



PROJECT MUSE®

---

## American Association for the History of Medicine: Report of the Ninetieth Annual Meeting

Jodi L. Koste

Bulletin of the History of Medicine, Volume 91, Number 3, Fall 2017,  
pp. 624-657 (Article)

Published by Johns Hopkins University Press

DOI: <https://doi.org/10.1353/bhm.2017.0062>



➔ *For additional information about this article*

<https://muse.jhu.edu/article/674947>

---

# American Association for the History of Medicine: Report of the Ninetieth Annual Meeting

The ninetieth annual meeting of the American Association for the History of Medicine was held in Nashville, Tennessee, May 4–7, 2017, at the Sheraton Grand Nashville Downtown. The following summary has been prepared by Jodi L. Koste and is intended for the information of the members of the association. The official minutes and reports are preserved in the Office of the Secretary. The final meeting program, featuring the titles of the papers and the names of all the presenters, may be found on the AAHM website at <http://histmed.org/meetings.html>.

## Minutes of the Annual Meeting of the Council of the American Association for the History of Medicine, Inc.

May 4, 2017

The regular meeting of the AAHM Council was called to order by President Chris Crenner at 12:50 p.m. in Studio 4 of the Sheraton Grand Nashville Downtown. All officers and council members were present except Joel Braslow and Alan Kraut. Marta Hanson, candidate for council, was welcomed as an observer.

Council approved the minutes of the 2016 council meeting as published in the *Bulletin of the History of Medicine* Vol. 90, No. 3, 2016: 491–534. The council reviewed, discussed, and accepted the reports of the secretary, treasurer, and the association's standing and ad hoc committees.

## Report of the Secretary (Jodi Koste)

The Office of the Secretary remained busy during the past year responding to member inquiries, planning the annual meeting, posting information to the AAHM website, and connecting the media and general public to historians of medicine.

Following the successful Minneapolis meeting, the officers, in consultation with the members of the 2016 Local Arrangements Committee, evaluated the services of the Chesapeake Health Education Program, Inc., (CHEP) and our meeting planner, Carly Spiewak. Having concluded that CHEP's service, and in particular the work of Ms. Spiewak, was excellent, the officers began the process of negotiating a new contract for 2016–2017. Although CHEP declined to offer AAHM a multi-year contract, we did secure a reasonable agreement, and our good service with CHEP has continued. Planning for Nashville has been enhanced by Ms. Spiewak's first-hand knowledge of the AAHM and our membership. She continues to lift a considerable burden from the members of the Local Arrangements Committee and the Office of the Secretary. Our current contract runs until July 31, 2017.

The Office of the Secretary hosted a meeting of a small working group on December 1, 2016, to discuss revisions to the association's Blue Book. The group reviewed the document in its entirety and made suggestions for major changes and revisions. The project has required a great deal of time as we work toward incorporating the many changes that have been made to our meeting format and the planning process since the last version of the document was created in 2011.

The Johns Hopkins University Press (JHUP) continued as the association's membership fulfillment service provider, and we enjoyed a satisfactory working relationship in the last year. We continue to benefit from the registration services JHUP provides at no additional charge, the support of their association liaison, and their working knowledge of our needs. Member complaints have fallen as JHUP has been able to make changes to their software and web interface to improve usability. The JHUP system is not as robust as some, but AAHM members now have ready access to much more data than in the past.

The volunteer speakers bureau created in 2015 has continued to be a useful resource. A number of members have agreed to offer their services in the last year by completing the form available on the AAHM website. One of the challenges of our current set-up for connecting historians to those who need expertise in the history of medicine is timeliness. In some cases, those seeking assistance are willing to wait several days or a

week for a response, but in other cases, particularly those that involve the media, a more instant response is desired. One solution might be a special distribution list where inquiries may be posted and those members who volunteer to participate can respond directly in a more timely fashion.

For the first time in a few years council did not hold a virtual meeting but was able to stay abreast of association business through email communication and contact with the officers. As a member of the American Council of Learned Societies, the association has access to a number of resources including an active listserv of association executives. Many societies like ours are grappling with the rising costs of doing business and declines in membership and meeting attendance. Some are turning to other associations and groups to explore collaborations of mutual benefit. The History of Science Society has approached the association a couple times in the last year to explore options of working together to promote membership and our specialized disciplines. We look forward to exploring new opportunities and ideas for making the association stronger.

As of April 2017 there were 861 members of the association, 86 fewer than in April 2016. The current profile includes 729 members from the United States (778 in 2016), 124 student members (149 in 2016), and 132 international members (169 in 2016). There is a decrease in each category of membership but more significant percentage drops in number of international and student members. Beginning in 2015 the association has included a year of membership in the annual meeting registration fee for non-members. This may account for increases in certain membership categories depending on the number of international scholars or graduate students participating in the annual meeting. It appears that many of these individuals who become members through the meeting registration process are not electing to renew their membership in future years.

The AAHM Facebook group continued to add new members and has seen regular activity throughout the year. Many of the group's members have found it to be a useful platform for announcing publications, programs, new resources, and other information related to the history of medicine. The Facebook group now has 2,093 members (242 more than in 2016).

Since April 2016 the association has learned of the death of the following members and extends it condolences for the loss of:

Jean Whalen, Philadelphia, PA

Respectfully submitted by: Jodi Koste, AAHM Secretary

## Report on the Financial Status of the AAHM for 2016 (H. Hughes Evans)

- I. The independent accountant's review report for 2016 on the finances of the association as managed through our accounts at Merrill-Lynch. (The accountant's review report is on pages 654–57.)
  - a. The report shows that in 2016, the unrestricted assets of the association increased from \$324,372 on 12/31/15 to \$341,139 on 12/31/16 (p. 654). Membership dues collected in the year 2016 were \$87,070, down from \$97,829 in 2015. This figure reflects dues received before 12/30/16.
  - b. Notable figures reflected on the balance sheet between 2015 and 2016 are:
    - i. Investment income reflects the return of interest and dividends on the association's investment accounts. There was an increase in this amount, from \$6,238 on 12/31/15 to \$6,329 on 12/30/16.
    - ii. There was a significant positive increase in the net realized and unrealized gains/losses on marketable securities as of 12/30/16 to \$10,193. On 12/31/15 the amount was (\$5,360).
    - iii. Revenue from awards as of 12/30/16 was \$0.00, which normally reflects transfers from the History of Medicine Foundation (HMF) to the AAHM for awards given in 2016. This line reflects money paid by the foundation to support the annual prizes given at annual meeting by the association and awarded at the annual meeting banquet. On 12/31/15 the amount was \$8,114.
  - c. Notable figures reflected on the schedule of expenses on p. 654 are:
    - i. Expenses for publications in 2016 came to \$35,341. (Please note that we count membership dues as revenue and then we count the cost of Johns Hopkins University Press subscriptions as expenses, which means that the more we bring in from membership dues the higher our expenses for publications.) This figure compares to \$37,925 in 2015.
    - ii. Administrative expenses in 2016 were \$23,221 (They were \$28,055 in 2015.)
    - iii. There was an annual meeting expense loss in 2016 of \$(11,761). In 2015, the annual meeting loss was (\$2,993). The AAHM employs the "cash basis of

accounting” method, which means that expenses are posted in the year they accrue.

- II. The year-end statement for the AAHM Endowment Management Account. The AAHM funds are invested as follows: The AAHM operating account (the fund used to pay for operating costs throughout the year) is invested 100% in cash. The AAHM reserve account is invested for both growth and income, and we seek to maintain a balance of approximately 50% equities and 50% fixed income. On December 30, 2016, its holdings were as follows: cash, 11.43%; equities, 41.36%; fixed income 47.21%.

The net portfolio value for the combined AAHM accounts (checking and reserve) as of 12/30/16 was \$341,937.53. Of that amount, \$69,524.58 was in our operating (checking) account, and \$272,412.95 in the reserve account. The reserve account is rebalanced annually, typically in the spring.

- III. Report of the holdings and status of the investment accounts of The History of Medicine Foundation (HMF), given below.

The HMF has six separate accounts. Their year-end balances for December 30, 2016, rounded to the nearest dollar, are:

- a. Prize Endowment Account: annual prizes, not otherwise supported: \$420,988 (\$388,415 on 12/31/15).
- b. Pressman Account: annual Pressman Burroughs-Wellcome award, \$82,940 (\$77,794 on 12/31/15).
- c. Estes Fund Account: annual Estes Prize, \$18,253 (\$17,567 on 12/31/15).
- d. Rosen Award Account: \$56,355.21 (\$52,838 on 12/31/15).
- e. Executive Director Fund: \$1,209,026. This is the fund to endow a paid executive director position (\$1,114,670 on 12/31/14).
- f. 90 for the 90th: This was fundraising was associated with the associations’ 90th birthday celebration. Proceeds from this campaign are to be used to help support the annual travel awards: \$10,560.76.

The holdings in the investment accounts of the association and the History of Medicine Foundation are invested according to the investment policy approved by the council in 1999 at the New Brunswick meeting of the association and reaffirmed in 2008, with emendations approved by the Finance Committee and council in 2012, which allow for investments in individual stocks and bonds in the Executive Director Fund, and in 2014, which allow for investments in exchange traded funds as well as mutual funds in all accounts, and individual stocks and bonds in the Prize Account .

Respectfully submitted, H. Hughes Evans, Treasurer

## Summary of Motions Passed by Council

Council discussed the declining number of members and offered ideas on increasing membership. In the next year we will ask the Membership Committee to undertake several tasks to target former members as well as strategies to reach out to potential new members.

Council accepted the invitation of the University of Michigan to host the 2020 meeting of the association in Ann Arbor, Michigan.

Council approved the creation of an official listserv to help handle inquiries from the media and general public related to the history of medicine. This will supplement our existing speakers' bureau list.

Council approved the new members of the editorial board for the *Bulletin of the History of Medicine*.

Council will ask the Education and Outreach Committee to compile and update a list of graduate programs in the history of medicine, nursing, science, and allied fields.

Council will ask the Welch Medal Committee to submit a list of the monographs reviewed by the committee as part of its official committee report.

Council took three actions that will affect the work of future program committees: 1) proposals for panels will be evaluated as a whole and will be accepted or rejected based on the strengths or weaknesses of the individual abstracts for the proposed panel session; 2) Members of the program committee may not submit abstracts for individual papers but may participate in lunch workshops, invited plenary sessions, or Thursday evening programming; and 3) Program Committees will be asked to compile an addendum to their report to council after the annual meeting is held.

Council reviewed the request of the Rosen Prize Committee and will invite Susan Rosen Koslow to comment on the new proposed language to define the history of social medicine. Council also approved a bylaw change to set a five-year timeframe for eligible scholarly works to be considered and to alternate the giving of the award for a book and then in the next year recognizing a non-book contribution such as a film, exhibit, article, or digital media project.

Council adopted a conflict of interest policy for award committees.

Council created an ad hoc committee on development to draft guidelines for naming travel grants, to encourage fund raising for the association's existing endowments, and to explore ideas for a major campaign to coincide with the association's 100th anniversary in 2025.

Council adopted a statement on nondiscrimination and sexual harassment.

In the past year we received a request to sponsor a session at the AHA. Council decided that the officers of the association will review proposals

for sponsorship and approve if appropriate and if there is at least one AAHM member on proposed panel.

Council passed a motion to create a standing committee to handle travel grants and amended the bylaws accordingly.

## Standing Committee Reports

**Finance Committee.** Hughes Evans, AAHM treasurer, sent the committee her report on the financial status of the AAHM as of mid-March, 2016. Her report covers three areas: the accountant's report, the statement of the AAHM Endowment Management Account, and the report on the holdings of the AAHM Foundation Account. The committee finds the treasurer's report and the supporting documentation to be in good order. The AAHM books balance. The allocations within the investment accounts are largely in accord with the investment policy that council approved in 1999 with emendations in 2008, 2012, and 2014.

Our current policy requires that we not hold investments in tobacco stocks. Merrill-Lynch is now able to screen for common investment preferences (e.g., tobacco, alcohol, etc.) for accounts managed by them and has applied a tobacco screen to AAHM holdings. Black Rock manages the Executive Director Fund and has had the ability to screen for tobacco stocks for several years and has insured that we do not invest in tobacco stocks. The screens cannot be applied to mutual funds and exchange traded funds (ETFs), however, which comprise part of our diversified portfolio. Merrill-Lynch states that so-called "sin stocks" are a very small part of overall mutual fund and ETF holdings, and that to divest all of our accounts of mutual funds and ETFs would not be wise.

Merrill-Lynch has other screens that it can use on managed accounts, including screens for guns and ammunition, and for alcohol. The Finance Committee draws council's attention to this ability so that council may discuss whether or not the AAHM and the AAHM Foundation wish to revise our investment strategy to apply additional screens to our managed accounts.

We encourage council and the membership to consider beginning to plan a fundraising effort for our 100th anniversary in 2020. Creating a three-person committee with members experienced in fundraising could be very helpful, both to recommend a set of priorities for the funds and to initiate specific efforts. We also would like a fundraising committee to explore how the AAHM could encourage members to consider the organization during estate planning.

We commend Hughes for completing her second year as treasurer so skillfully.

Respectfully submitted, Susan C. Lawrence, James Bono, and Justin Barr



**Nominating Committee.** The AAHM Nominating Committee is pleased to provide you with our slate for AAHM Council—for circulation in advance to the AAHM membership through the *Newsletter* and for voting at the next business meeting in Nashville in 2017.

For council through 2020:

Justin Barr, MD, PhD, Duke University

Marta Hanson, PhD, Johns Hopkins University

Mical Raz, MD, PhD, University of Pennsylvania

Shannon Withycombe, PhD, University of New Mexico

Respectfully submitted and with our gratitude to all the nominees for their willingness to continue to serve AAHM in this way, David Jones, Micaela Sullivan-Fowler, and Sarah Tracy (Chair)

**Publications Committee.** New proposed members for the *Bulletin of the History of Medicine* editorial board are: Mariola Espinosa, Kevin Siena, Sarah Tracy, and Daniel Wilson.

We discussed the status of the *Newsletter* and the website with Jodi Koste. Both are running smoothly.

There is a slight problem with access to the AAHM's syllabus archive. History of medicine syllabi are currently found through Google on the NLM website, and that site has not been updated since 2008. We are working with Carolyn McLaughlin to provide access to the syllabi or a link to them from the AAHM website. We are also talking with Carolyn about ways to use social media to promote the syllabi archive.

Sincerely, Rima Apple (Chair), Christine Ruggere, and Scott Podolsky

**Annual Meetings.** The AAHM Annual Committee had before it the task of recruiting venues for future annual meetings, in 2018 and 2019. I am pleased to report that we have firm commitments for 2018 (Los Angeles) and 2019 (Columbus, OH). We had several conversations about the desire to see the AAHM host a west coast meeting (not having been on the Pacific side since Seattle hosted in 1992), and this led to preliminary discussions with colleagues in the Los Angeles area, particularly Russell A. Johnson, MA, MLS (Curator for History of Medicine and the Sciences, UCLA Library Special Collections); and Howard M. Rootenberg (B & L Rootenberg Rare Books). They form the Local Arrangements Committee for Los Angeles, along with Joel T. Braslow, MD, PhD (Professor of Psychiatry & Biobehavioral Sciences and of History), and extended an invitation to the AAHM in August 2015. The Los Angeles LAC indicates that the meeting will be held in UCLA's Meyer & Renee Luskin Confer-

ence Center and that possible nearby locations for the Garrison Lecture, Awards Program and Reception, and tours include: The UCLA/Hammer Museum auditorium and courtyard; Fowler Museum at UCLA; the Freud Playhouse (a theater and courtyard in UCLA's School of Theater, Film, and Television; and (possibly) the J. Paul Getty Museum's Getty Center.

As these conversations proceeded, we entered into discussion with Jacqueline Wolf (Ohio University) and Susan Lawrence (Ohio State University) about the possibility of AAHM being hosted in Columbus, OH, in 2019. That proceeded well with the LAC of Wolf and Lawrence tendering an invitation to the AAHM, which was accepted. They have secured a hotel and will be making more firm plans shortly. (I have volunteered to act in an ex-officio capacity as a member of the Columbus LAC).

During the many phone conversations that I had in the past several months, yet other venues emerged for consideration beyond 2019. These include possibly Providence, RI (Hal Cook and Richard Meckel, Brown University); and Norman, OK (Sarah Tracy, the University of Oklahoma). Those conversations went well enough, but did not result in any commitments. We agreed, however, to continue those discussions in Minneapolis. Other cities that were the subject of discussion included Cincinnati and Houston, and I will continue to pursue those possibilities. On the negative side, I had some very frank discussions about other possible venues, including Ann Arbor, MI, and Washington, DC. Colleagues in those municipalities explained that however intriguing those two sites might appear from outside, it was highly unlikely that they could consider hosting the AAHM. The former lacked an appropriate hotel/convention center, and the latter poses challenges from the standpoint of raising adequate funding as most possible support for the history of medicine resides in federally funded institutions, which could not independently raise the necessary funds.

The committee is very shortly to be understaffed, as members rotate off, and I will be spending time at the meeting in Minneapolis recruiting new members to bring it up to a full complement.

Respectfully submitted, James M. Edmonson, Chair

**Committee on Student Affairs.** The committee consists of: Sean P. Phillips, University of Notre Dame (Chair), and Prof. Walt Schalick, University of Wisconsin (Faculty Representative)

No Report

**Osler Medal Committee.** The Osler Medal Committee for 2016–17 was composed of Lisa Bob, Powel Kazanjian, and Michael McVaugh (Chair).

It had received seven submissions by the announced deadline of January 27, 2017, which were circulated to all members of the committee; their relative merits were then discussed by email, and a final ranking agreed on. The committee felt that three papers were deserving of an award:

Medal winner: Christopher Sterwald, Duke University Medical School, for “Frosted Intellectuals: How Leo Kanner Constructed the Autistic Family”;

First honorable mention: Sarah Tapp, Emory University School of Medicine, for “‘Mothers, Mongols, and Mores’: Physician Advice to Parents of Newborns with Down Syndrome in the Mid 20<sup>th</sup> Century”;

Second honorable mention: Matthew Edwards, University of Texas Medical Branch School of Medicine, for “Freedom House Ambulance Service: Race and the Rise of Emergency Medical Services, 1967–1975.”

Respectfully submitted, Michael McVaugh, Chair

**Shryock Medal Committee.** While this year’s competition was disappointing in terms of the number of entries—just three—it was far from disappointing in the quality of these submissions. All three were of an excellent standard in the view of the judging panel, composed of: Adam Biggs (USC Lancaster), Linda Bryder (University of Auckland), Hilary Marland (Chair; University of Warwick), and Stephen Pemberton (New Jersey Institute of Technology).

The panel (almost unanimously) selected Wangui Muigai “*All My Babies: Black Midwifery and Health Training Films in the 1950s*” (Princeton University, Program in History of Science, Advisor Keith Wailoo) as the very worthy winner of the Shryock Medal for 2017. We were particularly impressed with the quality of the writing, the way the piece spoke to the complexities of race and gender in the US, and the excellent primary source work underpinning this essay. The essay provided a well-contextualized and beautifully crafted reading of the midwifery training film *All My Babies*, unpacking the process of producing the film, its production values, and the ways in which the filmmakers dealt with sensitive issues. We also got a very good account of the film and its reception and the midwife who was the central focus of the film, Mary Coley. The essay delved into the paradoxes of efforts to improve rural health in the Jim Crow South, and traced the role of midwifery in playing a critical role in the delivery of health care to African Americans.

The panel were highly impressed by the other two essays and recommended that these both be given an Honorable Mention. The AAHM officers were happy to support our recommendation.

Again we were struck with the quality of the writing and the impeccable research behind the two highly commended essays. Vicky (Fama) Daniel's "Medical Identification and the Emergence of a Forensic Paradigm at the 1949 *Noronic* Disaster" (University of Wisconsin-Madison, Program in the History of Science, Medicine, and Technology, Advisor Judith Houck) showed an excellent grasp of the complex subject matter of forensic investigation, and the essay made an original and insightful contribution to our understanding of expertise and scientific authority in twentieth-century medicine and science. This was recognized as a difficult topic to research without an established secondary literature in which to locate it. The essay made a major contribution to our understanding of medical history in showing how the role of the family was sidelined by experts, and provided an excellent account of the ways in which medicine drew on a range of experiences, techniques, and diverse knowledge to detect the identity of human bodies.

Elaine La Fay's "'The slandered torrid zone': Medicine, Botany, and Imperial Visions of the American Tropics along the US Gulf Coast, 1820–1840" (University of Pennsylvania, History and Sociology of Science Dept., Advisor David S. Barnes) was also eloquently written and meticulously referenced, telling the story of Henry Perrine's dream to convert South Florida into a site for cultivating tropical plants and a haven for invalids, who would themselves be involved in the botanical project. It engaged effectively with contemporary understandings of the tropics as places of risk and danger as well as their potential health benefits. The essay showed great skill in situating the topic within a broad historiographical framework and for the ways in which it analyzed the connections among the histories of medicine, environment, nationalism, expansion, and race.

The judging proceeded very smoothly. There were no conflicts of interest.

The main issue to be addressed next year is how to bolster the number of essays submitted for this important and prestigious competition. This might be achieved by wider promotion at the AAHM itself (possibly fliers in conference folders) and by advertising the competition on social media. Further clarification in these announcements on the openness of the competition to overseas graduate students might encourage more entrants, as well as forwarding details of the competition to the websites of the SSHM and EAHMH.

Submitted by Hilary Marland, Chair

**Welch Medal Committee.** The winner of the Welch medal is Johanna Schoen for her book, *Abortion After Roe: Abortion After Legalization* (UNC). The committee found this book to be extremely well-written and one that tackled entirely new ground as Schoen investigated the history of a stigmatized specialty and procedure. It addressed what we might think of as rather “traditional” topics in the history of medicine, such as the rise of a medical society and tensions within it, clinical practice, development of medical techniques, instruments, medical science, and relationships among various health providers and hospitals, while considering the influence of law, feminism, and politics.

There are a couple of things that we might want to clarify on our website about the Welch Medal:

- 1) We do not consider self-published or institution-published (such as by hospitals) volumes (vanity presses).
- 2) The nomination process—put in the exact years of publication for books that may be considered. There is always a lot of confusion about which five years, and books are submitted that are too early.
- 3) Who may nominate? Is a letter required from someone, the publisher, an AAHM member (no), may the author self-nominate? Much confusion on this point. I don’t think we should require letters; there would be fewer nominations. Very few people nominate books; a few nominate their own. One or two books are nominated by the committee.

Two issues that we resolved as have other committees and presume would be followed again:

- 1) The medal is not a career medal, although it has in the past been given for that reason. This follows the recommendations of the ad-hoc committee from several years ago, and we have a life-time achievement award. The medal is for the best book in the history of medicine as described. It might be useful to put this in explicitly.
- 2) We discussed whether we put more weight on or should for work that is non-US and possibly non-twentieth century and concluded that that was not the priority of the medal. Further, the medal (and other awards) has gone to non-US, non-Europe books—including last year’s. We are all interested in non-US colonialism and medicine, but this was not a priority over other geographical areas or types of histories.

The committee took its job very seriously and looked carefully at nearly fifty books and then read nine finalists. We had a range of scholars in terms of the kinds of research they did, geographic areas, time periods, and where they were located—Manchester, England/Penn, NLM (now Sweden), U. Illinois, Yale, UC Santa Barbara. We had a very hard-working

committee, and I think the committee made an excellent choice after much careful consideration of the books it received.

Submitted by: Leslie Reagan, Chair

**Genevieve Miller Lifetime Achievement Award Committee.** The American Association for the History of Medicine established the lifetime achievement award in 1988 and it was named for Genevieve Miller in 2014 to honor her contributions to the history of medicine and the association. The award is given annually to a member of the association who has retired from regular institutional affiliation or practice, with a distinguished record of support for the history of medicine over many years, and who has made continuing scholarly contributions of a distinguished nature.

From a pool of eleven distinguished candidates, we nominated Daniel M. Fox as the recipient of the 2017 Genevieve Miller Lifetime Achievement Award.

Dr. Fox's career spans over half a century of scholarship, teaching, and public service from his graduate work in intellectual history with Donald Fleming at Harvard to his long tenure with the Milbank Memorial Fund, of which he is now president emeritus.

Fox has published important articles in our own *Bulletin* as well as in the *Journal of History of Medicine and Allied Sciences*. He has authored well over a dozen books that have made their mark on our field in diverse ways.

His teaching at Harvard and elsewhere has extended his impact to students and his service at the state and federal level has brought history of medicine and public health to bear on important policy matters in the wider society.

The Milbank Memorial Fund was established in 1906 "to improve policy and practice aimed at the health and social welfare of the poor" and under the leadership of Dr. Fox, it has continued to do so over a century later.

For his distinguished career, his diverse contributions, and his impact both inside and outside the academy, the committee unanimously nominates Daniel M. Fox as the 2017 recipient of the Genevieve Miller Lifetime Achievement Award.

William C. Summers (Chair), Elisabeth Watkins, and Kenneth M. Ludmerer

**Estes Prize Committee.** The Estes Prize Committee has made its decision, and out of a pool of thirty potential articles, it has decided that this year's recipient of the Estes Prize is Dr. Anna Winterbottom, a postdoc-

toral research fellow in the Department of History at the University of Sussex, for her article, “Of China Root: A Case Study of the Early Modern Circulation of *Materia Medica*,” *Social History of Medicine* 28 (2015): 22–44.

**Pressman-Burroughs Wellcome Award Committee.** The Pressman-Burroughs Wellcome Committee selected Rachel Elder of the University of Pennsylvania as the 2017 recipient of the Jack D. Pressman-Burroughs Wellcome Fund Career Development Award.

**George Rosen Prize Committee.** The 2016–2017 George Rosen Prize Committee consisted of David Barnes (Chair), Hal Cook, Evelyn Hammonds, Caroline Hannaway, and Lisa O’Sullivan. We received nominations for ten eligible books and two articles, as well as quite a few books with publication dates in 2016—which were technically ineligible. I would like to propose that the association consider changing the eligibility rules so that works published in the year of the submission deadline (as well as in the two previous calendar years) may be considered. I do not see any substantive reason for excluding works published in the current calendar year from consideration.

The Rosen Prize is still young, and it is incumbent on all interested parties to actively encourage nominations of potentially eligible works. I look forward to the day when the Rosen Committee is overwhelmed with submissions. There was some feeling among committee members that articles (not to mention films or museum exhibits) are at an inherent competitive disadvantage relative to books, and that comparing apples and oranges is not appropriate.

The definition of “social medicine” has bedeviled previous Rosen Committees. I enlisted the help of Jason Chernesky (Ph.D. candidate, University of Pennsylvania) to help me interpret George Rosen’s writings on this subject. As previous committees have realized, Rosen’s attempt to define the term in his essay “What Is Social Medicine?” is unhelpfully vague and loose. However, the historical examples he cites in the same essay help clarify the issue to some degree. With additional suggestions from Hal Cook, I offer the following proposed addition to the Rosen Prize criteria (to replace the two sentences in the current prize announcement beginning with “‘Social medicine’ here refers to ...”):

Throughout his career, George Rosen honored and perpetuated a tradition of care, research, and activism that he and others called “social medicine.” It is a tradition (dating back at least to Rudolf Virchow in 1848) rooted in the recognition that economic, political, and social disenfranchisement produces

illness and suffering, and that those forms of inequality and marginalization must be addressed in order for improvements in population health to be realized. Within health care systems, social medicine's adherents have also worked to serve the broader needs of patients and their families beyond the provision of medical treatment. The George Rosen Prize honors work that enriches our understanding of the history of public health or of the social medicine tradition.

The winners of the 2017 George Rosen Prize are Marcos Cueto and Steven Palmer for their book, *Medicine and Public Health in Latin America: A History* (Cambridge University Press, 2014). The committee was tremendously impressed by the book's wide scope, accessibility, and rigorous reinterpretation of existing scholarship in the field.

Submitted by David Barnes

**Garrison Lecture Committee.** The Garrison Lecture Committee, consisting of Carin Berkowitz, Vanessa Northington Gamble, Martha Gardner, Jeremy Greene, and Todd Olszewski (Chair), is delighted to unanimously recommend Julie Fairman of the University of Pennsylvania to present the 2018 Fielding H. Garrison Lecture during the annual meeting in Los Angeles, CA.

**Local Arrangements Committee.** The 89th annual meeting of the AAHM was hosted by the University of Minnesota (UMN) in Minneapolis the last weekend in April 2016, overlapping by a day with the annual meetings of the American Osler Society (AOS) and the Archivists and Librarians in the History of the Health Sciences (ALHHS). This was the first conjoint meeting of the AAHM and the AOS since the 2010 meeting at the Mayo Clinic in Rochester, MN, and the first AAHM hosted by a public U.S. institution since Birmingham in 2005 and Madison in 2004. The meeting offered a number of other "firsts": joint Sunday morning programming with the AOS; incorporating posters and brief poster sessions (a first in several decades); combining the association's award ceremony with the Garrison Lecture; holding a series of themed happy hours in lieu of a banquet; displaying local medical history information in the hotel's public areas; and using a professional meeting planner hired and paid for by the AAHM.

Attendance at the meeting was higher than anticipated with 375 being the high estimate: 430 people registered, including fifty-seven walk-in registrations. We ran out of printed programs.



*Local Arrangements Committee:* We had a small but dedicated LAC co-chaired by Jennifer Gunn and UMN History of Science, Technology, and Medicine graduate student Emily Beck, who also served as the graduate assistant organizer for the meeting. We'd particularly like to thank Neal Holtan, Susan Jones, Jole Shackelford, Dominique Tobbell, Juliet Burba, and Lois Hendrickson. Claus Pierach and Laurel Drevlow were the liaisons with the AOS and effectively part of the LAC. Lois Hendrickson was also the local arrangements chair for the ALHHS.

As always, the work of the LAC and the success of the meeting was made possible by the advice of previous LAC chairs John Harley Warner (New Haven), Mindy Schwartz (Chicago), and Bruce Fye (Rochester, MN), and the guidance, patience, and calm of the AAHM's secretary, Jodi Koste.

Ted Brown did the heavy lifting on the part of the Annual Meetings Committee to persuade Minneapolis to host a meeting on what ended up being fairly short notice. With the gift of hindsight, we thank him for his encouragement and the entire Annual Meetings Committee, which surely has one of the hardest and most underappreciated jobs in the AAHM. There were times in the middle when we doubted how grateful we were, but in the end, it was an honor and a very satisfying experience.

*Fundraising:* As a public institution in an era of shrinking resources, fundraising was our biggest concern. UMN faculty members are not permitted to approach local organizations that are considered to be large donor targets for the university (e.g., the medical device, agricultural, or food companies). Between the time when we committed to hosting the meeting and the meeting itself, there were a large number of institutional and leadership changes in the medical school and the regional health care landscape that affected our fundraising expectations. Local health care organizations we hoped would be significant donors did not come through or instead offered to pay for four or five registrations (the good news is that their physicians did attend!). We owe a great debt to Bruce Fye for getting us started with an initial personal donation, and to Peter Kernahan, who actively solicited medical school departments and local organizations. The majority of our support came from within the University of Minnesota, particularly the History of Medicine program's home department, the Department of Surgery, through its Wangenstein Surgical Society. The Program in the History of Science and Technology (Graduate Program in HSTM) provided a single-semester graduate assistantship, and the Academic Health Center provided additional support. Support also came from the School of Nursing, the University Libraries, the Departments of Integrative Biology and Physiology, Program in Human Anatomy, Institute for Advanced Study, the Center for Bioethics,

and the Department of History. Our colleagues in the Department of Medical History and Bioethics at the University of Wisconsin-Madison made a generous contribution, as did several individuals: Susan Jones, Jole and Frankie Shackelford, Jennifer Gunn, and Robert McKinnell.

To secure funding from UMN departments, we offered to display banners charting the sponsors' significant historical contributions. This was a fundraising strategy but it had unexpected benefits: the banners were interesting, tied the meeting to its location, and provided visual relief in windowless spaces; and several of these departments hired history of medicine graduate students to research and write the banner content.

We raised \$32,550 from donations, plus another \$11,000 in kind (the graduate assistantship). Book exhibitor fees and registrations, program ads, and totebag flyers brought in another \$11,885.

*Program:* The Program Committee, chaired by Scott Podolsky and Sarah Tracy, put together a fabulous and innovative program composed of sixty-one sessions and addresses, 209 papers and speakers, and fourteen posters. The programming planning was facilitated by Sarah Tracy's willingness to rendezvous with the LAC, Jodi Koste, and meeting planner Carly Spiewak in fall 2015 to go through the hotel venue and see what the spaces could actually accommodate. Scott Podolsky served as the liaison with the Osler program committee for working out our joint Sunday sessions.

The program, with six simultaneous sessions and a mix of three- and four-paper sessions, drew a large number of new faces to the podium and some exciting new areas of research. Following Yale's example of a Thursday session on the history of reproductive health, we offered a Thursday night session on writing the transgender history of medicine. Co-sponsored by the University Libraries' Tretter special collection of LGBT history, the evening showcased one of Minnesota's contributions to medical history. A historical exhibit from the Tretter Collection was hung on banners around the room for two days.

Among the highlights of the meeting were Margaret Humphrey's Presidential Address, "What's War Got to Do with It? Integrating Civil War Experiences into the American Medical Story," and Susan Lederer's Garrison Lecture, "Bombshells and Bioethics: Henry K. Beecher's 'Ethics and Clinical Research' at 50." For the first time, the awards ceremony followed immediately after the Garrison Lecture on Friday night, which meant that all attendees were able to participate in the awards. Since the Garrison Lecture was located in the hotel, it could start earlier and the awards could be added without causing mass starvation. The joint event was followed by a reception.

Working out joint programming with the AOS was a little more difficult than our original expansive vision because of the need to have at least some AAHM papers on Sunday morning. Conference attendance and reimbursement often depend on presenting a paper; to cut out all the Sunday morning sessions would have disadvantaged potential participants. The compromise was to schedule one joint AAHM-AOS session in each of the two Sunday morning time slots. The first was a panel on medical history in medical education, and the second combined a panel on the history of informed consent followed by the AOS's John McGovern Lecture. AAHM members were invited to stay for AOS afternoon sessions. The Sunday morning compromise was still problematic, particularly for AOS members who wanted to attend AAHM sessions scheduled opposite the joint sessions, but worth continued exploration. We had also discussed various ideas for cross-registration, but in the end decided just to maintain separate registration and that seemed to work well.

*Poster Sessions:* Posters were apparently a feature of the AAHM at some point in the relatively distant past, but an innovative revival. The Program Committee solicited posters directly and by asking some applicants not selected for a regular session if they'd like to do a poster. Responses among this latter category were mixed, from gracious willingness to refusal. By and large, the posters seemed to be a success, giving people a focus and food for thought during the breaks and bringing AOS and AAHM attendees together. They inspired conversations about strategies for visual communication that can only aid our larger project of communicating medical history. [Note that the venue's space could limit or make posters impossible; we were fortunate to have a very large atrium space.]

*Financial and Operational Decisions:* There was one unintentional misrepresentation about the cost of meetings (and therefore the amount of fundraising needed) in the materials provided by the Annual Meetings Committee. Most recent meetings had employed either a local conference planner or graduate student assistant or both, but these costs were not fully represented in the budgets, and the budgets we saw several years in advance did not, of course, come from the most recent meetings. That difference between what we thought we would have to raise and the actual cost if organizing assistance was counted was about \$20,000. This was rather a shock because it meant we really needed to raise more like \$60,000 than the \$35-40,000 anticipated.

This problem was solved in two ways: 1) the AAHM agreed to carry the cost of the professional meeting planner it hired, Carly Speiwak of CHEP; (\*Of course, as Margaret Marsh, then treasurer, pointed out, the membership pays the cost of the meeting planner whether we attribute

it to the annual meeting LAC or not. In recent years we have discussed abandoning the expectation that the annual meetings will produce a surplus that adds to the coffers of the organization. But a model in which the organization pays the meeting planner from central funds without attaching that cost to the meeting itself is not sustainable and continues the problem of subtly misstating the actual costs of the annual meeting.) 2) we planned for an affordable, “budget” meeting. Affordable meant not raising the registration fee from the previous two years and trying to be a “walking” meeting, guiding people to public transportation to and from the airport and local attractions. Budget primarily meant cutting the number of receptions and the amount of food offered, and holding the Garrison Lecture in the hotel to reduce rental and transportation costs (a decision reinforced by wholesale construction on the streets around the hotel and the difficulty of finding a venue of the right size within walking distance).

Carly Spiewak of CHEP was a joy to work with, and having an experienced professional meeting planner paid off in a number of ways. Carly knew what was normal and customary with hotels and was able to work with the hotel proactively to avoid additional charges, negotiate changes, and ensure a high level of service. As recent meeting hosts have discovered, AV charges are one of the biggest meeting expenses. Carly followed our desire to use local vendors if feasible and negotiated with the hotel, but in the end brought in an out-of-town AV company that provided stellar service at a price less than half that bid by the hotel, and came in under estimate. Because Carly is experienced with hotel catering, she was able to make our orders fit our finances in a way that did not really feel like “budget” food offerings. The AAHM had negotiated a relatively reasonable room rate when it signed the contract for the meeting three years in advance, but the block of rooms in the hotel quickly sold out, to the (loud) dismay of members. Despite a heavy spring weekend with a national volleyball competition in town, Carly persuaded several nearby hotels to reserve blocks of rooms at a rate close to the conference rate without requiring any commitment from the AAHM. Carly even found very desirable discontinued tote bags that enabled us to abandon our abstemious, vow-of-poverty tote bag plan. CHEP also handled CME credit efficiently and inexpensively, a solution to a longstanding problem for LACs. Our experience, even in the first year of having an AAHM-hired meeting planner, was that there is a huge advantage to having a professional planner, hired through a competitive bid and interview process, who is building an on-going relationship and experience with the AAHM.

*Venue:* Helms-Briscoe, as the agent for the AAHM and AOS, had sent the Minneapolis convention bureau a list of requirements for the meeting and generated a list of hotels and prices that met our requirements. Claus Pierach for AOS and I went around to look at the lower-priced hotels. We were so glad we did. Helms-Briscoe had not given the hotels realistic numbers (e.g., need room for twenty-five for the Women Historians' breakfast) and the hotels' numbers about how many people a room could accommodate were overly optimistic (or didn't account for space needed for a podium). We chose the Minneapolis Marriot City Center Hotel. The Marriott space had a big advantage in that it seemed to offer adequate space on one level around a large atrium and the room configurations seemed adequately roomy. They promised us reduced-price rooms for graduate students and discounted Internet fees for the guest rooms. But what they failed to say is that they would actually determine what space they thought we needed and rent out the additional space on that level to other groups at the same time. Locally, we felt like it was a case of bait and switch, although it was really just us not knowing to ask for exclusive access to the space. If we had not had Carly as the professional go-between, there might have been a very unhappy outcome. As it was, we had to move the book exhibit from its planned space to accommodate the Presidential Address and the Garrison Lecture in a less-than-ideal long horizontal arrangement.

We, too, changed somewhat from the original contract in that the Program Committee decided to offer six, rather than five, simultaneous sessions, which the hotel was able to accommodate by putting us on two levels, connected by escalators and elevators, at no additional cost. The fact that we had sessions and coffee breaks on two levels made moving the book exhibit more acceptable to the vendors (15 exhibitors, plus one History Day student project), who were shifted from the main floor to the smaller, upper level. In the end, the very large atrium space on the main conference level and lobby and terrace room space on the upper level allowed for adequate room for the posters to stay up for two days and for socializing and informal meetings. There was only one free Internet connection in each meeting room, which could have been highly problematic for tweeting the sessions or just general expectations of connectivity. Fortunately, the free Internet connections in the lobby seemed to mitigate people's concerns or frustrations with limited connectivity in the session rooms. There were also a number of late requests for spaces for breakfast meetings. What had the potential to become a contentious and/or expensive relationship with the hotel turned into a good one, with excellent service and attention from the hotel. We owe Carly Spiewak and the hotel for the latter.

*Registration:* was not as large as problem as in previous years but was late in getting started. Some of the delay was ours—we were slow to set the price of registration and get our webpages up. Some of the delay was again Johns Hopkins. The unexpected problem was that we had a large number of walk-in registrations and Johns Hopkins could not handle rapid credit card payment. Carly Spiewak developed a workaround to keep the lines flowing at the registration desk.

*Graduate Student and Volunteer Labor:* Emily Beck had carefully gauged the need for graduate student and volunteer labor. The LAC comped eleven graduate student registration fees in exchange for a set number of hours of work from each student. We needed all that time and were grateful for a handful of additional volunteers working the registration desk, setting up easels for posters, etc.

*The Alternate Banquet: Themed Happy Hours:* We were grateful not to have a banquet to plan, but wanted to do something to ensure the cultivation of collegiality for newcomers and old members alike, and something on Saturday night that would encourage attendees to stay for the Sunday morning sessions. Originally we toyed with the idea of organizing group dinners at local restaurants based on either intellectual or culinary interest. Emily Beck came up with a much simpler idea, appropriate to our limited workforce: themed happy hours. We planned happy hours for about eight groups based around intellectual themes. One combined the Sigerist Circle and environmental history, while others were organized around early modern history, history of drugs and pharmaceuticals, eugenics, etc. We arranged with eight bars within walking distance of the hotel to set aside space for about ten to fifteen people each. We did not guarantee any food or beverage purchase or rent special rooms. Only one bar/restaurant we approached was not willing to do this—it turns out 6:30–8:00 on a Saturday night is not the busiest time for downtown bars. Each group had a local host and a national/international host. We put out sign-up sheets starting Thursday for people to sign up. The local host would walk the group to the bar, or people could follow a map on their own. Amazingly, several new groups formed themselves and put out sign-up sheets, and we were able to help them find bars. The themed happy hours were a rousing success, and the timing was just right—people could find dinner partners and go off to another restaurant or just stay on at the bar and order food together. If you were new and didn't know anyone, you had a ready-made group for conversation in your area of interest for a low-stakes time and money commitment. Our recommendation is that if meetings do this in the future, the LAC should allocate \$50 to each group to order a couple of appetizers to get the gathering going. Several hosts took this on personally, which was very generous.

*Graduate Student Happy Hour:* Rather than trying to schedule a grad student lunch, this year we organized a graduate student happy hour on Thursday evening. For this we did rent a special room in a bar with a food and beverage minimum. The LAC provided an \$800 subsidy for the event; grad students paid \$5 each at the time of registration for one drink and snacks. The event ran for several hours so that students could also attend the opening reception and transgender session if they wanted.

Submitted by Jennifer Gunn, Co-Chair

**Program Committee.** As chairs we are pleased to present the report of the Program Committee. We wish first to thank its members for their willingness to serve, hard work, and uniform good humor. They are Dea Boster, Catherine Cox, Pat d'Antonio, Carla Keirns, Projit Mukharji, Raul Necochea, and Olivia Weisser. We wish also to thank the association's secretary, Jodi Koste, first for the sheer magnitude of the work she contributes to this process, but also for her wise counsel and her gentle guidance of us in this fascinating and rewarding, but novel, task of preparing the program for the annual meeting. We also thank Sarah Tracy and Scott Poldosky, our predecessors, for lending us their wisdom and imparting their confidence.

The 2017 Nashville meeting of the AAHM makes clear what previous committees have recognized. Both in terms of representation (submissions from seventeen nations), but even more conspicuously in terms of scope of presentations, the AAHM is, as the 2015 committee recognized, "the leading international venue for our field." This should bring enormous satisfaction and intellectual excitement, but it brings challenges too.

We received 228 abstracts. This is down from the nearly three hundred received in the past two years, but similar to the 2012 and 2103 levels. The drop is probably understandable in geographic terms: size of city, distance from population centers, and the fact that Nashville is not an easy transportation hub. And there is perhaps competition from a regional history of medicine meeting which has also met this spring.

We received proposals for thirty-two prearranged panels. Of these, seven were for lunchtime sessions (we accepted six), nine were for four-person sessions (eight accepted), and sixteen were for three-person sessions (twelve accepted). Accordingly, 68 of 149 program presentation slots are in pre-arranged panels. This is slightly larger than in 2016.

Leaving aside the lunch sessions, most of these are traditional in format: a focused group of research papers, with, in some cases, a commentary. The enthusiasm for this format is evident. It seems clear too that groups of scholars with specialized and convergent interests in some aspects of the field are coming to see the AAHM meeting as an



occasion to explore their common interests. To this mode of submission, we can probably attribute the very strong representation this year of work on East Asian history of medicine (five sessions), and also an unusually strong representation of medieval and early modern medicine (four sessions). One concern in organizing the remainder of the program, i.e., that coming from individual submissions, has been to complement this specialization by arranging more generally oriented sessions which will, we hope, attract persons with a variety of specializations. To do that we have created several comparative, or problem- or method-based sessions, which will allow exploration of particular historical-medical issues across time and space. Examples of these are "Historians' Sources and Ethics," "Cultures of Dissection," and "Hospitals, for whom and for what?" While we see no immediate need for concern, we believe it would be unfortunate if the AAHM were to evolve, as the meetings of some other historical societies have done, merely into a convenient occasion for meetings of specialized sub-groups.

The program includes eight posters. This is fewer than last year (partly due to concerns about sufficient presentation space), but we remain committed to this as an important mode of participation. We have worked to promote an ethos in which poster presentations are not seen as having a lower status than oral presentations. To that end we asked each submitter whether she or he would be amenable either to a poster or to an oral presentation (almost all were; one asked explicitly to present a poster). We also, in considering strongly ranked abstracts, kept an eye out for those that might be better presented in a visual format.

There are a few issues we would like to raise for consideration.

- With regard to the submission process: Given the larger number of modes of participation, there was some confusion among submitters about what kinds of submissions to prepare, particularly for lunch sessions. At present, the Oxford system does not allow for the symposia to be ranked as a whole by the committee members. Hence the rankings of symposia come as averages of the abstracts they contain. This caused no serious problem this year: the quality of abstracts within particular symposia was highly consistent. Still, future committees, or the association, may want to consider whether this is the ideal approach. Our recommendation is that both symposia and the individual abstracts within them be ranked.
- With regard to selection of committee members: One issue that arose was whether committee members may submit proposals or be part of symposia. We could not find this matter addressed in the association's by-laws procedures. Our practice was that this was fine so long as the persons excused themselves on COI grounds from consideration of the submission/panel in question. Two members of our committee will be presenting in Nashville.



In addition to the general consideration that service on the committee not unduly disadvantage its members, we felt that allowing such a practice was important in allowing us to recruit a committee of sufficient breadth. Given the extraordinary range of submissions, even the members of our fairly broad committee often found themselves challenged to assess abstracts well beyond our comfort zones.

- With regard to celebratory sessions: This year's program includes sessions that are celebratory of the career achievements of two individuals. To our knowledge such celebratory sessions have not been common at association meetings though they are at the meetings of some other societies. As the program stands, explicitly celebratory events are restricted to lunchtime sessions. Though two regular sessions were also submitted as representing career achievements, we are including them in the program for their substantive merits rather than as celebratory occasions. We have worked also for symmetry in session titles. It is probably wise that there be a policy on this matter, however.
- With regard to length of presentations: With the help of Jodi and the LAC, we were able to include two sets of two-hour sessions in the schedule. This will allow presenters in four-paper sessions the same amount of presentation time as presenters in three-paper sessions. This seemed a good idea in terms of equity.
- With regard to facilitating involvement of clinician-historians: while we believe that our committee's selection process produced a very strong program, it is clear that, as a whole, papers by clinicians without professional historical training tended to receive low scores. This is not especially surprising, given that the purpose of the program is to encourage presentation of new and innovative research. Yet given the declining number of clinicians who continue to attend the AAHM, we would encourage further thought on this matter. Meetings are not just about research; they are about networking. While some clinician-historians certainly pursue interests along the "great doctors" line of historiography, it is worth remembering that there are many others who do value and integrate history into their own primary interests in advocacy, social medicine, bioethics, and health policy. Many papers in our program address these interests, but it must be said that they are often rather intimidating for people with no historical training. It could be worth considering developing a model of "affinity groups" such as those held at American Society for Bioethics Humanities meetings. These would be groups organized around a particular theme of relevance to health care today (e.g., integrative medicine, practitioner-patient relationship, bioethics) whose purpose would be to organize a yearly two-hour session. The theme for a particular year, and the speakers, would be chosen by the affinity group's leadership. Such a group might make possible for practitioners the kinds of network opportunities valued by historians. There are obvious questions of finding space and time. The idea still may be worth considering on a small scale, connected to themes that bridge the interests of socially conscious practitioners and historians.

Respectfully submitted, Jeff Baker and Chris Hamlin (Co-chairs)

## Other Reports

**Education and Outreach.** The Education and Outreach Committee has focused on two primary projects during the 2016–17 term:

*Creation and implementation of a social media strategy and policy for the AAHM:* The committee drafted, for presentation to council, a social media policy governing the use of official AAHM Twitter, Facebook, and other social media accounts. The committee has also assumed stewardship of the AAHM Twitter and Facebook accounts. Our goal is to centralize and organize AAHM social media use and increase the association's activity online.

*Organization of a professional development workshop to be offered at the 2017 annual meeting:* The committee organized a free professional development workshop, "Writing and Publishing Workshop for Graduate Students and Early Career Scholars," which will be offered during the annual meeting. The workshop will feature Karen Darling (U. Chicago Press), Graham Mooney (editor of *Social History of Medicine*), and Jacki Antonovich (founder of *Nursing Clio*). Our goal is to organize and host a professional development workshop at each annual meeting for the benefit of the membership.

In the next year, we will:

- Continue to develop and refine social media strategy and policy for the association and expand the presence of the association on social media.
- Organize a professional development workshop for the 2018 annual meeting (topic to be determined).
- Complete other education and outreach tasks as requested by council.

Submitted by: Eli Anders, Claire Clark, Elena Conis, Marissa Mika, Andrew Ruis (Chair), Jacob Steere-Williams, & Debbie Weinstein

**Travel Grant Committee.** 2017 AAHM Travel Grants Committee decided the funding for travel grants based upon the following principles: 1) Encourage internationalization of the meeting; 2) Encourage scholars at institutions without a significant history of medicine presence; 3) Encourage medical student engagement with AAHM; 4) Support graduate students preparing for careers in the history of medicine; 5) Support independent scholars who lack institutional resources; 6) Obtain the greatest impact possible given limited resources.

The committee awarded thirteen grants for a total of \$8,584.

As the committee chair, I thank Professor Peter Kernahan and Professor Paula Michaels for their time and devotion for the discussion to draw the principles above and implement the principles for selecting the grantees.

Respectfully submitted, Ock-Joo Kim, Chair

**American Council of Learned Societies.** (Caroline Hannaway) The 2016 ACLS Annual Meeting took place at the Renaissance Arlington Capital View Hotel in Arlington, VA, on May 5–7, 2016. In attendance were members of the ACLS Board of Directors, delegates of the constituent societies, members of the Conference of Administrative Officers, and other representatives.

There was an informal session on Thursday evening focused on “Extending the Reach of the Humanities Ph.D.”

The ACLS annual meeting proper opened Friday morning with President Yu’s report to the council. She spoke of the relation of humanities, education, and democracy and argued against the “velvet rope economy,” in which goods and services are increasingly offered in distinct tranches, with a more expensive premium product reserved for the more affluent. She went on to describe ACLS programs aimed at supporting a broad range of humanistic inquiry and strengthening scholarship’s public presence. Brief reports were then presented by delegates of five ACLS Member Societies describing topics that were currently engaging their groups. The council meeting followed.

The annual session featuring presentations by and discussion with recent ACLS fellows was next, with the topic of “Emerging Themes and Methods of Humanities Research.” Kim Dillon, a 2015 Digital Innovation Fellow, reported on her project “The Black Press Born Digital”; Brook Lillehaugen, a 2015 ACLS Fellow, spoke about her project on colonial Zapotec manuscripts; and Michael Penn, a 2011 Frederick Burkhardt Fellow, gave a presentation on his project, “Syriac Christian Reactions to the Rise of Islam.”

William Adams, chairman of the National Endowment for the Humanities, spoke at the luncheon. Adams gave an account of several of the NEH’s new initiatives, emphasizing their goals of public engagement and widening access to research opportunities and the books, articles, and programs resulting from research.

The Friday afternoon session began with a conversation between Ford Foundation President Darren Walker and ACLS President Pauline Yu. Walker described the life experiences that led him to his current position and his views on how to break down inequality in the foundation’s programs and in American life. This was followed by six breakout sessions on the following topics: “Constructive Approaches for Adjunct Faculty,” “PhD Career Diversification,” “Creative Approaches to Annual Meetings,” “Inequality and Diversity in the Humanities,” “Advocating for the Humanities,” and “Democratic Engagement in Teaching and Learning.”

Cynthia Enloe, research professor in the Department of International Development, Community, and Environment at Clark University, delivered the 2016 Charles Homer Haskins Prize Lecture, "A Life of Learning" on Friday evening.

The 2017 ACLS Annual Meeting will be held in Baltimore, MD, May 11–13.

**International Society for the History of Medicine.** (Andrew Nadell) I am again pleased to report to the AAHM about the International Society for the History of Medicine. Since 2010, I have had the honor of serving as the national delegate of the United States, by appointment of the AAHM president and council.

The ISHM held its first congress in Paris in 1921, preceded by a meeting in Antwerp in 1920. Plans for an international medical history society were first mooted in 1913 during the Twenty-Seventh International Congress of Medicine in London. North Americans participated from the start.

The ISHM now holds biennial congresses, with slightly shorter meetings in odd-numbered years. I first reported on the Forty-Second Congress of the ISHM in Cairo in October 2010, and then on the events in Barcelona, Padua, Mérida (Mexico), Tbilisi (Georgia), and Sydney.

The Forty-Fifth Congress was held in Buenos Aires, from September 5 to 9, 2016, which I attended. As with most of the ISHM events held far from Europe, the attendance was large but local, a majority from Argentina and central and South America. There were national delegates representing European, Asian, and antipodean countries.

The organizing committee in Buenos Aires, chaired by Professor Ana María Rosso, created a memorable congress. Simultaneous translation into English was provided for all the presentations in the main auditorium. The cultural and social events offered a sophisticated introduction to the great city, its remarkable architecture, and its fascinating, if turbulent, history.

As usual, our own AAHM council member Professor Gary Ferngren attended. Dr. Ferngren is my predecessor as the American national delegate. He faced a term limit as a member of the ISHM Council, and I was elected to the council, preserving an AAHM presence on the governing body. After a year's absence, I hope he will be re-elected to the administrative council. I wish to note my debt to Dr. Ferngren for his wisdom in navigating this organization, where international and political issues affect many decisions.

Prior to the ISHM, from September 1 to 3, 2016, the Academia Panamericana de Historia de la Medicina held its second congress at the

Association Médica Argentina. This new organization was founded by the esteemed ISHM national delegate of Costa Rica, Dr. Rolando Cruz Gutiérrez. Its first congress was held in San José de Costa Rica in August 2015. The third congress will be held from November 9 to 11, 2017, in Santiago, Chile. I have been elected a vice-president and plan to attend.

The website for the PanAmerican Congress is:

<http://historiamedicina.cl/iii-congreso-panamericano-de-historia-de-la-medicina/>.

The ISHM will have its ninth meeting in Beijing, China, from September 6 to 11, 2017.

The website for the meeting is [http://www.aconf.org/conf\\_94140.html](http://www.aconf.org/conf_94140.html). This meeting is organized principally by the Chinese Society for the History of Science and Technology. This is this first ISHM event in east Asia, and an opportunity to meet fellow historians and physicians interested in medical history, from a large number of countries. There will also be, as usual, many social events and optional tours to other parts of China.

In 2018, for the first time since 2012, the ISHM will return to its European home. The Forty-Third Congress will be held in Lisbon, Portugal, from September 3 to 7, 2018. The plans are well advanced, chaired by Dr. Maria do Sameiro Barroso, and there is a Facebook page for the congress: <https://www.facebook.com/46th-Congress-of-the-ISHM-1802295220059273/>.

The newly elected president of the ISHM is Professor Carlos Viesca Treviño, of México. The following two meetings, 2019 and 2020, in Belgium and France, will celebrate the centenary of the ISHM. We are planning exhibitions of books in the history of medicine and health in the libraries of the host cities. The head of rare books at the Bibliothèque nationale de France, Jean-Marc Chatelain, has graciously offered to coordinate exhibitions in Paris.

The journal of the Society, *Vesalius*, is available only in digital form, with access initially for members, and then fully open.

I invite all AAHM members, and especially graduate and medical students, to join ISHM. Dues are deliberately kept modest. The ISHM offers the scholarship and company of your fellows from the whole world. Please feel free to contact me at any time for additional information.

President Chris Crenner thanked Gary Ferngren, Scott Podolsky, Mindy Schwartz, and Alexandra Stern, members of the council class of 2017, for their service.

Motion to adjourn at 5:00 p.m.

Respectfully submitted by Jodi Koste, Secretary

## Minutes of the Annual Business Meeting of the American Association for the History of Medicine, Inc.

The annual business meeting of the American Association for the History of Medicine, Inc., was called to order by President Chris Crenner in Platinum Ballroom 4 of Sheraton Grand Nashville Downtown on May 6, 2017, at 5:02 p.m. A quorum was declared.

The minutes of the 2016 annual business meeting were approved as published in the *Bulletin of the History of Medicine*, Vol. 90 No. 3, 2016, 529.

Jodi Koste delivered a brief secretary's report. For the full content see the report to council on page 625.

Treasurer Hughes Evans gave an overview of the financial status of the association. The full report to council may be found on page 627.

Susan Lawrence presented the Finance Committee report.

Jodi Koste reported on the actions of the AAHM Council from its meeting on May 4, 2017. The list of actions may be found on page 629.

Sarah Tracy presented the 2017 slate of candidates for the officers of secretary and treasurer, and the council class of 2020. The membership elected the slate unanimously by voice vote.

Gary Ferngren gave the report on the International Society for the History of Medicine.

The AAHM was invited to join the United States Consortium for the History and Philosophy of Science and Technology, a consortium of history-related organizations whose purpose is to represent the United States in the International Union of History and Philosophy of Science and Technology. The membership voted to join the consortium.

Lara Freidenfelds reported on a colleague who was threatened because of her scholarly work on controversial social issues. Friedenfelds is willing to be a clearinghouse for anyone who wishes to report similar occurrences of authors being attacked for their scholarship.

Chris Crenner read the following from Jackie Wehmüller, editor emerita of the Johns Hopkins University Press: "I offer my sincere thanks to the AAHM for the deeply moving honor bestowed on me at last year's meeting, and my heartfelt appreciation for the pleasure of working with so many fine scholars over nearly three decades. A highlight of my life! The friendships made and renewed at the annual meetings are a testament to the group's inclusivity and welcoming spirit. I will be following your work as you continue to illuminate the past and inform the future at a time when your work is more important than ever."

Sarah Tracy and Scott Podolsky offered a resolution of thanks for Jeff Baker and Chris Hamlin, and members of the Program Committee for 2016–2017.

Jennifer Gunn thanked Arleen Tuchman, Lisa Pruitt, and the Nashville Local Arrangements Committee for their work on the 2017 annual meeting.

Motion to adjourn at 5:45 p.m.

Submitted by Jodi Koste, Secretary

American Association for the History of Medicine, Inc.  
Statement of Assets, Liabilities, and Net Assets-Cash Basis  
December 31, 2016 and 2015

<b>ASSETS</b>	<i>December 31, 2016</i>	<i>December 31, 2015</i>
Cash and cash equivalents	\$102,497	\$93,228
Investments (see note 2)	<u>\$238,642</u>	<u>\$231,144</u>
<b>TOTAL ASSETS</b>	\$341,139	\$324,372
<b>NET ASSETS</b>		
Unrestricted	\$341,139	\$324,372
<b>TOTAL LIABILITIES &amp; NET ASSETS</b>	\$341,139	\$324,372
<b>REVENUES, GAINS, AND OTHER SUPPORT (see note 1)</b>		
Membership dues (see note 4)	\$87,070	\$97,829
Investment income	\$6,329	\$6,238
Awards	-	\$8,114
Contributions	\$3,402	\$6,319
Annual meeting income (Loss) see note 3)	(\$11,761)	(\$2,993)
Miscellaneous income	\$113	\$450
Net realized and unrealized gains (losses) on marketable securities	<u>\$10,193</u>	<u>(\$5,360)</u>
<b>TOTAL REVENUES, GAINS, AND OTHER SUPPORT</b>	\$95,346	\$110,597
<b>EXPENSES</b>		
Publications	\$35,341	\$37,925
Administrative	\$23,221	\$28,055
Honors and awards	\$11,127	\$15,551
Dues to Outside Organizations	<u>\$8,890</u>	<u>\$6,430</u>
<b>TOTAL EXPENSES</b>	\$78,579	\$87,961
<b>INCREASE (DECREASE) IN NET ASSETS</b>	\$16,767	\$22,636
Net Assets (unrestricted), beginning of year	\$324,372	\$301,736
Net Assets (unrestricted), end of year	\$341,139	\$324,372



## Notes

### Note 1: Nature of Activities and Summary of Significant Accounting Policies

*Organization:* American Association for the History of Medicine, Inc., was organized on November 28, 1956, in New York, as a not-for-profit membership corporation to promote and encourage scholarly research, writing, and interest in the history of medicine. The association is exempt from federal income tax as an organization described in Section 501(c)(3) of the Internal Revenue Code.

*Basis of Accounting:* The organization's policy is to prepare its financial statements on the cash basis of accounting; consequently, contributions and other revenues are recognized when received rather than when promised or earned, and certain expenses and purchase of assets are recognized when cash is disbursed rather than when the obligation is incurred.

*Contributed Goods and Services:* During the years ended December 31, 2016, and 2015, the value of contributed goods and services meeting the requirements for recognition in the financial statements were not material and have not been recorded.

*Income Taxes:* The association is a not-for-profit organization exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code and classified by the Internal Revenue Service as other than a private foundation.

Management believes that all of the positions taken on its federal and state income tax returns would more likely than not be sustained upon examination. The association's income tax returns for 2016, 2015, and 2014 are subject to possible federal and state examination, generally for three years after they are filed.

*Cash and Cash Equivalents:* For the purposes of the statement of assets, liabilities, and net assets—cash basis, the association considers all highly liquid investments with an original maturity of three months or less to be cash equivalents.

As of December 31, 2016, and 2015, the association had no temporarily or permanently restricted assets.

*Investments:* The association reports its investments with readily determinable fair values at their fair value in the statement of assets, liabilities, and net assets - cash basis. Unrealized gains and losses are included in the change in net assets in the accompanying statement of revenues, expenses, and other changes in net assets—cash basis. All gains and investment income are unrestricted.

Note 2: Investments

The association invests in mutual funds. Fair values for investments are determined by reference to quoted market prices and other information generated by market transactions (all Level 1 measurements).

Fair value measurements for investments reported at fair value on a recurring basis were determined based on:

Quoted Prices in Active Markets for Identical Assets (Level 1)		
	December 31, 2016	December 31, 2015
Mutual Funds	\$238,642	\$231,144

Note 3: Annual Meeting Receipts and Disbursements

The association holds an annual meeting, which is handled by the Local Arrangements Committee (LAC). The committee receives revenue and pays most expenses, and remits the excess of revenues over expenses to the association. The association then pays some expenses, and sometimes receives reimbursement. The 2016 meeting was held at the Minneapolis Marriott Center City Hotel in Minneapolis, MN, and the University of Minnesota helped the LAC manage the meeting.

2016 and 2015 income is summarized below:

<i>Local Arrangements Committee:</i>	2016	2015
Receipts	\$131,769	\$126,653
Expenses	<u>\$143,530</u>	<u>\$129,646</u>
Net Loss for Annual Meeting	(\$11,761)	(\$2,933)

Note 4: Dues

The association received \$87,070 total dues in 2016 and \$97,829 in 2015. The association sends out renewals for the next calendar year during the current year. Therefore, total dues collected represents dues for calendar years are approximated below:

2016 Membership Dues		2015 Membership Dues	
2016 Year	\$47,505	2015 Year	\$58,237
2017 Year	<u>\$39,565</u>	2016 Year	<u>\$39,592</u>
	\$87,070		\$97,829

Note 5: Functional Expenses

The association had \$222,109 in functional expenses in 2016 of which \$143,530 were annual meeting expenses. Of the total amount of functional expenses \$210,415, or 95%, was for program services, and \$11,694,

or 5%, was for management and general expenses. There were no fundraising expenses in 2016. In 2015, the association had \$217,607 in functional expenses of which \$129,646 were annual meeting expenses. Of the total amount of functional expenses \$203,469, or 94%, was for program services, and \$14,138, or 6%, was for management and general expenses. There were no fundraising expenses in 2015.

## Note 6: Subsequent Events

Management has evaluated subsequent events through February 19, 2017, the date on which the financial statements were available to be issued.

Publications	2016	2015
<i>Bulletin</i> Subscriptions	\$29,979	\$32,514
<i>Newsletter</i>	<u>\$5,362</u>	<u>\$5,411</u>
Total Publications	\$35,341	\$37,925
Administrative		
Accounting services	\$4,550	\$5,330
Administrative support-external	\$ -	\$2,500
Bank fees	\$390	\$235
Insurance	\$1,483	\$1,416
Membership fulfillment	\$11,528	\$13,917
Postage	\$2,139	\$1,527
Taxes	\$100	\$100
Trust fees	<u>\$3,031</u>	<u>\$3,030</u>
Total Administrative	\$23,221	\$28,055
Honors and Awards		
Engraving	\$301	\$2,906
Honoraria and cash awards	\$3,500	\$8,114
Travel grant	<u>\$7,326</u>	<u>\$4,531</u>
Total Honors and Awards	\$11,127	\$15,551
Dues to Outside Organizations		
American Council of Learned Societies	\$8,890	\$6,430
Total Dues to Outside Organizations	\$8,890	\$6,430
Total Expenses	\$78,579	\$87,961