human rights and equity. healthy environments and high-quality care; and in reducing the wide disparities in health to assure animate our work today in caring for those most in need; in recognizing the winning combination of department, my colleagues and friends, as well as so many gifted and committed students, has Much has changed in how we account for social medicine. The work done by members of our array of possibilities for expanding health for individuals and populations. social medicine would draw on the full and conscientious caring. In this orientation to social medicine, the historical tensions between determinants of health and disease; delivering effective and essential medicines and therapeutics; These were critical issues that my students effectively and articulately brought to light. It was, I might ultimately be realized. To insist on social determinants in a way that largely ignored and he rejected the value of medical interventions at the very moment that their therapeutic promise critical role that public health reforms had played in extending health, and, perhaps most notably, problematic. As many critics (some among us) have pointed out, he inadequately addressed the circumstance. They learned that to call this the placebo effect was but a trope of contemporary of efficacy; there was always something that could be done, even for patients in the most dire The point that students often brought to this discussion centered on caregiving regardless of norms of expert healers? What was the character of trust in this complex interaction? I often centered attention on a question that McKeown largely elided; namely, if medical care and interventions, but rather changes in social conditions, especially nutrition and reproduction; that be told by a new PhD in American history that the medical science that they would be learning is of trepidation. First year students, I reasoned, did not come to medical school (especially HMS) to disturb common understandings of the rise of scientific medicine and its efficacy through the use of historical demographic and epidemiological data. But as a result, I assigned it with some degree new assistant professor, especially since I understood that this would be considerably different from my long experience teaching undergraduates in a history department. I quickly decided that running a longitudinal course that developed a narrative from Hippocrates to the Harvard Community Health Plan was conducive to learning the art. But more importantly I hoped that it would provide direct to direct attention to some of the fundamental questions and values at the heart of social medicine. medicine and public health became all but meaningless. As many critics (some among us) have pointed out, he inadequately addressed the critical role that public health reforms had played in extending health, and, perhaps most notably, problematic. As many critics (some among us) have pointed out, he inadequately addressed the of expert healers? What was the character of trust in this complex interaction? I often centered attention on a question that McKeown largely elided; namely, if medical care and interventions, but rather changes in social conditions, especially nutrition and reproduction; that be told by a new PhD in American history that the medical science that they would be learning is of trepidation. First year students, I reasoned, did not come to medical school (especially HMS) to disturb common understandings of the rise of scientific medicine and its efficacy through the use of historical demographic and epidemiological data. But as a result, I assigned it with some degree new assistant professor, especially since I understood that this would be considerably different from my long experience teaching undergraduates in a history department. I quickly decided that running a longitudinal course that developed a narrative from Hippocrates to the Harvard Community Health Plan was conducive to learning the art. But more importantly I hoped that it would provide direct to direct attention to some of the fundamental questions and values at the heart of social medicine. medicine and public health became all but meaningless. As many critics (some among us) have pointed out, he inadequately addressed the critical role that public health reforms had played in extending health, and, perhaps most notably, problematic. As many critics (some among us) have pointed out, he inadequately addressed the