

At a meeting of the FACULTY OF ARTS AND SCIENCES on November 3, 2015, the following tribute to the life and service of the late Barbara Rosenkrantz was spread upon the permanent records of the Faculty.

BARBARA GUTMANN ROSENKRANTZ

BORN: January 11, 1923

DIED: April 30, 2014

Barbara Rosenkrantz died on April 30, 2014, after a long, disabling illness. She was best known among her fellow historians as a leader and innovator in the study of public health and population, defining it as a central concern for historians in general and historians of medicine and science in particular. She will be remembered as intellectually curious, critical, and analytical, yet warm and welcoming—and as an advocate for and practitioner of interdisciplinary and collaborative scholarship. She was a prominent figure on campus and an effective actor in Harvard’s belated efforts to find a place for women on the faculty.

Born in New York City in 1923, Barbara Gutmann was the daughter of a Columbia philosophy professor and a Wellesley-educated mother (who attended medical school for a time). After an education that included periods in Berlin, Vienna, and Paris, she entered Radcliffe, graduating in spring 1944. Gutmann came of age in a generation that experienced the rise of fascism, the Spanish Civil War, and the Nazi-Soviet pact. As she explained in an oral history in 1981, she had been a pacifist but changed in the years after Hitler invaded Poland and as she became involved in left-wing politics. War influenced her decision to write her history and literature honors thesis on “Whitman’s and Emerson’s attitude towards the Civil War.” It was directed by F. O. Matthiessen, who remained an intellectual hero for her throughout her life. “Matthiessen just made me,” she recalled. “Whatever I am as an intellectual was fundamentally made by Matty.”¹

But this was her last immersion in history for two decades. When she submitted her undergraduate honors thesis in December 1943, she was married and soon to have a daughter. She and her husband became deeply involved in left-wing politics, but the marriage did not last. Following her divorce, she married Paul Rosenkrantz, a fellow activist, and they had two more daughters. Now a mother of three, she had little time for an academic career. It was, in any case, a world unfriendly to women and mid-life entrants.

¹ This quote and the phrase “retrospective epidemiology” cited later are taken from the transcript of an oral history recorded by Professor Rosenkrantz in 1981 and deposited in the Schlesinger Library, The Radcliffe Institute, Harvard University.

Between the mid-forties and mid-sixties she held a variety of jobs—most important to her later career, entry-level lab technician, assistant director, and finally director of a clinical laboratory for Springfield-area hospitals. Her years of thinking about politics and society and her experience in the bacteriology laboratory converged to shape her ultimate interest in public health and its history. Rosenkrantz always believed that the history of science should not be simply the history of ideas, intellectuals, and progress in the understanding of the natural world but should include every aspect of human experience. Historians of medicine in particular, she urged, should also focus on populations, health outcomes, and social and environmental contexts as well as ideas and institutions.

She returned to graduate school at Clark University in 1964 and turned to the history department, where she found sympathetic advisors. Her dissertation fortuitously responded to the impending centennial of the Massachusetts Department of Public Health, America's first such state agency. She spent two years as a Bunting fellow at Radcliffe, 1967–1969, working on that centennial history, which became her dissertation and, in published form, her landmark study *Public Health and the State: Changing Views in Massachusetts, 1842-1936*. A post-doctoral year and then a junior position in Harvard's Department of the History of Science soon followed. In 1974, Barbara was appointed the first female faculty House Master in Harvard's long-established undergraduate House system (along with her Co-House Master husband Paul, who had become a clinical psychologist and professor at Holy Cross). She was awarded tenure in 1975 and until her retirement remained a highly visible and respected figure on campus, both as a stimulating colleague and an inspiring teacher. Rosenkrantz was known for being both unsparingly critical and deeply supportive of her students. To many students and colleagues, she was—in the words of one—"a true and uncompromising intellectual, not simply by upbringing and education, but by nature." She served on a variety of university committees, as department chair, and as faculty advisor to Harvard's first Gay Students Association. For many years she also held a joint appointment at Harvard's School of Public Health, where she tirelessly advocated for history.

As a teacher she sought to encourage a point of view that integrated population health with both the laboratory and larger structural and social factors. Very early in her career, for example, she offered a General Education course entitled "A Social History of Disease and Health from the Revolution to World War II." She sought consistently to make the history of medicine genuinely historical and to use public health history as a tool for understanding those other aspects of society that shaped health outcomes—thus her long-term interest in tuberculosis, which seemed a sensitive tool for investigating the complex ways in which social, economic, and intellectual developments shaped morbidity and mortality. She taught an integrative course organized around the history of the disease and edited a valuable anthology of readings that grew out of the same course (*From Consumption to Tuberculosis: A Documentary History*). A form of what she called "retrospective epidemiology," an approach that included immunology, bacteriology, and demography as

well as more traditional historical sources, it seems extraordinarily timely, even fashionable, today.

Her interdisciplinary and contextual orientation was also reflected in her teaching and research, especially in her extraordinary capacity for collaboration. She undertook joint research projects on environmental history (resulting in *American Habitat: A Historical Perspective*), on a quantitative study using nineteenth-century patient records, on twentieth-century philanthropy and health policy, and on auto-immune diseases. In a similarly open and interdisciplinary way she team taught courses with a variety of diversely eminent Harvard scholars. Barbara Rosenkrantz never lost her faith in the university as a place to teach, explore, and live. We need such friends and colleagues and we miss her in so many ways. She is survived by her three daughters, five grandchildren, and two great-grandchildren.²

Respectfully submitted,

Allan Brandt
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Charles Rosenberg, Chair

² Portions of this Minute were previously published by Charles Rosenberg, "Obituaries: Barbara Rosenkrantz (1923-2014)," *American Association for the History of Medicine Newsletter*, no. 107 (February 2015): 10–12.