CANADIAN SOCIETY FOR THE HISTORY OF MEDICINE
ANNUAL CONFERENCE
25-28 MAY 2018
UNIVERSITY OF REGINA

Special Thanks
2018 Local Arrangements: Jan Purnis
2018 Program Committee: Esyllt Jones (Chair), Catherine Carstairs, Valérie Poirier, Catherine Gidney, Mark Humphries, James Hanley, John Gjevre, Sally Mahood
CEPD Accreditation: Geoffrey Hudson
Sandra Ferguson, Dept. of History, University of Manitoba
Katrina Ackerman, Canadian Historical Association
Peter Twohig
Isabelle Perrault

The CSHM Conference takes place on Treaty 4 land and the traditional homelands of the Métis peoples.
PROGRAM

Please note that CEPD Learning Objectives are located at program end. As a reminder, presenters are asked to limit their talks to 20 minutes, allowing 10 minutes for Q & A.

FRIDAY MAY 25

18:00       CSHM Executive Meeting

SATURDAY MAY 26

8:00-8:30    Coffee       CL 418
8:30-9:00    Welcoming Remarks     CL125
9:00-10:30   Concurrent Sessions

A1: Beyond Scalpel and Trephine:
Wilder Penfield and His Diverse Collaborators
Chair: Tara Abraham, University of Guelph       CL 408

“Designing Penfield/ Le design Penfield”
Annmarie Adams, McGill University

“Penfield and Psychiatry: Two Solitudes/ Penfield et la psychiatrie: deux solitudes”
Yvan Prkachin, Harvard University

“Penfield and Social Engineering/ Penfield et l’ingénierie sociale”
Delia Gavrus, University of Winnipeg

A2: Histories of Health Care Advocacy
Chair: John Gjevre, University of Saskatchewan       CL 418

*“’I learned things about birth control that I thought I already knew:’ Educational Outreach Initiatives from Southern Alberta Birth Control Centres, 1971-

* indicates student paper
1979”/ « J'ai appris des choses sur la contraception que je pensais déjà savoir: »
Initiatives d'éducation de proximité des Centres de contraception du Sud de l'Alberta, 1971-1979”
Karissa Patton, University of Saskatchewan

*”Aesculapian Activists or Status-Quo Students? Medical Students and Social Engagement in Mid-Century Ontario/ Militants Esccape ou étudiants du statu quo? Étudiants en médecine et l’engagement social en Ontario au XXe siècle”
Lucy Vorobej, University of Waterloo

10:30-11:00 Coffee CL125

11:00-12:30 Paterson Lecture CL125

TREMOR: A BIOGRAPHY OF PARKINSON’S DISEASE FROM THE SHAKING PALSY TO THE NEUROBIOLOGY OF COMPULSION
Dorothy Porter, PhD
Professor of the History of Health Sciences
University of California San Francisco

12:30-13:30 Lunch Break

13:30-15:00 Concurrent Sessions

B1: Psychiatry in the University
Chair: Delia Gavrus, University of Winnipeg CL 408

Tara H. Abraham, University of Guelph

“Why 1957? The Founding and Early Travails of the Queen’s University Department of Psychiatry/ Pourquoi 1957? L’origine et les difficultés du Département de psychiatrie à Queen’s University”
Jacalyn Duffin, Professor Emerita, Queen’s University

“Cold War Psychiatry: Research and Patronage at McGill University/ Psychiatrie de la guerre froide: recherche et patronage à l’Université McGill”

* indicates student paper
Matthew S. Wiseman, University of Toronto

B2: Reproduction and Women’s Health Activism
Chair: Whitney Wood, University of Calgary  CL 418

“Comment éviter la sélection ? L’insémination artificielle avec donneur en France (1960-1990)/ How to Avoid Selection? Artificial Fertilization with Donor’s Sperm in France (1960-1990)”
Fabrice Cahen, Institut national d’études démographiques (Ined)

Erna Kurbegović, University of Calgary

*“SPEAKing a History of ‘Medical Feminism’ and Women’s Health Activism in South Africa, 1982-1994/SPEAKing d’une histoire du « féminisme médical » et du militantisme pour la santé des femmes en Afrique du Sud, 1982 - 1994”
Vincenza Mazzeo, McGill University

15:00-15:30 – Coffee  CL 408

15:30-17:00 Concurrent Sessions

C1: Addressing Professional Inequity
Chair: Sasha Mullally, University of New Brunswick  CL 408

"Dr Ray Fletcher Farquharson and Equity Issues at University of Toronto Medical School, 1947-1960/ Dr.Ray Fletcher Farquharson et les problèmes de l’équité à l’’Université de Toronto 1947-60"
Irving Rosen, University of Toronto

Frank Stahnisch, University of Calgary

* indicates student paper
Jill Campbell-Miller, The Gorsebrook Institute, Saint Mary’s University

C3: What Influences Access to Health Care?
Chair: Jim Connor, Memorial University of Newfoundland

*“The Case of Dr. Masajiro Miyazaki -- Japanese Canadian Health Care in World War II/ Le cas du Dr Masajiro Miyazaki – soins de santé pour les Canadiens d’origine japonaise pendant la Deuxième Guerre mondiale”
Letitia Johnson, University of Alberta

*“Autonomy and/or Solidarity? Culture and Structure in Dutch Health Care 1900-1941/ L’autonomie et/ou la solidarité? La culture et la structure de la santé publique néerlandaise 1900-1941”
Roland Bertens, UMC Utrecht

Nancy Gonzalez Salazar, EHESS, France

17:00-18:00 CSHM Annual General Meeting CL 125
Graduate Student Happy Hour to follow

SUNDAY MAY 27

9:00 Coffee LB 126

9:30-10:30 Concurrent Sessions

D1. Gathering Diversities? Histories of Suicide in Canada

* indicates student paper
Chair: Marie-Claude Thifault, University of Ottawa   EA 106

“Accounts of deaths by suicide among former members of the Canadian Expeditionary Force (CEF) treated at the Ontario Military Hospital at Cobourg, 1918-1936/ Les décès par suicide chez les anciens combattants du Corps expéditionnaire canadien: le cas de l’Hôpital militaire de l’Ontario à Cobourg, 1918-1936”
Kandace Bogaert, Laurier Centre for Military Strategic and Disarmament Studies

“Les scénarios suicidaires au Québec au cours du XXe Siècle: que nous apprend l’histoire à l’égard des “décès par suicide”? /Suicide Patterns in Québec During the 20th Century: What History tells Us About ‘Death by Suicide”
Isabelle Perrault, Université d’Ottawa

D2. Constructing Maternity
Chair: Alexandre Klein, Laval University   LB 126

“ ‘By no means a unanimity of opinion’: Conceptualizing Labour Pain in Canadian Medical History/ «En aucun cas une unanimité d’opinion »: conceptualisation de la douleur du travail dans l’histoire médicale canadienne”
Whitney Wood, University of Calgary

“De la femme médecin à l’aide-soignante : Figures de proue de la médicalisation de la maternité en Chine du Sud (1879-1938)/ From Doctors to Caregivers: Women as Leaders of the Medicalization of Maternity in South China (1879-1938)”
Kim Girouard, Université de Montréal

10:30-11:00   Coffee   EA 106

11:00-12:30   Presidential Address   EA 106

‘EVERYTHING POSSIBLE IS BEING DONE’: LABOUR, MOBILITY, AND THE ORGANIZATION OF HEALTH SERVICES IN MID-20TH CENTURY CANADA
Peter L. Twohig

* indicates student paper
12:30-13:30 Lunch Period

13:30-15:00 Concurrent Sessions

E1: Gender, Public Interest and Mental Health Treatment
Chair: Erika Dyck, University of Saskatchewan  EA106

*“Mental Health Gender Dichotomies in 18th Century Scotland/ La dichotomie genrée de la santé mentale en Écosse du XVIIIème siècle”
Daniel McCormack, University of Calgary

“Fixing sex in a psychiatric ward. Learning Heteronormativity and Improving Married Life in Late State-Socialist Czechoslovakia/ Réparer le sexe dans un service psychiatrique. Apprendre l’hétéronormativité et améliorer la vie conjugale dans la période tardive de l’état socialiste tchécoslovaque”
Katerina Liskova, Masaryk University

*“The world outside these walls’: The Provincial Lunatic Asylum and the Public Sphere in Upper Canada, 1830-1857/’The World Outside these Walls’: l’asile et la sphère publique dans le Haut-Canada, 1830-1857”
Maximilian Smith, York University

E2: Pushing Boundaries
Chair: Susan Lamb, University of Ottawa  LB 126

“Un objet curieux, impalpable mais persistant dans la recherche en santé mentale au Canada : la culture ! Sur les débuts de la psychiatrie transculturelle (1955-1962)/ A curious, intangible but persistent object of the research on mental health in Canada: culture! On the early history of transcultural psychiatry (McGill, 1955-1962)”
Emmanuel Delille, Humboldt Universität

“First Successful Blood Transfusion of a Hemophiliac: a Collaboration between Samuel Armstrong Lane and James Blundell in London (1840). Why did it take more than 100 years before this became accepted practice?/ La première transfusion sanguine d’un hémophile : une collaboration entre Samuel

* indicates student paper
Armstrong Lane et James Blundell à Londres (1840). Pourquoi a-t-il fallu 100 ans avant que la pratique ne soit acceptée?"
Robert Card, University of Saskatchewan and Man-Chiu Poon, University of Calgary

"Break on Through: LSD Treatment, End-of-Life Therapy, and the ‘Other Side’/’Break on Through’: Le Traitement thérapeutique de la fin de vie, le LSD et «l’au-delà»
Lucas Richert, University of Strathclyde

15:00-15:30 Coffee LB 126
15:30-17:00 Concurrent Sessions

F1: Infectious Disease Outbreaks
Chair: James Hanley, University of Winnipeg EA 106

"Debates, Therapeutics, and Experiments in the Atlantic Medical Setting: Guaco and Cholera in the 19th Century/ Débats, thérapies et expériences dans le contexte médical de l’Atlantique: guaco et choléra au XIXe siècle”
Rogelio Velez Mendoza, University of Calgary

*"’The Best Sort of Smallpox’: An Examination of the Gender Roles Produced by Medical Crises in 18th Century Anglo-America/ ‘La meilleure sorte de variole’: un examen des rôles sexospécifiques produits par les crises médicales dans l’anglo-américain du XVIIIe siècle”
Rebecca Stieva, McGill University

“Gender and Racially Discriminatory Colonial Policies on VD Control in Shanghai (1920s-1930s)/ Politiques coloniales de discriminations sexuelles et raciales à Shanghai (années 1920-1930)”
Mirela Violeta David, University of Saskatchewan

F2: Disability and Reconstruction
Chair: Geoffrey Hudson, Northern Ontario School of Medicine LB 126

*"Disability and the Panama Canal: The Spatial Politics of Productivity/ Le handicap et le Canal de Panama : les politiques spatiales de la productivité,“

* indicates student paper
Caroline Lieffers, Yale University

“Saving Private Stone: Facial Reconstruction During the First World War and Living Life Afterwards/ Sauver le soldat Stone: la reconstruction faciale pendant la Première Guerre mondiale et ses conséquences sur la vie quotidienne après”
J.T.H. Connor, Memorial University of Newfoundland

Sasha Mullally, University of New Brunswick and Ricarda Konder, Dalhousie Medicine New Brunswick

17:00-18:00 Champagne and Strawberries Book Celebration  LB 142 Lab Café

19:00 Conference Dinner: Arizona Room, Bushwakker Restaurant

Monday May 28

8:30 Coffee CL 128

9:00-10:00 Concurrent Sessions

G1: Being Nurses
Chair: Frank Stanisch, University of Calgary LI 111

*“Nursing the Nurses: Medical Care for Nurses in British Naval Hospitals 1790-1815/ Soigner les infirmières : soins médicaux pour les infirmières britanniques dans les hôpitaux de la marine 1790-1815”
Erin Spinney, University of Saskatchewan

*‘We have to remember there was a past’: A first glimpse of the Saskatchewan Nursing Oral History Collection 1950-2010/ ‘Souvenons-nous qu’il y a eu un passé’: Un premier aperçu de la Collection d’histoire orale des infirmières et des infirmiers de la Saskatchewan entre 1950 et 2010”
Meghan Bend, Megan Hewson, Helen Vandenberg, University of Saskatchewan

* indicates student paper
G2: Innovation in Cancer Therapies
Chair: Jacalyn Duffin, Queen’s University CL 128

Fedir Razumenko, University of Saskatchewan

Dimitry Zakharov, University of Saskatchewan

10:00-10:15 Coffee CL 128

10:15-11:45 Concurrent Sessions

H1: Health, Class and Capitalism
Chair: Esyllt Jones, University of Manitoba LI 111

*”‘I moved it to the bone-house…’: Surgical testimonies and character witnesses in the adjudication of dead apprentices in London 19th century Old Bailey Courthouse”/ « I moved it to the bone house… » : Témoignages chirurgicaux et témoins de moralité dans les verdicts rendus au palais de justice d’Old Bailey à Londres au XIXe siècle concernant le décès d’apprentis”
Cosimo Calabrò, McGill University

Jaipreet Virdi, University of Delaware

”Lying Around: Medicine, Architecture, Geography, and Crime in Montreal’s Square Mile/ Un peu partout : médecine, architecture, géographie et criminalité dans le Square Mile de Montréal”

* indicates student paper
David Theodore, McGill University

**H2: Accidental History**
Chair: Lucy Vorobej, University of Waterloo   CL 128

*“No coverage for ‘...injuries caused by Indians’: Early accident insurance and the social and cultural world of late nineteenth-century Canada/ Aucune assurance pour les “...blessures causées par les indiens”: l’assurance-accidents et le contexte social et culturel du Canada à la fin du XIXe siècle”*

Ceilidh Auger-Day, University of Saskatchewan

“Mapping Accidents in Settler Communities/ La cartographie des accidents dans des communautés colonisatrices”
Megan J. Davies, York University

“Accidental history and war in early modern England, c. 1590-1810/ L’historique des accidents de guerre dans l’Angleterre pré-moderne (c 1590-1810)”
Geoffrey L. Hudson, Northern Ontario School of Medicine

11:45   Awarding of Seagall Prize for Best Student Paper   CL 128

* indicates student paper
13:30:15:00 Joint Panel with Canadian Historical Association/ Un panel conjoint SCHM et SHC

Écrire l’histoire de la désinstitutionnalisaton psychiatrique au Canada/ Writing the history of psychiatric deinstitutionalisation in Canada
Chair: Susan Lamb  ED 558

“Suivre le processus de désinstitutionnalisation psychiatrique québécois sur la longue durée. Un historien et une sociologue à l’Hôpital des Laurentides/
Following psychiatric deinstitutionalisation in Quebec in the long term. An historian and a sociologist at the Hôpital des Laurentides”
Alexandre Klein, Université Laval

“Diversity and Deinstitutionalisation: Doing History in Healthcare teams/ Diversité et désinstitutionnalisation : Faire de l’histoire en équipes de soins”
Erika Dyck, University of Saskatchewan

“‘Imaginaire et sensibilités’: La mise en récit de la déshospitalisation psychiatrique en Ontario/ “Imaginary and sensibilities: narratives of psychiatric dehospitalization in Ontario”
Marie-Claude Thifault, Université d’Ottawa
CSHM CEPD Learning Objectives

This 2018 CSHM Conference aims to enable participants to:
1. Describe and assess research methods in the history of health and medicine.
2. Demonstrate their knowledge of the history of health and medicine.
3. Discuss and develop a wider critical perspective on the history of health and medicine that can help inform their perspectives on issues related to practice and relevant public debates.

Session Objectives

A1: Beyond Scalpel and Trephine: Wilder Penfield and His Diverse Collaborators
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of health and medicine related to Wilder Penfield
2. Discuss and develop a wider critical perspective on the history of health and medicine concerning Wilder Penfield’s work that can help inform their perspectives on issues related to practice and relevant public debates.

A2: Histories of Health Care Advocacy
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of health care advocacy
2. Discuss and develop a wider critical perspective on the history of health and medicine concerning health care advocacy that can help inform their perspectives on issues related to practice and relevant public debates.

Paterson Lecture: Tremor: A Biography of Parkinson’s Disease from the Shaking Palsy to the Neurobiology of Compulsion
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of Parkinson’s Disease
2. Discuss and develop a wider critical perspective on the history of health and medicine concerning the subject of Parkinson’s Disease that can help inform their perspectives on issues related to practice and relevant public debates.

B1: Psychiatry in the University
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of psychiatry.
2. Discuss and develop a wider critical perspective on the history of psychiatry that can help inform their perspectives on issues related to practice and relevant public debates.

B2: Reproduction and Women’s Health Activism
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of women’s health activism.
2. Discuss and develop a wider critical perspective on the history of women’s health activism that can help inform their perspectives on issues related to practice and relevant public debates.

**C1: Addressing Professional Inequity**
1. Describe and assess research methods and demonstrate their knowledge of the history of professional inequity.
2. Discuss and develop a wider critical perspective on the history of professional inequity that can help inform their perspectives on issues related to practice and relevant public debates.

**C2: What Influences Access to Health Care?**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of healthcare.
2. Discuss and develop a wider critical perspective on the history of health care access that can help inform their perspectives on issues related to practice and relevant public debates.

**D1: Gathering Diversities? Histories of Suicide in Canada**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of suicide.
2. Discuss and develop a wider critical perspective on the history of suicide that can help inform their perspectives on issues related to practice and relevant public debates.

**D2: Constructing Maternity**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of maternity, health and medicine.
2. Discuss and develop a wider critical perspective on the history of maternity, health and medicine that can help inform their perspectives on issues related to practice and relevant public debates.

**Presidential Address: ‘Everything Possible is Being Done’: Labour, Mobility, and the Organization of Health Services in Mid-20th-Century Canada**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of health and medicine on the history of the organization of health care in Canada.
2. Discuss and develop a wider critical perspective on the history of the organization of health care in Canada that can help inform their perspectives on issues related to practice and relevant public debates.

**E1: Gender and Public Interest in Mental Health Treatment**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of general and the public interest in mental health treatment.
2. Discuss and develop a wider critical perspective on the history of the public interest in mental health treatment that can help inform their perspectives on issues related to practice and relevant public debates.

**E2: Pushing Boundaries**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of therapeutic boundaries, health and medicine.
2. Discuss and develop a wider critical perspective on the history of therapeutic boundaries, health and medicine that can help inform their perspectives on issues related to practice and relevant public debates.

**F1: Infectious Disease Outbreaks**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of infectious disease outbreaks.
2. Discuss and develop a wider critical perspective on the history of infectious disease outbreaks that can help inform their perspectives on issues related to practice and relevant public debates.

**F2: Disability and Reconstruction**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of disability, health and medicine.
2. Discuss and develop a wider critical perspective on the history of disability, health and medicine that can help inform their perspectives on issues related to practice and relevant public debates.

**G1: Being Nurses**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of nursing.
2. Discuss and develop a wider critical perspective on the history of nursing that can help inform their perspectives on issues related to practice and relevant public debates.

**G2: Innovation in Cancer Therapies**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of cancer therapies.
2. Discuss and develop a wider critical perspective on the history of cancer therapies that can help inform their perspectives on issues related to practice and relevant public debates.

**H2: Health, Class and Capitalism**
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of health, class and capitalism.
2. Discuss and develop a wider critical perspective on the history of health, class and capitalism that can help inform their perspectives on issues related to practice and relevant public debates.
H3: Accidental History
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of accidents, health and medicine.
2. Discuss and develop a wider critical perspective on the history of accidents, health and medicine that can help inform their perspectives on issues related to practice and relevant public debates.

Joint Panel with Canadian Historical Association/ Un panel conjoint SCHM et SHC, Écrire l’histoire de la désinstitutionnalisation psychiatrique au Canada/ Writing the history of psychiatric deinstitutionalisation in Canada
At the end of this session, participants will be able to:
1. Describe and assess research methods and demonstrate their knowledge of the history of psychiatric deinstitutionalisation.
2. Discuss and develop a wider critical perspective on the history of psychiatric deinstitutionalisation that can help inform their perspectives on issues related to practice and relevant public debates.

CONCLUSION OF CSHM PROGRAM