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Following its publication in 1958, George Rosen’s *A History of Public Health* has been the subject of countless book reviews and become essential reading for students, scholars, and practitioners of public health and medicine. A student of Henry Sigerist and a prominent public health practitioner and historian at Columbia University, Rosen was a prolific writer. Among his many contributions was *The History of Miners’ Diseases: A Medical and Social Interpretation* (1943) and “Fees and Fee Bills: Some Economic Aspects of Medical Practice in Nineteenth Century America” in Sigerist’s *Supplements to the Bulletin of the History of Medicine* (1946). Building on his enthusiasm for social history, Rosen used *A History* to provide a fresh approach to assessing the origins and impact of public health.

Divided into eight parts and encompassing over 280 pages, *A History* is an ambitious work, charting the evolution of public health in the western world from classical Greece and Rome to mid-twentieth century America. Although largely optimistic in tone, the book carefully considers the difficulties of imagining, justifying, and implementing public health programs at different places and times. The book not only filled a historiographical void at its time of publication, but also set a model for future generations of scholars in investigating the social determinants of disease and in using the past to understand the present.

Although some contemporary readers may find sections of *A History* slightly flat or outmoded, the work remains a remarkable starting point for understanding the politics of health and the flow of ideas over time on such matters as disease susceptibility, the body, and the role of the state. Rosen not only identified and described key public health developments, but also unraveled the prevailing philosophies and social movements that made them possible. In this respect, his work bridges the divide between intellectual and health history.

The recently revised and expanded edition of *A History* testifies to Rosen’s lasting achievement and influence. It boasts a new forward, introduction, and biography, as well as an extensive bibliography of primary and secondary sources. These elements are a welcome addition to the first edition. The forward, written by former New York City Health Commissioner Pascal James Imperato, attests to the effect *A History* made on the practice of public health. He shows that responses to recent disease threats, such as Ebola, SARS, and avian influenza, drew on longstanding practices described in Rosen’s work. Understanding past reactions not only sheds light on modern challenges, but offers potential lessons to the
informed contemporary practitioner. Meanwhile, the introduction by medical historian Elizabeth Fee, places *A History* and Rosen in context. She offers a nuanced analysis of his contribution to 1950s historiography, balancing both his innovative application of social history with his limited attention to issues of race, gender, and sexuality. She shows the ways in which scholarship on disease and public health has evolved and how Rosen’s belief in progress and attention to the effects of poverty were rooted in his place and time. In turn, the biography by medical historian Edward T. Morman sheds light on Rosen’s life and his inspiration for writing *A History*. Morman reveals that Rosen’s commitment to leftist principles and experience as a health educator in New York City informed his approach of using class as a metaphorical lens to study historical events and impetus to put the patient experience first in his academic writing. Finally, stretching some forty-eight pages in length, the revised bibliography offers an impressive catalogue of publications grouped by disease, period, geography, and area of concern, proving that one of the greatest legacies of *A History* has been its ability to rouse curiosity and inspire other scholars.

Rosen’s book is especially relevant today. Although knowledge about public health and medicine has increased considerably since 1958, health professionals and policy-makers will find Rosen’s attention to the social determinants of disease especially poignant. In turn, Fee’s introduction and the expanded bibliography will benefit students of medical history, since together they provide a current analysis of the field backed up by a detailed list of accessible resources.

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