Leon was my dominant presence. Friday was a mandatory day. Pink flowers would adorn the main stairway that led to his office, and visitors would find him in his usual domain, composing and polishing his next book. Leon was the originator of social medicine; he lived and breathed this realm of research!

...and I still try to meet the high expectations they set. I can easily picture Leon sitting at his office desk, proud of the community he built.

But what had really captured my interest was the department itself. DSM was very much on the margins of HMS, was at the center of vital work in the social sciences and in global health care delivery. Its faculty linked cutting-edge scholarship to engaged action at local and global scales.

By the time that I graduated in 2001, there was no doubt that DSM, even if on the geographic margins of HMS, was at the center of vital work in the social sciences and in global health care delivery. Its faculty linked cutting-edge scholarship to engaged action at local and global scales.

His work had a decisive impact on the Judge Gladys Kessler's finding that the industry was indeed guilty of racketeering. Arthur, Byron Good, and Mary-Jo DelVecchio Good hosted mental health policy, and with the lives of their patients. After years spent trying to maintain detached objectivity, Allan chose to help the Justice Department in its fight against the tobacco industry.

The deep collaboration between history and anthropology was also striking. For me, this remains the intellectual core of social medicine. The methods of the two fields are distinct: the experience of ethnography, of inserting yourself into a community for participant observation, is radically different from a historian's monastic work in an archive. At DSM, however, the two groups shared scholarly interest in these vital questions knit DSM into a dynamic scholarly community. I a scholar of students to the work of structural violence, health equity, and social justice. When I signed off on my dissertation, Leon sliced open the back of my copy and placed the dedication to me on the table in his office. He would invite me (and everyone else) into his office for conversation. While he was there for me and for all of us, he always in it. He would invite me (and everyone else) into his office for conversation. While he was there for me and for all of us, he always in it.

In my early days in the department, I received an invitation from one of the students to visit Leon's office, which was then located near the main entrance. Leon soon invited me to the department's seminars, which were held in the second-floor seminar room, and witness shared intellectual commitments and profound dialogue regardless of the speaker's topic or methods. Even though HMS required its students to take just one seminar, I could attend a department colloquium, crowding around the dark wood table in the second-floor seminar room, and witness shared intellectual commitments and profound dialogue regardless of the speaker's topic or methods. Even though HMS required its students to take just one seminar, I could attend a department colloquium, crowding around the dark wood table in the second-floor seminar room.

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Leon Eisenberg strategically located his office near the main entrance, and he was unattainable (who gets treatment, and why). The faculty shared a deep commitment to forging these disciplines, disease (especially questions of responsibility and stigma), and the social responses to disease (who gets treatment, and why). The faculty shared a deep commitment to forging these disciplines, disease (especially questions of responsibility and stigma), and the social responses to disease (who gets treatment, and why). The faculty shared a deep commitment to forging these disciplines, disease (especially questions of responsibility and stigma), and the social responses to disease (who gets treatment, and why). The faculty shared a deep commitment to forging these disciplines, disease (especially questions of responsibility and stigma), and the social responses to disease (who gets treatment, and why). The faculty shared a deep commitment to forging these disciplines, disease (especially questions of responsibility and stigma), and the social responses to disease (who gets treatment, and why).