.S. healthcare system, and of other national health care systems by promoting an understanding of both the ways in which concepts of patient privacy have shifted over time and the need to ensure that patient records are maintained for future study by historians and practitioners

* Respond to changes in medical practice guided by a historically informed concept of professional responsibility and patient advocacy by promoting an understanding of how concepts of patient privacy have shifted over time

C F4. Roundtable Carceral Sickness: Towards Inclusive Research with New York State Correctional Facility Records Back Bay B (Sheraton, Level 2) Moderators: Richard McKay

Speakers: Kevin Kareem Brooks, Leon Davis, Reginald Qualls

F4. Roundtable Carceral Sickness: Towards Inclusive Research with New York State Correctional Facility Records

Chair: Richard McKay, University of Cambridge

Kevin Kareem Brooks, Independent Scholar, Hudson Link for Higher Education in Prison Leon "Struggle" Davis, Independent Scholar, Hudson Link for Higher Education in Prison Reginal Qualls, Independent Scholar, Hudson Link for Higher Education in Prison

This roundtable discussion will reflect upon the groundbreaking experience of a team of researchers - three formerly incarcerated college graduates and one university-affiliated historian - working together to investigate questions of sickness, disability, race, and scientific racism using century-old prison records at the New York State Archives.

The roundtable's four speakers came together to work on an exploratory research project intended to broaden access to archival prison records and animate the expertise of people with lived experience of the carceral system. The project focuses on records from Elmira Reformatory and Eastern Correctional Facility at Napanoch, two New York institutions linked through hundreds of prisoner transfers, and especially by the carceral journey of one man whose 1920s syphilis infection and prison experience initially attracted the historian's attention in 2020.

In 2023, the historian participated in a powerful work-in-progress presentation about this man's experience with an audience of formerly incarcerated alumni of Hudson Link for Higher Education in Prison, in Ossining, New York. Their collective wisdom and enthusiasm encouraged the historian to co-design this collaborative project with guidance and funding support from Hudson Link, leading to additional funding from the New York State Archives Partnership Trust in the form of a Larry J. Hackman Research Residency award in 2024.

In addition to reflecting upon the project design, the speakers will discuss their experiences of recruitment and interviews in spring 2024, their six days of archival research and reflective discussions during summer 2024, and three presentations, culminating with one to college students inside Sing Sing Correctional Facility. They will share the successes and challenges of their journey and lessons learned about the value of such partnerships for reaching broader audiences. They will also give attention to the issue of dehumanization in prison systems past and present, the role of prison psychiatrists in shaping the New York state carceral system, and the fraught relationship of documentary evidence to prisoners' lived experience.

* Develop a historically informed understanding of sickness and health in the carceral system

* Learn new ways of designing and conducting health history research

* Develop an understanding of the influence of eugenics and scientific racism on medical practice and patient experiences

1:00pm – 2:30pm

Gardner (Sheraton, Level 3)

Moderators: Barron Lerner Speakers: Emma Wathen, Heather Dron, Beth Linker, Deirdre Cooper Owens F5. Disability in America

Chair: Barron Lerner, New York University, Langone Health

C F5. Disability in America

- 1. Deirdre Cooper Owens, University of Connecticut: Harriet Tubman, Slavery & the Contours of Disability
- 2. Emma Wathen, University of Wisconsin-Madison: These "Children Won't Become Women": Depo-Provera, Menstruation, and Mental Disability
- 3. Heather Dron, Sterilization & Social Justice Lab, UCLA Institute for Society & Genetics: Sonoma State Hospital at a Crossroads: Entangled Goals of Innovation, Care, & Prevention of Disability at Mid-Century (1950-1970)
- 4. Beth Linker, University of Pennsylvania: The Other Disabled President: JFK's Chronic Back Pain and Cover Up

C F6. Nineteenth-Century U.S. Medical Education: The Urban Poor, the Janitors, and the Students Moderators: Dominic Hall Back Bay A (Sheraton, Level 2) Speakers: Jessica L Hester, Christopher Willoughby, Courtney E. Thompson F6. Nineteenth-Century U.S. Medical Education: The Urban Poor, the Janitors, and the Students Chair: Dominic Hall, Harvard University

- 1. Jessica Leigh Hester, Johns Hopkins University: Rethinking "Stiff Doctors": How Nineteenth-Century Dissecting-Room Janitors Worked Toward Mobility
- 2. Christopher Willoughby, University of Nevada: Medical Motley Crews: Anatomy, Monopoly, and the Urban Crowd in the U.S., 1765-1860
- 3. Courtney Thompson, Mississippi State University: The Medical Student Has Two Faces: Interpreting Emotion in Nineteenth-century Medical Student Diaries

This panel explores responses of varied Americans to the institutionalization of medical education in the long nineteenth century. Specifically, we examine three distinct perspectives on medical education: the applicant/student, the non-faculty staff, and the urban poor. Together, these three groups reveal how "medical progress" had different meanings to various classes and ethnic groups in the United States. For applicants and students, as Courtney Thompson explains, medical schools were not only sites of class production and attainment: young men had to grapple with the emotional work of practicing medicine. Would their work change them? Could they handle the emotional labor? For the janitorial staff, as Jessica Hester unpacks, working in the medical school meant a steady wage in exchange for performing a variety of repulsive acts, including facilitating the procurement and preparation of bodies for dissection. Negotiating this stable but demeaning work was riddled with difficulties—and opportunities for social and economic mobility. Likely, these workers shared some discomfort towards dissection with the urban poor who took to the streets in "motley crews" to protest corpse theft, as described in Christopher Willoughby's paper. Willoughby recontextualizes an old history of crowd action against medical schools by situating it within a larger context of urban protests against impressment into the British Navy. Unlike the banning of impressment, urban protests led to the legalization and, ultimately, legitimization of dissecting the friendless poor.

Together, these papers reveal that the institutionalization of medical education was a tumultuous and contested process. The proliferation of medical schools dramatically expanded opportunities to join a professional, managerial class, novel for its rapid growth during this period. On the other hand, for janitors, these sites provided stable work that was also degrading, and could strain community ties when these laborers helped steal and dissect the bodies of their neighbors. The poor experienced medical schools as another entity attempting to force labor from their unconsenting bodies, and they responded accordingly. In considering these varied perspectives, we begin to reformulate the nineteenth-century medical school as not simply about student-teacher relationships and pedagogy but as a larger, mushrooming institution, whose maturation carried mixed consequences for Americans of different classes and ethnic backgrounds.

2:30pm – 2:45pm K Break

Anywhere

M AAHM Annual Business Meeting

Back Bay D (Sheraton, Level 2)

As many of you have heard at business meetings since at least 2021, our financial advisors have deemed it essential to the long-term operational and financial stability of the AAHM that we merge the "American Association for the History of Medicine" and "History of Medicine Foundation" components of what we generally refer to as the AAHM.

The American Association for the History of Medicine, as a 501c3, is formally based in New York. The History of Medicine Foundation, as a 501c3, is formally based in Ohio (it was established in 1990 as a fund-raising complement to the American Association for the History of Medicine, but as a separate 501c3).* Working with legal counsel in recent years, it became clear that our most advantageous option would be to dissolve the New York entity and merge it into the Ohio entity, such that a single entity, the American Association for the History of Medicine, formally based in Ohio, would emerge from this process. This would happen in a manner such that this would be legally simultaneous.

Council voted unanimously in favor of the attached "Plan of Agreement" at its February 2025 meeting. The next step is for membership to vote on it, and this will take place at the AAHM 2025 annual meeting as part of the business meeting, held on Saturday, May 3 from 2:45 to 3:30 pm. We will need a 2/3 vote in the affirmative (among those voting) to move this forward, and we will need at least 100 votes in the affirmative to constitute a quorum to move this forward. Please join us for this important meeting so we make quorum and can move forward with this important project. Snacks and coffee will be provided! The Meeting Agenda is also attached.

3:30pm – 3:45pm	K Bre	ak	Anywhere
3:45pm – 5:15pm	C G1 .	Health Activism, Healthcare as Activism	Fairfax (Sheraton, Level 3)
	Мо	derators: Sarah Whitney Tracy	
	Spe	eakers: Justin Barr, Benjamin Folger, Andrew Hogan, Sydney G	Goggins
	G1.	Health Activism, Healthcare as Activism	
	Cha	ir: Sarah Tracy, University of Oklahoma	
		Benjamin Folger, University of Oklahoma: "And We've Come a Loi practitioners in Early Oklahoma	ng Way": Medicine, Migration, and Black
		Justin Barr, Ochsner Clinic: Bullets in the History of Medicine: Physic Century United States	icians and Gun Control in the 20th
	3.	Andrew Hogan, Creighton University: Disabled Students in Late 20th Steppingstones to Participation	h Century Physical Therapy:
	4.	Sydney Goggins, University of Wisconsin: "My illness would cast the and Patient Advocacy in Tuberculosis Sanatorium Newsletters	e future in a different mould": Temporality

3:45pm -	- 5:15pm
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C G2. Roundtable Revisiting the American Physician Dr. Robert L. Dickinson: Exploring his Contributions, Critically Examining his Legacy Moderators: Sarah Rodriguez Speakers: Wendy Kline, Rose Holz, Beans Velocci G2. Roundtable Revisiting the American Physician Dr. Robert L. Dickinson: Exploring his Contributions, Critically Examining his Legacy Chair: Sarah Rodriquez, Northwestern University

Rose Holz, University of Nebraska Wendy Kline, Purdue University Beans Velocci, University of Pennsylvania

Over the course of his long and varied career, Dr. Robert L. Dickinson (1861-1950) was a prominent and deeply influential American obstetrician-gynecologist, scientist, sexologist, and artist. In addition to helping Margaret Sanger win the medical profession over to the birth control cause in the early twentieth century, he was deeply engaged in many other issues of "women's" health, sexuality, and eugenics. He also served as a friend and mentor to, and the intellectual bridge between, prominent sexologists Havelock Ellis, Sigmund Freud, Alfred Kinsey, William Masters, and Virginia Johnson. Consequently, not only does he regularly appear in scholarly accounts on birth control, abortion, sterilization, clitorises, lesbianism, and menstruation, but medical historian Vern Bullough declared that he might be regarded as "the founding father of much of American sex research."

Despite Dickinson's significance, his work and legacy remain yet to be fully synthesized and critically examined, particularly in ways that don't fall into the trap of traditional hagiographies of great white male physicians. Thus the purpose of this roundtable is to bring five scholars together: Donna Drucker (on the intellectual relationship between Dickinson and Kinsey), Anne Garner (Dickinson's role as an agitator within medical libraries for greater public access to sexual information), Rose Holz (the 1939 Dickinson-Belskie Birth Series sculptures), Wendy Kline (Dickinson as a sexual predator who violated some of his patients), and Beans Velocci (Dickinson's construction of Norma, the perfectly vulvaless woman). Led by moderator Sarah Rodriguez, each will briefly share their engagement with Dickinson. The conversation will then open up in exploration of Dickinson in ways that prompts a critical discussion of his life and legacy while still seeing the scope and influence of his work. Keywords: 1. Reproductive Medicine 2. Sexology 3. Medical Ethics 4. Obstetrics and Gynecology 5. Birth control

1. To understand the contributions of Dr. Robert L. Dickinson as physician, scientist, and artist to the developing fields of sexology and reproductive healthcare in the first half of the twentieth century.

To evaluate the legacy of his work through the prisms of medical ethics, structural racism, and cissexism.
 To consider the ways that Dickinson shaped the role of a public physician in the US beyond the clinic, via research advocacy, public education, and the arts.

3:45pm – 5:15pm	С	G3. Changing Medical Practices Moderators: Peter Kernahan	Back Bay B (Sheraton, Level 2)
		Speakers: Cole Giller, Yang Li, Lukas Meier, Joseph Jay Sosa	
		G3. Changing Medical Practices	
		Chair: Peter Kernahan, University of Minnesota	
		 Cole Giller, Johns Hopkins University: Surgery in a Fishbowl: Audiences in Su 18th and Early 19th Century London Lukas Meier, Harvard University: Death: From the Heart to the Brain 	urgical Theaters in
		3. Joseph Sosa, Bowdoin College: Making a Parapharmaceutical: USFDA Regu Poppers Industry	llation and the Creation of the
		4. Yang Li, University of Wisconsin: Unruly Cures: Antibiotic Side Effects and the Expertise in Socialist China	e Contested Rise of Clinical

3:45pm – 5:15pm	С	G4. Roundtable Act Two: Black Life Through Biopolitics, Necro <i>Moderators: Alexandre White</i> <i>Speakers: Dr. OmiSoore Dryden, Vincenza Mazzeo, Elizabeth Adeta</i> G4. Roundtable Act Two: Black Life Through Biopolitics, Necropolitic Chair: Alexandre White, Johns Hopkins University	Back Bay D (Sheraton, Level 2) iba, Pyar Seth
		Vincenza Mazzeo, Johns Hopkins University OmiSoore Dryden, Dalhousie University Elizabeth Adetiba, Columbia University Pyar Seth, University of Notre Dame	
		How might we reimagine and retheorize Western biomedicine in a world p wake" of imperialism, colonization, and racial capitalism?	resently defined by what's left in "the
		This roundtable explores the role of biomedicine — specifically through pur- by imperialism, colonialism, and racial capitalism, and how it functions to a and Diasporic life across time and space. We use theories belonging to Bl and African Studies to foreground the centrality of medical histories in anti- and histories on a global scale. By doing so, we explore how inter-disciplin to understand medicine as a paradoxical tool for the production of well-bei and the creation of debility and death worlds, as Achille Mbembe suggests detail how interdisciplinary approaches to histories of Black health have ge how systems of domination shape Black life on a global scale., This panel developing the capacity for critical thinking about the nature, ends and lim- understanding of illness and suffering; understanding the dynamic history implications for patients and health care providers; the need for lifelong lead the dynamic interrelationship between medicine and society throughout his divorced from the past).	sustain and transform Black, African, lack Studies, Post-Colonial Studies, i-colonial and de-colonial movements mary theories informed by race allow us ing and good health, on the one hand, s, on the other. This round table will enerated new ways of thinking about will achieve multiple goals, including: its of medicine; deepening of medical ideas and practices, their arning; and enable one to recognize
3:45pm – 5:15pm	С	G5. Transgender Health, Healthcare, and Community <i>Moderators: Elizabeth Reis</i> <i>Speakers: Tegan Flowers, Cam Cannon, Almarina Grant Sanz</i> G5. Transgender Health, Healthcare, and Community Chair: Elizabeth Reis, Macaulay Honors College, CUNY	Back Bay C (Sheraton, Level 2)
		 Tegan Flowers, University of Virginia: <i>Trans Families: Exclusion and F</i> Alma Grant-Sanz, University of Cambridge: <i>Julia and John: The Makin Psychiatrist</i> Cam Cannon, George Washington University: <i>Gender-Affirming Care, Lessons from U.S. Medico-Legal History</i> 	ng of a "MTF" Transexual and a

5:30pm – 6:30pm	Ν	Johns Hopkins Networking Reception	Berkeley (Sheraton, Level 3)
		especially vulnerable to harm. For immigrant and BIPOC families, the closure o significant crises as loved ones were displaced. Ultimately, by examining such p not only at the population level but as they affected individuals and families, this deinstitutionalization in practice – or rather the economic abandonment that acc	oolicy changes on different scales, s panel reappraises
		light on the political economy of health care policy in this era, as the reallocation certain disparities in well-being across populations. The uneven effects of trans- inpatient psychiatric institutions, prisons, juvenile facilities, and nursing homes respectively vulnerable to home. For immigrant and RIPOC families, the closure of	-institutionalization between rendered patients of color
		This panel proposes to re-examine the history of deinstitutionalization and trans hospitals and facilities in the mid-to-late 20th-century United States from the par case studies in New York City, Chicago, and Indianapolis, the panelists examine	tient/family perspective. Taking up
		Diverging Treatments for Youth in 1980s and 1990s Chicago 3. Elizabeth A. Nelson, Indiana University: Death after Deinstitutionalization: F Indiana	Former Patients' Fates in 1990s
		 Susan Reverby, Wellesley College: "A Terror at Home:" Chronic Disease Ho Century and its Consequences Martin Summers, Boston College: Community Mental Health Care in the Network Content in the Network Co	
		Speakers: Elizabeth Nelson, Susan Reverby, Martin Summers G6. Deinstitutionalization and its Discontents: An Historical Reappraisal Stephen Casper, Clarkson University (chair)	
3:45pm – 5:15pm	С	Moderators: Stephen Casper	aisal Back Bay A (Sheraton, Level 2)

MAY 4 • SUNDAY		
7:00am – 8:30am	М	AAHM Post Mortem Clarendon (Sheraton, Level 3 Meeting participants, please pick up your breakfast from the Commonwealth Ballroom Foyer and join the meeting in Clarendon, both on the third level.
7:00am – 8:30am	Ν	Themed Breakfasts Commonwealth Ballroom (Sheraton, Level 3 Themed Breakfasts
		Pick up your breakfast from the Commonwealth Ballroom Foyer and joined the discussion at one of the themed breakfast tables in the Commonwealth Ballroom.
		T7From Proposal to Program: Success at the AAHM Meeting for Early Career Scholars, led by Lauren MacIvor Thompson, Kennesaw State University and Kelly O'Donnell, Bryn Mawr College
		T8Research Methods and Critiques of the Archive, led by Stephen Greenberg, National Library of Medicine
		T9Women and Gender Diverse Historians Bonus Networking, led by Lara Freidenfelds
7:30am – 12:00pm	R	AAHM Registration Commonwealth Ballroom Foyer (Sheraton, Level 2 Come to the AAHM Registration Desk with your questions or needs for assistance. Please see the AAHM Visitors Guide tab in Sched for useful information.
		Wi-Fi Network: Marriott Bonvoy Conference Access Code: AAHM2025
		A lactation room is available on the 3rd level of the hotel. Ask for the key at registration. Please see the AAHM registration desk for the key.
		Gender-neutral restrooms are available on the 3rd level of the hotel near the Commonwealth Ballroom.
3:00am – 8:00pm	0	AAHM Conference Art Guide: Medically-Themed Works of Art in Local Museum Collections Enjoy medically-themed works of art in the collections of the Isabella Stewart Gardner Museum, Self-directed Harvard Art Museums, and the Museum of Fine Arts, Boston using this detailed guide.
		Information gathered by Christine Bentley (PhD). Assisted by: Jen Thum (PhD), Brooke DiGiovanni Evans

- C H1. The Meanings of "Success" and "Failure" in the History of Humanitarian Medicine Moderators: Lisa Haushofer Fairfax (Sheraton, Level 3) Speakers: Maria Cullen, Bertrand Taithe, Chimwemwe Phiri
 H1. The meanings of "success" and "failure" in the history of humanitarian medicine Lisa Haushofer, University of Amsterdam (chair)
 - 1. Maria Cullen, University of Manchester: The nutritional Success Story of the Twenty-First century? Plumpy'Nut in Historical Perspective
 - 2. Bertrand Taithe, University of Manchester: *Revisiting Goma 1994: Cholera, Failure, and Renewal in Humanitarian Medicine?*
 - 3. Chimwemwe Phiri, University of Manchester: Malawi: The Poster Child of Humanitarian Medicine?

What constitutes the history of humanitarian medicine: medicine in humanitarian circumstances or the shaping of a normative discourse and sets of practices defined by key epistemic moments (Taithe, 2014)? This panel brings together four research papers from the "Developing Humanitarian Medicine" project (University of Manchester, 2023-2028) on the heuristic devices used by humanitarians, to reflect on success, failure, and how humanitarian interventions have been historicised (or not). The papers bring into dialogue different registers of narration and recollection which, over time, have become bedrocks of normative reflection.

We consider how the fluidity of the concept of humanitarian medicine has largely been produced by acts of remembering and forgetting. Our papers use African case studies from 1980 to the 2010s to explore discursive narratives of success based on the introduction of specific products (e.g., Plumpy'Nut for severe acute malnutrition) and sets of guidelines and coordination (e.g., Somalia's primary health care-focused Refugee Health Unit), and, conversely, the perception of abject failure of uncoordinated response to a technically less challenging epidemic (cholera response and the Rwanda evaluation leading to the Sphere Project, Glasman 2021).

The links between global health, international development, and humanitarian medicine have been especially blurred in some sites of intervention, where many humanitarian and development actors have long contributed to the provisions of the ministry of health. As one of our papers explores, in Malawi, the provision of HIV chronic treatments and more recently oncology and palliative care reshapes our understanding of humanitarian medicine, as defined by what self-identified humanitarians do. More broadly, our panel draws on the burgeoning body of scholarship in global health history on the meanings of success (Birn 2009 and 2011, Winters 2024), which highlight the power of using archival methodologies to critically interrogate success narratives emanating from institutions of power.

Learning objectives:

-Develop historical perspectives on the nature of humanitarian medicine and of its key exponents and debates in the 1980s-2010s

-Engage with the nexus between development and humanitarian action through the examination of African case studies

-Critically appreciate the context of clinical guidelines production and debates

-Reflect on the meanings of success and failure in emergency medical situations

- 2. Antje Van Kerckhove, University of Leuven: Consciousness, Conditioning and Control: Treating Vaginismus Through Pelvic Floor Physiotherapy in Belgium (1970-2000)
- 3. Madeleine Ware, Yale University: *Fit, but not too Fit: Moderating Health and Citizenship through Interwar Pelvic Floor Dance Therapeutics*

Research in the field of "women's health" has predominantly focused on reproductive topics such as pregnancy and contraception. Through a series of case studies organized in two panels, we investigate how the oftenoverlooked dimensions of pelvic health and wellness are influenced by medical and cultural factors, including: feminist activism and solidarity building, the politics of health autonomy and citizen science, and national and transnational information exchange on pelvic disorders. Together, these contributions illuminate the interplay between individual experiences of pain and discomfort, and collective models of care that prioritize selfassessment and access to health information. By addressing the tensions between clinical care and patient experiences, these two panels enhance our understanding of feminist health activism and the complexities of gender identity and sexual health.

The first panel examines how diverse conceptions of "leaky bodies" have influenced experiences related to bacterial infections of the urinary tract and vagina. By exploring historical narratives surrounding bodily discharge, the papers analyze how societal attitudes towards these conditions have evolved, and how, how, despite the proliferation of medical information regarding leakage, infections, and pelvic floor therapy, women's experiences of discharge remain entangled with stigma and shame. The second panel emphasizes how women have actively shaped clinical and cultural understanding of their pelvic health conditions. This includes an exploration of the racial origins of the "dancer's body" in pelvic floor therapy, the development of cervical screening programs, and the role of citizen activists in demanding information about endometriosis treatments. Through feminist information advocacy, these efforts provided crucial health information—and corrected misinformation—to thereby reframe societal expectations about health and fitness.

8:30am – 10:00am	С	H3. Challenges in Public Health Moderators: Jacob Moses	Hampton (Sheraton, Level 3)
		Speakers: Karen Flint, Abena Dove Osseo-Asare, Robin Scheffler, Gabrielle	Corona
		H3. Challenges in Public Health	
		Chair: Jacob Moses, University of Texas Medical Branch at Galveston	
		 Karen Flint, University of North Carolina-Charlotte: Contesting Cholera: Navigati Health from India to Natal Abena Dove Osseo-Asare, University of Texas at Austin: "Stop AIDS, Love Life". Ghana before and after the outbreak of HIV Robin Scheffler, MIT: From "Orange Eyed" Creatures to "Unpleasant Odors": The Biotechnology Gabrielle Corona, Princeton University: Plasma, Public Health, and Prisoners in Louisiana 	: Condom Campaigns in e Impact of Urban Health on

8:30am – 10:00am	С	 H4. Medical Technology: Innovations, Research, and Politics Moderators: Michelle LaBonte Speakers: Samin Rashidbeigi, Heidi L Hausse, Sophie Grapentin, Kirsten Mod H4. Medical Technology: Innovations, Research, and Politics Chair: Michelle LaBonte, Purdue University 1. Samin Rashidbeigi, Rice University: A Soviet Medical Legacy: Blood Transfusion 2. Heidi Hausse, Auburn University: What Could a Sixteenth-Century Prosthetic Hau Printing 3. Sophie Grapentin, Yale University: 2,000 Cubic Inches of Freeze-Dried Skin – Me Diplomacy in Cold War Brazil 4. Kirsten Moore-Sheeley, Cedars-Sinai Medical Center: Defining the Human Aspec Research, and the Limits of Technology, 1970s-1990s 	from Cadaver nd Do? A Case Study in 3D edical Technology as
10:00am – 10:30am	N	Refreshment Break	Commonealth Ballroom Foyer
10:30am – 12:00pm	С	 I1. Epidemiological Knowledge and Historical Thought from the Middle A Moderators: Kristen Ann Ehrenberger Speakers: William McGrath, James Downs, Ori Ben-Shalom I1. Epidemiological Knowledge and Historical Thought from the Middle Ages to Chair: Kristen Ehrenberger, University of Pittsburgh 1. William Aidan McGrath, New York University: Beyond the Black Death: Plague in 2. Jim Downs, Gettysburg College: Paving the Way for Germ Theory: Yellow Fever, Epidemiological Society in the Caribbean 3. Ori Ben-Shalom, Harvard University: Plague in the Archives: Medicine and Histor Plague of Messina (1743) Since ancient times, outbreaks of epidemics have been experienced as unparalleled a particular historical awareness in those living through them. Medical knowledge abc and continues to draw on histories of diseases in order to study and confront them. Trelationship between historical thinking and epidemiological knowledge by examining between the individual and social experience of epidemics, their historicization, and the presentations in the panel inquire into different historical contexts, from Medieval Tibe the Caribbean in the nineteenth century. All papers, however, deal with the impact epi historical, had on those responding to them. They ask how physicians and public head formed medical knowledge in reaction to historical events, and they scrutinize what m history assumed within their work. By so doing, this panel provides a necessary comp study of epidemics, showing that certain scientific practices were as common as the othem. In addition, by joining pre-modern and modern case studies, it also contributes understanding of the relationship between modern epidemiology and its antecedents. 	Fairfax (Sheraton, Level 3) Modernity <i>Tibet</i> <i>Syphilis, and The London</i> <i>ical Thought during The</i> historical events that incited out epidemic diseases drew his panel discusses the the inherent connection heir theorization. The t and early modern Sicily to demics, both recent and th experts across time leaning the practice of parative approach to the epidemics that stimulated to broadening the
10:30am – 12:00pm	C	 I2. Reproductive Health in Global Perspective Moderators: Evan Roberts Speakers: Elizabeth Foster, Jennifer Kosmin, Arnav Bhattacharya, Minji Lee I2. Reproductive Health in Global Perspective Chair: Evan Roberts, University of Minnesota 1. Elizabeth Foster, University of Cambridge: <i>"I must know if it is Gonorrhea before Patients' Agency at a Twentieth-Century Venereal Disease Clinic</i> 2. Jennifer Kosmin, Auburn University: Forensic Medicine and Fetal Viability in Nine 3. Arnav Bhattacharya, University of Pennsylvania: <i>"Rejuvenating the Soul of the Nasexual Health, and Medicine in Early to Mid-Twentieth Century India</i> 4. Minji Lee, Montclair State University: Cause versus Cure of Leprosy: Hildegard of Menstruation in Cause et cure 	teenth-Century Italy ation": Endocrinology,

- 1. Devon Golaszewski, Colgate University: French colonial benevolent associations and infant health programs in Mali, 1918- 1950"
- 2. John Carranza, Texas State University: "Life from an Iron Lung: Polio and Civic Participation in 1930s America"
- 3. Valentina Parisi, Columbia University: "The Third Frontier": The Development of Influenza "Observation Zones" by the Rockefeller Foundation during the mid-1930s through 1940s

This panel explores the relationship between philanthropic institutions and the state between 1900 and 1950, drawing on examples from different imperial and regional contexts. Paper 1 explores the role of French women's benevolent associations such as the Berceau Africaine in the provision of reproductive health care in interwar colonial French Sudan (Mali). Paper 2 considers the role of the Rockefeller Foundation in the creation of "observation zones" and laboratory networks for the study of influenza and mitigation of pandemic threats during the interwar period and World War II. Lastly, Paper 3 examines the work of the Philippine Islands Anti-Tuberculosis Society in Manila and Hawaii during the early twentieth century, and the Society's influence in transpacific tuberculosis control and management through concentrated programming in schools and sugar plantations.

The papers reveal the centrality of philanthropic organizations to national and imperial health systems during the first half of the twentieth century. These papers underscore complex partnerships between philanthropic institutions and different sectors of government-including the health system, schools, and the military-that targeted diverse population health issues, from infectious diseases to maternal health. The partnerships are diverse, reflecting both direct partnership between institutions and the state, as in the case of the Rockefeller organization and the military during wartime, as well as state co-optation of disease control procedures and educational models, such as in the case of the Anti-Tuberculosis Society.

These papers ask: How did philanthropic initiatives reflect and produce expectations about normative state services and interventions? Were these processes different in the context of formal or informal empire? Were philanthropic programs a response to missing state resources or gaps? How were different groups–from experts to companies to elite women–mobilized to act as proxies for state health services? Who funded these philanthropic organizations, and what was their relationship to commercial interests? How did philanthropic-state collaborations inform broader conceptualizations of race and population "hygiene," citizenship, and security? These papers highlight how philanthropic institutions shaped longstanding ideas of disease risk and surveillance, hygienic and unhygienic behaviors, and "model" populations with lasting influence on state approaches to disease control throughout the twentieth century.