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Email gazette@sshm.org
Web http://www.sshm.org
OFFICIAL NOTICES

SSHM Annual General Meeting for 2005

The Society’s 2005 Annual Graduate Meeting will be held on Friday, June 30, 2006, 2.45pm, at the SSHM Annual Conference 2006, Practices and Representations of Health: Historical Perspectives, hosted by the University of Warwick and organized by the Centres for Medical History at the University of Birmingham and the University of Warwick. The conference programme (accessible from the SSHM webpage) gives details about room allocation and directions to the venue. Please see below regarding the Agenda and elections to and nominations for the Executive Committee. You can find the nomination form on the back of this issue of the Gazette.

AGENDA

1. Apologies
2. Approval of Minutes of Last Meeting
3. Matters Arising
4. Chairman’s Report
   Flurin Condrau
5. Membership Secretary’s Report
   David Cantor
6. Treasurer’s Report
   Carsten Timmerman

Publications Reports

7. Journal Editor’s Report
   Bill Luckin/Waltraud Ernst
8. Edited Volumes Report
   Anne Borsay
9. Monograph Volumes Report
   Jo Melling
10. Gazette Editor’s Report
    Cathy McClive

Other Reports

11. Conference Report
    Jonathan Reinarz
12. Webmaster’s Report
    Lutz Sauerteig
13. Publicity Officer’s Report
    Keir Waddington

Elections

14. Election of members of Executive Committee
15. AOB

Pamela Dale
Honorary Secretary SSHM
University of Exeter

NB: This AGM covers all Society for the Social History of Medicine business for the calendar year 2005.

Election to the Executive Committee

Nominations are invited to fill the four vacancies on the Executive Committee of the Society for the Social History of Medicine, which will arise following the 2005 Annual General Meeting.

The Executive Committee consists of sixteen members, twelve of whom are elected. Four members stand for election each year, serving a three year term of office. The joint editors of the Society’s journal, Social History of Medicine, the edited series editor, and the monographs editor are ex-officio members of the Executive Committee.

Candidates must be members of the Society of at least one year’s standing. Proposers and seconders must also be members.

Members of the Society may nominate themselves or another member. The nomination form (on the back cover of this issue) should be completed, signed by the proposer, the seconder and by the nominee.

The completed form should be returned to the Society’s Secretary as soon as possible:

Dr Pamela Dale,
Centre for Medical History
Room 329, Amory Building
University of Exeter
Exeter EX4 4RJ
United Kingdom
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CONFERENCE REPORTS

From the Cradle to the Grave: Future perspectives on the Social History of Health and Healthcare, organised by the Centre of the Social History of Health and Healthcare, Glasgow January 11-12 2006.

With over forty participants and delegates arriving from across the UK, the US, South America, Asia and Australia, the ‘From the Cradle to the Grave: Future perspectives on the social history of health and healthcare’ conference in Glasgow kicked off the UK’s 2006 history of medicine calendar of events with a diverse and innovative programme of papers. Organised by the new Centre for the Social History of Health and Healthcare (CSHHH) Glasgow, a research collaboration between Glasgow Caledonian and Strathclyde Universities (see http://www.gcal.ac.uk/historyofhealth/index.html), the event was funded by the CSHHH, the Society for the Social History of Medicine and the Wellcome Trust. With its objective of placing the UK at the heart of the international research community in the subject area, the event developed into the largest meeting ever organised for post-graduates working on history of medicine and health projects. This success was due to the conference organisers, Sue Morrison, Angela Turner and David Walker, themselves post-graduates at the CSHHH.

Papers spanned the full range of topics that are covered in the subject area. The first parallel sessions brought together papers on ‘Institutionalisation and modern medicine’ and ‘Public Health’ respectively. Among the presentations at the former was that by Despo Kritsotaki from the University of Crete who drew out parallels between mental health institutions in early twentieth century Greece and Scotland, and at the latter the programme began with Lenita Cunha e Silva who considered the experiences of working class communities at the hands of public health officials in Sao Paolo between 1920 and 1950. Among the subsequent presentations on the first day was work as varied as Chris Bonfield’s (UEA) analysis of the Regimen sanitatis and its dissemination in late medieval England, and Isabelle Mity’s (University Lille III) paper from her recently completed Ph.D. on ‘Health and Ideology in Germany from 1880 to 1914’. Panels covered topics that included disability, discourses of health and illness, obstetrics, studies from Africa and Asia, perspectives on medieval and early modern medicine and twentieth-century Britain.

The presentations of the second day were no less varied or stimulating. It opened with parallel panels on ‘Death and the Body’ and the ‘History of Nursing’, and included Joel Tannenbaum (University of Hawaii) on the social history of organ trafficking and Alison O’Donnell (University of Dundee) on nurses in National Socialist Germany. The conference worked its way through plague, the construction of medical knowledge and the final panel on skeletons and bones, which Annie Jamieson of the University of Leeds concluded with ‘Dr Octopus and the Roentgen Rays’. Dr Carsten Timmermann and Dr Ronnie Johnston closed the event as representatives of the Society for the Social History of Medicine and the CSHHH respectively.

The conference succeeded in providing a snapshot of the state of the field and of the directions in which research is heading in the near future. It achieved more than this, however, as it brought together emerging scholars from across the globe to encourage collaborative relationships and to stimulate dialogue that spans institutional and national boundaries. Indeed, plans to establish a formal international network for post-graduates working in the field of the history of health and healthcare were discussed at the meeting, and the proposal to stage the event again in 2008 is under consideration by the Society for the Social History of Medicine.

For those who want more details about the event, and to view the full list of papers and presenters, please see:

www.strath.ac.uk/Departments/History/conf/home.htm
Dr James Mills, Director, Centre for the Social History of Health and Healthcare (CSHHH) Glasgow.


An afternoon workshop held at The London School of Hygiene & Tropical Medicine, 16th November 2005.

At the close of the twentieth century health education was widely dismissed by the public health community as paternalistic and ineffective. Eclipsed by the rise of health promotion, 'traditional' health education was chided for its focus on individual responsibility and its neglect of the social determinants of health. Indeed, the word 'education' failed to survive the century's last reorganisation of its national coordinating body in 2000 when the Health Education Authority was transformed into the short lived Health Development Agency. Health education within the education sector has followed a different trajectory and is currently framed in terms of personal, social development and citizenship.

The development of post war health education, its relationship to public health and notions of citizenship was the subject of an afternoon workshop at the London School of Hygiene & Tropical Medicine (LSHTM) on 16th November. Organised by the Centre for History in Public Health at LSHTM, the workshop featured contributions from public health historians and those currently working in health education/promotion. Presentations were short and the wide ranging discussion was chaired by Sarah MacLean, Head of the PSHE and Citizenship Team DfES.

The afternoon began with 'A general overview of post war health education', presented by Kelly Loughlin (LSHTM). Here key points and themes were identified and seen to have characterised health education throughout the twentieth century. Multi-sector involvement was a key feature, and one that pointed to many histories depending on topic (e.g. sex education) and the success of claims to legitimate involvement by different sectors (e.g. voluntary organisations and campaigners, commercial organisations, central and/or local government, mass media, and medical-professional organisations). Focussing on public health, two conflicting visions of health education were highlighted: health education as a form of salesmanship, akin to mass media based commercial advertising; and health education as face-to-face communication requiring skills in group-work. These models came into increasing conflict in the post war era, reflecting central-local tensions within public health administration. An emphasis on group-work was stressed at the local level but greater central government involvement fostered a move towards mass media campaigns.

These themes resurfaced in the more topic-specific sessions that followed. James Hampshire (University of Sussex) provided a political history of post war sex education policy, 'Rewriting the causal story: How sex education policy became a problem'. Here, policymaking and the process of agenda setting were brought to the fore in accounting for the way school based sex education became an adversarial political issue. In policy terms, this issue had been relatively uncontroversial in the immediate post war decades, framed as it was by a public health consensus which viewed sex education as a valuable tool in the control of sexually transmitted infections. From the late 1960s this view came increasingly under threat as sex education became embroiled in wider attacks on the 'permissive society'. The public health consensus was forcibly challenged by moral traditionalists and pro-family campaigners who argued that sex education was not so much a solution as part of the problem. In rewriting the causal story, media focussed campaigners were effective in generating a polarised public debate on sex education which reverberates through to today. The sensitivity of the topic, the nature of the target audience and the use of the media were themes carried forward in Virginia Berridge's (LSHTM) presentation, 'The politics of health education: from smoking to AIDS'. Here, the post war rise and fall of central government involvement in health education was outlined. Pressure to
The problem of smoking was seen as pivotal in effecting a reorientation of the public health agenda and government attitudes towards health education in the 1950s and 60s. Mass media campaigns emerged as a central public health strategy, expressed through a new style of health communication based on market research and evaluated by advertising agencies. Government funded agencies like the Health Education Council were founded to take this strategy forward at the national level, eclipsing more locally based traditions. This strategy intensified in the 1980s in response to HIV/AIDS. The unprecedented scale of the 1987 public campaign and the replacement of the Health Education Council with the Health Education Authority revealed continuing tensions over the nature, form and location of health education. Criticism of the AIDS strategy, and debates over the 'de-gaying' and subsequent 're-gaying' of AIDS point to the emergence of new and equally media-conscious voices in the health education arena. The lessons of AIDS also highlighted the benefit of keeping high profile health education messages at a safe distance from Whitehall. By 2000 the HEA was transformed into the Health Development Agency, no longer tasked with public campaigns but with mapping the evidence base for public health.

Developments in community based health education/promotion were taken up in the final session of the workshop. Chris Bonell (LSHTM) explored the problems and potential of voluntary sector health promotion providers in, 'Consumerism and citizenship in health promotion: the case of gay men's HIV prevention in the 1990s'. This detailed case study brought notions of consumerism and citizenship to the fore in examining the strategies of a health promotion provider which sought to represent consumer interests. Here, the particularities of consumption were highlighted rather than abstract notions of consumer interest when explaining consumer action in regard to HIV services. Consumption became increasingly politicised through concerns over gay men's citizenship. The organisation in question adopted models of community mobilisation, workshops and out-reach; a feature which highlights the centrality of concerns over citizenship, as well as the dispersed and often invisible nature of preventive service users.

The workshop was well attended, attracting a mixed audience of historians and practitioners. Participants enjoyed a lively and wide ranging discussion on patterns of change and continuity in the history of health education.

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First International Conference on the History of Medicine in South-East Asia, Centre for Khmer Studies, Siem Reap, Cambodia, 9-10 January 2006.

The First International Conference on the History of Medicine in South-East Asia was held at the Centre for Khmer Studies, Siem Reap, Cambodia, 9-10 January 2006. Both the organising committee and the participants had a broad international feel. The organising committee included Centre staff as well as international scholars Professor Rethy Chhem, University of Western Ontario, Dr. Laurence Monnais, Université de Montréal and (Professor Harold Cook Director of the Wellcome Trust Centre for the History of Medicine at University College London. Twenty-four papers were presented by scholars from local research institutes in Cambodia to South-East Asian countries, such as Malaysia, Philippine, and Thailand as well as academics from Europe, Australia, and North America. Four of the speakers were post-graduate students.

The aim of this conference was to draw together scholars from different disciplines and areas with a common interest in the study of the history of medicine in South-East Asia. The conference program
consisted of seven plenary sessions, wherein the talks were followed by comments from participants. In this way it was possible for everyone to contribute and participate in the discussion of the topics being presented. The sessions covered medical traditions (Historical Perspectives on Medical Traditions in South-East Asia; Medical History in South-East Asia: Sources, Historiography and Multidisciplinary), medical encounters in colonial periods (From Mapping “Tropical” Diseases in South-East Asia to Fighting Against Them; Medicalisation and Social Control in the Context of Western Domination; Medicalisation, Professionalisation, and the “(Re)invention” of Tradition) to contemporary international health care in South-East Asia (International Health Care and History of Health Care in South-East Asia). There was also a session on the history of medicine and medical traditions in India.

Two issues emerged from the conference. First, there is a burgeoning interdisciplinary community (including archeologists and anthropologists) exploring traditional South-East Asian medicines and practices and their encounters with colonial powers. Second, an understanding of world history and the history of colonialism is vital for scholars who want to study the modern history (and indeed medical history) of South-East Asia. An understanding of the global political economy is crucial to not only historical research but also to current issues of medicine and health in South-East Asia.

At the end of the two-day dense program, there was a wrap-up session for more comments and discussions about the conference and the next step. There was a lot of positive feedback from the presenters and participants, saying that they found these presentations and discussions challenging, interesting, and useful for their own research. The session came up with several exciting conclusions. Dr. OOI Keat Gin in Universiti Sains Malaysia has volunteered to co-ordinate the next conference, to be held in two or three years. The organising committee and presenters would also like to work on an anthology of papers presented in this conference. This conference was no doubt a successful start; the richness of discussions reinforced connections between international scholars and furthered ideas about medical history in South-East Asia.

For further information about the conference, papers and abstracts, please visit Centre for Khmer Studies (CKS) website at http://www.Khmerstudies.org

Yu-Ling Huang
SUNY-Binghamton, USA

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CONFERENCE ANNOUNCEMENTS & CALL FOR PAPERS

'Foetal Fortunes'
Centre for the History of Medicine,
University of Glasgow,
1-2 September 2006

The Centre for the History of Medicine at the University of Glasgow is hosting a symposium entitled 'foetal fortunes' on foetal and infant health and welfare, to be held on 1-2 September 2006 as part of their current project on child health. A number of papers have already been offered, but the Centre warmly welcomes further contributions. We would particularly like to hear from anyone interested in contributing a paper on aspects of the history of embryology, infant welfare, or related subjects.

Some funding is available for participants' expenses.

If you are interested in contributing, please forward a brief summary of the proposed paper (around 250 words) by May 1 2006 to:

Dr Gayle Davis,
Centre for the History of Medicine,
University of Glasgow,
Lilybank House,
Bute Gardens,
Glasgow G12 8RT,
G.Davis@arts.gla.ac.uk
The Roy Porter Lecture
Wednesday 26 April 2006, 5.30 PM
Professor Lisa Jardine (AHRC Centre for Editing Lives and Letters, Queen Mary, University of London)

'Scientists, Sea-trials and International Espionage: Who Really Invented the Balance-spring Watch?'

Registration required: Please send a stamped addressed envelope to:
Carol Bowen
Wellcome Trust Centre for the History of Medicine at UCL
210 Euston Road
London
NW1 2BE

Health and Medicine in the Spanish Empire 1492-1700: Discourses, Practices and Representations

Friday 16 June 2006
Wellcome Trust Centre for the History of Medicine at UCL

REGISTRATION FORM and FULL DETAILS AVAILABLE ON WEBSITE:
www.ucl.ac.uk/histmed/events

or contact:
Sally Bragg
Affiliation and Programmes Administrator
Wellcome Trust Centre for the History of Medicine at UCL
210 Euston Road
London

ROY PORTER STUDENT ESSAY COMPETITION

The Society for the Social History of Medicine (SSHM) invites submissions to its 2006 Roy Porter Student Essay Prize Competition. This prize will be awarded to the best original, unpublished essay in the social history of medicine submitted to the competition as judged by the SSHM's assessment panel. It is named in honour of the late Professor Roy Porter, a great teacher and a generous scholar.

The competition is open to undergraduate and post-graduate students in full or part-time education. The winner will be awarded £500.00, and his or her entry may also be published in the journal, Social History of Medicine. The deadline for entries is December 31, 2006.

Further details and entry forms can be downloaded from the SSHM's website: http://www.sshm.org
Alternatively, please contact

David Cantor
Division of Cancer Prevention
National Cancer Institute
Executive Plaza North, Suite 2025
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SOCIETY FOR THE SOCIAL HISTORY OF MEDICINE

ELECTION TO THE EXECUTIVE COMMITTEE 2006

NOMINATION FORM

Name of candidate: .................................................................

Proposed by: ...........................................................................
(Member of the Society for the Social History of Medicine)

Seconded by: ...........................................................................
(Member of the Society for the Social History of Medicine)

I accept nomination for election to the Executive Committee:

............................................................................................
(Member of the Society for the Social History of Medicine)

PLEASE VISIT THE SSHM WEBSITE AT HTTP://WWW.SSHM.ORG