Changing *the* Face of Medicine
Site Support Notebook—Contents Page

(Note: The Site Support Notebook is also available at [http://www.ala.org/publicprograms/changingthefaceofmedicine](http://www.ala.org/publicprograms/changingthefaceofmedicine)
Click on “Site Support Notebook”)

Instructions for assembling exhibition units and replacing panels, and detailed instructions for operating the interactive kiosks will be distributed separately for later insertion into this notebook.

**Front notebook pocket:** Information on The National Library of Medicine

**Front manila insert:** Workshop agenda (front); coordinator contact list (back)

**Back notebook pocket:** ALA Public Programs brochure; Cultural Programs survey; application forms for ALA Jewish literature reading and discussion program

### Section 1 (blue tab)----General
- Troubleshooting ........................................ 1
- Exhibition itinerary ...................................... 2
- Electronic discussion list for exhibit coordinators .... 4
- Security and insurance .................................. 5
- Telling legislators ........................................ 5
- Americans with Disabilities Act ....................... 6

### Section 2 (clear)------Publicity
(This section is also on CD and online)
- Official exhibition credits ............................. 7
- Publicity approval ........................................ 8
- Permitted publicity images ............................. 8
- PR image captions & credits ........................... 9
- Guidelines for image use ............................... 10
- PR to announce library selection .................... 11
- Calendar listing/media alert .......................... 13
- Letter to media/community groups ................... 14
- Press release ............................................. 15
- Public service announcements ....................... 17
- Promotion Guide ........................................ 18

### Section 3 (green)---Programming
- Exhibition support materials ......................... 24
- Exhibition themes ....................................... 25
- Programming ideas ..................................... 26
- Grants for programming ................................ 28

### Section 4 (yellow)-------Resources
- Books and videos ........................................ 29
- Web sites .................................................. 30
- Films ....................................................... 31
- Exhibition text .......................................... 32

### Section 5 (red) -------Logistics
- Exhibit shipping and receiving ....................... 54
- Exhibition/kiosk condition report form ............. 55
- Final report form ....................................... 60
TROUBLESHOOTING?
If you have questions about . . .

• KIOSK OPERATION
• PUBLICITY REVIEWS
• PROGRAMMING RESOURCES
• TOUR ITINERARY
• ANY OTHER EXHIBIT QUESTIONS

CONTACT:
Susan Brandehoff
Public Programs Office
American Library Association
50 East Huron Street
Chicago, IL  60611
312-280-5054
800-545-2433, ext. 5054
Fax: 312-944-2404
E-mail: sbrandeh@ala.org

• DAMAGE/REPAIRS
• EXHIBITION SHIPPING
• RECEIVING BROCHURES AND POSTERS
• FINAL REPORTS TO ALA

CONTACT:
Sofiana Peterson
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American Library Association
50 East Huron Street
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Fax: 312-944-2404
E-mail: publicprograms@ala.org
OR
speterson@ala.org
Changing The Face of Medicine Tour Itinerary

Important exhibit display information: The first date of your exhibit display period is a Wednesday. This is the last day for the shipper to deliver the exhibit to you. **Please do not plan programs on Wednesday,** and we recommend not scheduling programs on Thursday in case of unforeseen delivery problems. The last date in your exhibition period is a Friday, which is the last day you will have the exhibit (you may close the exhibit earlier if you wish). Because there is limited time available to get the exhibition from one site to another, libraries should have the exhibition dismantled and ready for pick-up on the Monday after the exhibition closes. **This does not mean the shipper will always pick up the exhibit on Monday, but the exhibit should be ready to go on Monday morning.**

<table>
<thead>
<tr>
<th>Tour Dates</th>
<th>Copy I</th>
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<tbody>
<tr>
<td><strong>2005</strong></td>
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<tr>
<td>Aug 31 – Oct 14</td>
<td>Johnson City, TN</td>
<td>Pittsburgh, PA</td>
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<tr>
<td>Oct 26 – Dec 23</td>
<td>Charlotte, NC</td>
<td>Cleveland, OH</td>
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<td><strong>2006</strong></td>
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<tr>
<td>Jan 11 – Feb 24</td>
<td>Chattanooga, TN</td>
<td>Syracuse, NY</td>
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<tr>
<td>March 8 – Apr 21</td>
<td>Augusta, GA</td>
<td>Cambridge, MA</td>
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<td>May 3 – June 16</td>
<td>Atlanta, GA</td>
<td>Worcester, MA</td>
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<td>June 28 – Aug 11</td>
<td>Jacksonville, FL</td>
<td>New Brunswick, NJ</td>
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<td>Aug 23 – Oct 6</td>
<td>Gainesville, FL</td>
<td>South Hadley, MA</td>
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<tr>
<td>Oct 18 – Dec 8</td>
<td>Milledgeville, GA</td>
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<td><strong>2007</strong></td>
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<td>Dec 20 – Feb 16</td>
<td>Columbia, SC</td>
<td>Cincinnati, OH</td>
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<td>Feb 28 – Apr 13</td>
<td>Charlotteville, VA</td>
<td>Detroit, MI</td>
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<td>Apr 25 – June 8</td>
<td>Greenville, NC</td>
<td>University Park, IL</td>
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<td>June 20 – Aug 3</td>
<td>Richmond, VA</td>
<td>Marquette, MI</td>
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<td>Aug 15 – Sept 28</td>
<td>Baltimore, MD</td>
<td>Marshall, MN</td>
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<td>Oct 10 – Nov 30</td>
<td>New York, NY</td>
<td>Iowa City, IA</td>
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<td><strong>2008</strong></td>
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<td>Dec 12 – Feb 15</td>
<td>Birmingham, AL</td>
<td>Council Bluffs, IA</td>
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<td>Feb 27 – Apr 11</td>
<td>Jackson, MS</td>
<td>Casper, WY</td>
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<td>Apr 23 – June 6</td>
<td>Houston, TX</td>
<td>Missoula, MT</td>
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<td>June 18 – Aug 1</td>
<td>Abbeville, LA</td>
<td>Portland, OR</td>
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<td>Aug 13 – Sept 26</td>
<td>Galveston, TX</td>
<td>Kemewick, WA</td>
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<td>Oct 8 – Nov 21</td>
<td>San Antonio, TX</td>
<td>Seattle, WA</td>
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<td>Dec 3 – Jan 30</td>
<td>Glendale, AZ</td>
<td>Fresno, CA</td>
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<td><strong>2009</strong></td>
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<td>Feb 11 – Mar 27</td>
<td>Tucson, AZ</td>
<td>Reno, NV</td>
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<td>Apr 8 – May 22</td>
<td>Albuquerque, NM</td>
<td>Denver, CO</td>
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<td>Dates</td>
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<td>June 3 – July 24</td>
<td>Tulsa, OK</td>
<td>Wichita, KS</td>
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<td>Aug 5 – Sept 18</td>
<td>Louisville, KY</td>
<td>St. Louis, MO</td>
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<td>Sept 30 – Nov 13</td>
<td>Kansas City, KS</td>
<td>Columbia, MO</td>
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<td><strong>2010</strong></td>
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<td>Nov 25 – Jan 22</td>
<td>Marion, IN</td>
<td>Indianapolis, IN</td>
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<td>Feb 3 – Mar 19</td>
<td>Dayton, OH</td>
<td>Madison, WI</td>
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<tr>
<td>Mar 31 – May 14</td>
<td>Springfield, IL</td>
<td>Columbus, OH</td>
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<tr>
<td>May 26 – July 9</td>
<td>Memphis, TN</td>
<td>Philadelphia, PA</td>
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<tr>
<td>July 21 – Sept 17</td>
<td>Fairfax, VA</td>
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MEDICINE@ALA.ORG
ELECTRONIC DISCUSSION LIST

The ALA Public Programs Office will maintain an electronic discussion list for “Changing the Face of Medicine” participants. The list is open, and anyone can subscribe—see how to subscribe below. Undeliverable addresses will be automatically deleted.

To subscribe to the Changing the Face of Medicine electronic discussion list:
Send an email to listproc@ala.org with the message “Subscribe Medicine (your name)”

Example: Subscribe Medicine Deb Robertson

GUIDELINES
The Public Programs Office subscription electronic discussion lists are intended for:

- Substantive discussion of issues and ideas relating to public programs at libraries, such as formats, funding, etc.
- Sharing information about library programming; especially cultural programming for adult community audiences.
- Queries and advice to/from peers.
- Announcements from the ALA Public Programs Office regarding opportunities and initiatives.

When submitting a message to a list, please keep in mind:

- The lists are open, and anyone can subscribe, so all postings should be of a public, non-confidential nature.
- All submissions should be in plain text without attachments.
- If you simply reply to a posted message, you will be responding to the entire list, not just the sender. When responding to a message posted to the list, please copy the sender's email address and respond to them directly; reply to the posted message only when you wish to share your response with the entire list.
- Basic rules of electronic mail etiquette are expected; e.g., anonymous submissions, character assassination, sharing confidential information and profanity are strictly prohibited.
- If you are subscribed to any ALA list, please do NOT enable any auto-response for your email address. If you are going away and absolutely must explain to people that you won't be checking your email, please unsubscribe from the list first.

Questions?

Contact the ALA Public Programs Office at publicprograms@ala.org
Security and Insurance

Exhibitions may be displayed in a gallery or other open area in the library, but preferably not in a hallway. No ALA-sponsored exhibition is to be displayed outdoors or in a tent or other temporary structure. Please do not store any exhibit shipping crates outdoors.

Supervision by a guard or library staff member is required. It is preferable that someone be in the room with the exhibition at all times—they may be performing other duties as well as monitoring the exhibition. If that is not possible, we expect that a staff member or guard will walk around and monitor the exhibit periodically during the times it is open to the public. We suggest doing this at least every 15 minutes during times of peak library use and every half-hour at less busy times.

ALA has primary responsibility for investigating loss or damage to the exhibit and determining fault. If a library is determined to be at fault in damage or loss, then the library will be responsible for paying costs to replace or restore parts of the exhibit. If the library is determined not to be at fault, then ALA, through the exhibition grant budget and insurance coverage, will handle the costs of damage or loss.

The value of the “Changing the Face of Medicine” exhibit is $85,000 for insurance purposes. Some libraries add a rider to their insurance policy for the exhibit period.

Telling legislators about the exhibition

Please inform your local, state and national legislators that the library and the community are participants in a major project funded by the National Library of Medicine. Invite them to the opening reception or to other programs you are sponsoring; invite them to speak or introduce speakers.

Also urge your patrons to contact their legislators about library programs they value. Anne Prusha, of the Geauga County Public Library in Chardon, Ohio, a previous ALA exhibition host, distributes a flyer that says:

“If you enjoyed the program this afternoon, please feel free to write to any or all of the following to express your appreciation. Paper and envelopes are available as you leave and there will be stamps for sale if you wish to write immediately. Thank you in advance for supporting your library and its programs.”

A list of local, state and federal elected legislators and their addresses and fax numbers follows.
Complying with the Americans with Disabilities Act

The Americans with Disabilities Act (ADA) (PL 101-336), which went into effect in July 1992, guarantees that people with disabilities shall have equal access to employment, public services and accommodations, transportation and telecommunications services. As public service providers, libraries must make reasonable efforts to give disabled people the same access to information, programs and resources enjoyed by those who are not disabled.

Each library on the "Changing the Face of Medicine" tour will have varying capabilities for providing equal access to disabled people. We urge you to do as much as you reasonably can to make the exhibition accessible to the disabled population.

Enlisting the aid of the person who is responsible for services for the disabled in your local government may be helpful. Local agencies serving the disabled can also give advice.

We offer the following suggestions to enhance the accessibility of "Changing the Face of Medicine":

- Allow space for wheelchairs when you are setting up the exhibition.
- Prepare a large-print version of publicity materials and program handouts.
- Offer signed tours of the exhibition at specified times.
- Provide for signing at programs related to the exhibition.
- Produce an audiotape of the exhibition text.
- Make members of the library staff available at certain times to walk through the exhibit with people in wheelchairs, the visually impaired, etc.

Why the ALA works with other institutions and funders to circulate traveling exhibitions to libraries

Libraries are many things to their communities. They offer the practical information people need to improve the quality of their lives and to increase their options in a complex society. Libraries also give their communities something less than tangible, yet just as essential to a satisfying and productive life—nourishment for the spirit.

Programs that encourage people to think about history, ethics, music, visual and literary arts, and human values are an integral part of the mission of libraries.

Exhibitions in libraries stimulate the public's interest in the world of ideas. They are not ends in themselves, but starting points for substantive programming, discussion and study. One goal of ALA exhibitions is to encourage visitors to go beyond the images and to explore exhibition themes with the help of programs and bibliographic aids offered by host libraries. A related goal is to help libraries strengthen their role as an intellectual forum and central cultural and educational institution in the community.
“Changing the Face of Medicine” Exhibition credits

Please use the following credit information on materials you produce for the exhibition. Also see “Further Guidelines for Sponsor Acknowledgement” below.

“Changing the Face of Medicine: Celebrating America’s Women Physicians” was developed by the Exhibition Program of the History of Medicine Division of the National Library of Medicine in collaboration with the American Library Association Public Programs Office. The traveling exhibition has been made possible by the National Library of Medicine and the National Institutes of Health Office of Research on Women’s Health. The American Medical Women’s Association provided additional support.

Further Guidelines for Sponsor Acknowledgment:

- The credit above should appear on all printed and other visual materials related to the exhibition, including press releases, brochures, publications, invitations, program flyers, advertisements, press kits, announcements, Web sites and local posters. It should also appear on any signage at the entrance to the exhibition. On all materials, it should appear in a type size that is readable and appropriate to the overall design.

- Please use the NLM/NIH combined logo, ORWH, AMWA, and ALA logos on materials whenever possible, in particular on smaller PR pieces on which there is not space for the full credit.

- In speaking to or sending press releases to newspaper reporters, radio and TV interviewers and other media personnel, please stress that full sponsorship and funding credit should be included in all articles and features. Some libraries include a line set off at the beginning of press releases saying "Editor: Please do not edit out sponsorship credits in paragraph __." 

- At press events and in public programs: The sponsorship of the NLM, the NIH Office of Research on Women’s Health, the American Medical Women’s Association, and the ALA should be acknowledged orally at the beginning and end of press conferences, public programs, and other public events connected with the exhibition, and at the beginning and end of radio or television interviews. Use the official exhibition credit as a guide.

- Local sponsor credits: Local sponsor credit must follow the “Changing the Face of Medicine” exhibition credit line and be in a type size no larger than the exhibition credit. The exception is materials which are entirely supported by another funding source. In those cases, it is still necessary for the credit line above to appear, but the additional sponsor's credit may appear first and in larger type.
**Important!—Publicity approval**

Publicity for the exhibition is the responsibility of the exhibiting library; however, ALA will work with each library to achieve the best coverage possible. Please contact the ALA Public Programs Office if you have questions or need PR materials.

**LIBRARIES MUST SUBMIT—AT LEAST THREE DAYS BEFORE PRINTING OR POSTING—ALL DRAFT COPY** of press releases, media advisories, Web site designs, backgrounders, program flyers, ads, and exhibition invitations to the ALA Public Programs Office by either fax or e-mail.

Please send draft copy to Susan Brandehoff, Tel.: 1-800-545-2433, ext. 5054; Fax: 312-944-2404. E-mail: sbrandeh@ala.org. Materials will be reviewed immediately.

Copies of all press coverage, including videotapes of television coverage and audiotapes of radio reports, should be sent to ALA with the library’s final report.

**Library web sites**

When your Changing the Face of Medicine web page is up on your library web site, send an e-mail with the address of your site to the ALA Public Programs Office to include on their project Web site (www.ala.org/publicprograms/). The ALA Public Programs Office e-mail address is publicprograms@ala.org.

**Permitted publicity images**

All libraries will receive a CD containing permitted publicity images, captions and credits, sponsor logos and sample PR materials. Please keep this CD in a safe place. A replacement fee may be charged for libraries requesting additional copies.

Most of the Site Support Notebook will also be available through the main ALA Changing the Face of Medicine web site:

http://www.ala.org/publicprograms/changingthefaceofmedicine

To access the Online Site Support Notebook, click on the link to the “Online Site Support Notebook” from the main page for Changing the Face of Medicine. If you have any difficulties, please contact the ALA Public Programs Office using the contact information on page 1 of this guide.
Publicity Images—Captions and Credits

Below are captions and credits for the publicity images permitted for the exhibit. The images themselves are only on the CDs given to each library on the tour (captions and credits are also on the CD). The images will not be on the exhibition web site. Please use the captions and credit lines at all times when you use the images.

1. S. Josephine Baker, M.D., Dr. P.H., was a prominent public health physician during the first half of the 20th century.

Library of Congress, Prints and Photographs Division, LC-USZ62-058326, ca. 1920

2. An illustration of anatomical lectures at the Women’s Medical College of the New York Infirmary, Frank Leslie’s Illustrated Newspaper, April 16, 1870. The Women’s Medical College was founded by Dr. Elizabeth Blackwell and her sister, Emily Blackwell, in 1869.

National Library of Medicine, Images from the History of Medicine

3. Nina Starr Braunwald, M.D., M.S., shown in this 1960 photo, was one of the first women to train as a general surgeon at New York's Bellevue Hospital. A pioneer in the field of heart surgery, she led the team that was the first to implant a prosthetic heart valve, which she also designed.

Eugene Braunwald, M.D.

4. Dr. Susan Briggs (second from right) with a U.S. burn team near Ufa, Russia, June, 1989. Dr. Briggs founded the International Medical Surgical Response Team in 2000 to respond to natural and manmade disasters.

Susan M. Briggs, M.D., M.P.H.

5. Dr. May Edward Chinn examining a young patient, 1930. Dr. Chinn graduated from medical school in 1926 and practiced medicine in the Harlem neighborhood of New York City for 50 years.

George B. Davis, Ph. D.

6. Dr. Katherine Flores, shown here with her grandmother, Antonia Hernandez, in 1972, credits her grandparents, who were migrant workers in Fresno, California, for giving her a strong work ethic.

Katherine A. Flores, M.D., photography by Olan Mills

7. Dermatologist Dr. Nancy E. Jasso, one of the founders of a laser tattoo-removal project in the San Fernando Valley of California, removes a tattoo from a patient's arm, ca. 2001.

Nancy E. Jasso, M.D., M.P.H.

8. Dr. Sharon M. Malotte was the first Native American from Nevada to become a physician.

Sharon M. Malotte, M.D., photograph by d'Joyce Bismarck, 1986
Antonia C. Novello, M.D., M.P.H., Dr. P.H.

10. Dr. Linda Shortliffe earned board certification in urology in 1983, when there were only 15 women urologists in the U.S. Now there are more than two hundred.
Linda M. Dairiki Shortliffe, M.D., 2000

11. Dr. Mary Edwards Walker was the first woman awarded the Congressional Medal of Honor, for her work as a surgeon during the Civil War.
National Library of Medicine, Images from the History of Medicine

Guidelines for Use of Publicity Images

Because of strict permissions agreements with institutions lending images for the exhibition, only Changing the Face of Medicine tour libraries are authorized to use these images in their publicity. Libraries may authorize newspapers and other print media to use the images.

- The use of these images is restricted to noncommercial or educational activities and promotion of the "Changing the Face of Medicine" exhibition at the specified library venues hosting the exhibit. This use should occur only during the time period for which the library is scheduled to host the exhibit or for advance publicity. Resale or commercial use of any image for profit in another publication, edition, format, or language is prohibited. Images may not be used for publicity for programs involving fundraising.

- A copy of all publicity materials using any of these images must be provided to the Public Programs Office with the library's final report for the exhibition.

- Libraries may not reformat, redesign or otherwise alter the images, nor re-use the images in other products not associated with the exhibit, nor allow others to use them (except for media outlets). Libraries may print color images in black-and-white.

- All images must be accompanied by the credits provided with the image. The use of accompanying explanatory captions is strongly encouraged, but not required.

- In the event of violation of these conditions, the sponsors of Changing the Face of Medicine reserve the right to terminate a participating library's use of the exhibition.

- Libraries are liable for damages, claims, suits or other legal proceedings arising from or attributed to violation of third party rights resulting from any unauthorized creation, use, display, or modification of advertising or publicity materials relating to the exhibit.
For Immediate Release
(Month, Year)

(Contact: Phone:

(Name of Library) selected for “Changing the Face of Medicine” national traveling exhibition

The (Name of Library) is one of 61 libraries from across the U.S. selected to host “Changing the Face of Medicine: Celebrating America’s Women Physicians,” an interactive, multimedia traveling exhibition that honors the lives and achievements of American women in medicine—past and present. The exhibition is based on a larger exhibition that was displayed at the National Library of Medicine (NLM) in Bethesda, Maryland, from 2003–2005.

“Changing the Face of Medicine” features stories from a rich diversity of women physicians from around the nation and highlights the broad range of medicine that women have practiced. Women physicians are found in every branch of medicine. They are family practitioners, researchers on the cutting edge of new medical discoveries, educators, surgeons, medical school directors and government officials.

Women physicians of today are benefiting from the career paths carved out since the mid-19th century by a long line of American women doctors. Early women physicians featured in the exhibition include Elizabeth Blackwell, the first woman to earn an M.D. degree, and Matilda Evans, who was the first African American physician to be licensed in South Carolina.

Two interactive kiosks traveling with the exhibition offer access to the National Library of Medicine’s “Local Legends” web site (www.nlm.nih.gov/locallegends), which spotlights outstanding women physicians from every state, and to the web site created for the larger exhibition at the NLM (www.nlm.nih.gov/changingthefaceofmedicine). The exhibition web site offers access to educational and professional resources for those considering medicine as a career, as well as lesson plans for classroom activities. A section of the web site called “Share
Your Story,” allows the public to add stories about women physicians they know.

“Changing the Face of Medicine” was developed by the Exhibition Program of the History of Medicine Division of the National Library of Medicine, in collaboration with the American Library Association Public Programs Office. The traveling exhibition is made possible by the National Library of Medicine and the National Institutes of Health Office of Research on Women’s Health. The American Medical Women’s Association provided additional support.

For more information on the “Changing the Face of Medicine” exhibition at (Name of Library), please call 000-0000.

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SAMPLE MEDIA ALERT/CALENDAR LISTING

For Immediate Release

(MONTH, DATE, YEAR)

Contact: (LIBRARY CONTACT)

(TELEPHONE, E-MAIL)

At the (NAME OF LIBRARY)......

Women doctors are in the spotlight in a new traveling exhibition opening at the (NAME OF LIBRARY) on (DATE). “Changing the Face of Medicine: Celebrating America’s Women Physicians” tells the extraordinary story of how American women who wanted to practice medicine have struggled over the past two centuries to gain access to medical education and to work in the specialty they chose.

“Changing the Face of Medicine” describes women’s successful quest to become doctors and introduces audiences to outstanding physicians from across the United States. Women physicians are now found in every branch of medicine. They are researchers on the cutting edge of new medical discoveries, educators, surgeons, family practitioners, specialists, and government medical officials.

Interactive kiosks traveling with the exhibition provide educational activities, information about medical careers, and biographies of outstanding women physicians. Audiences may also add names of their own favorite women physicians to the web site.

The National Library of Medicine, Bethesda, Md., and the American Library Association, Chicago, Ill., organized the traveling exhibition with support from the National Library of Medicine, the National Institutes of Health Office of Research on Women’s Health, and the American Medical Women’s Association.

The library is offering free programs and other events for the public in connection with the exhibition. Please call (TELEPHONE NUMBER) for details or check the library web site at (WEB SITE ADDRESS).

-30-
SAMPLE LETTER TO COMMUNITY GROUPS

(NOTE: In mailings to the media and community groups, include announcements, flyers and brochures of library programs related to the exhibition. Letters to the media should also include press kits, offer assistance in developing stories, and include the name of a library spokesperson to contact for interviews.)

(DATE)

Dear (PERSONALIZE GREETING WHENEVER POSSIBLE):

The (NAME OF LIBRARY) is pleased to announce the opening of an exciting new exhibition, “Changing the Face of Medicine: Celebrating America’s Women Physicians” on (DATE). The library is one of 61 libraries in the United States selected to host the traveling exhibition.

“Changing the Face of Medicine” tells the extraordinary story of how American women who wanted to practice medicine have struggled over the past two centuries to gain access to medical education and to work in the specialty they chose. It describes women’s successful quest to become doctors and introduces audiences to outstanding physicians from across the United States. Women physicians are now found in every branch of medicine. They are researchers on the cutting edge of new medical discoveries, educators, surgeons, family practitioners, specialists, and government medical officials.

Interactive kiosks traveling with the exhibition provide educational activities, information about medical careers, and biographies of outstanding women physicians. Audiences may also add names of their own favorite women physicians to the web site.

The National Library of Medicine, Bethesda, Md., and the American Library Association Public Programs Office, Chicago, Ill., organized the exhibition with support from the National Library of Medicine, the National Institutes of Health Office of Research on Women’s Health, and the American Medical Women’s Association.

We would like to invite you to a special preview of the exhibition on (DAY, DATE) at (TIME) at the library (OR PARTICULAR LOCATION IN LIBRARY). (NAME) will be the guest speaker. A news release included with this correspondence provides additional details. Please contact me at (TELEPHONE, E-MAIL) if you have questions.

We hope you can join us as we introduce this informative exhibition to our community.

Sincerely,

(NAME)
(JOB TITLE)
SAMPLE NEWS RELEASE

For Immediate Release

Contact: (LIBRARY CONTACT)

(NAME OF LIBRARY) to host “Changing the Face of Medicine” traveling exhibition

Editor: Please do not delete sponsorship credits in paragraph three.

(CITY) – Women doctors are the focus of a new traveling exhibition opening at the (NAME OF LIBRARY) on (DATE). “Changing the Face of Medicine: Celebrating America’s Women Physicians” tells the extraordinary story of how American women who wanted to practice medicine have struggled over the past two centuries to gain access to medical education and to work in the medical specialty they chose.

Since the mid-1800s, when Elizabeth Blackwell became the first woman to earn an M.D. degree in America, women have made enormous strides in every area of medicine and have achieved success in work once considered “unsuitable” for women. Women physicians are now found in every branch of medicine. They are researchers on the cutting edge of new medical discoveries, educators, surgeons, family practitioners, specialists, and government officials. “Changing the Face of Medicine” features the life stories of a rich diversity of women physicians from around the nation and highlights the broad range of medical specialties women are involved in today.

The National Library of Medicine (NLM), Bethesda, Md., and the American Library Association, Chicago, Ill., organized the exhibition with support from the National Library of Medicine, the National Institutes of Health Office of Research on Women’s Health, and the American Medical Women’s Association. The traveling exhibition is based on a larger exhibition that was displayed at the NLM from 2003–2005.

“Women have brought fresh perspectives to the medical profession,” said Donald A.B. Lindberg, M.D., director of the National Library of Medicine. “They have turned the spotlight
on issues that had previously received little attention, such as the social and economic costs of illnesses and the low numbers of women and minorities entering medical school and practice.”

Women physicians in the 21st century are benefiting from the career paths carved out since the mid-19th century by a long line of American women. Some early physicians featured in the exhibition are Matilda Evans, the first African American physician to be licensed in South Carolina, and Florence Sabin, one of the earliest woman physicians to work as a research scientist. Among the many other doctors whose stories appear in the exhibition are Antonia Novello, the first woman Surgeon General of the United States, and Catherine DeAngelis, the first woman to be appointed editor of the Journal of the American Medical Association.

Two interactive kiosks traveling with the exhibition offer access to the NLM’s “Local Legends” web site (www.nlm.nih.gov/locallegends), which features outstanding women physicians from every state, and to a web site created for the larger exhibition at the NLM (www.nlm.nih.gov/changingthefaceofmedicine). The exhibition web site offers access to educational and professional resources for people considering medicine as a career, as well as lesson plans for classroom activities. A section of the web site called “Share Your Story,” allows the public to add the names and biographies of women physicians they know.

"We are delighted to have been selected as a site for this exhibition," said (LIBRARIAN COORDINATOR OR DIRECTOR). “Although ‘Changing the Face of Medicine’ focuses on women in medicine, its lessons about persistence, dedication, and courage in one’s life choices speak to everyone—men and women and young adults—and to people in all lines of work.”

The (NAME) library is sponsoring free programs and other events for the public in connection with the exhibition. Contact (TELEPHONE NUMBER, E-MAIL) for more information, or visit the library’s web site at (WEB SITE ADDRESS).
SAMPLE PUBLIC SERVICE ANNOUNCEMENTS

:10 A new traveling exhibit at the (NAME OF LIBRARY) honors the lives and achievements of American women in medicine—both past and present. “Changing the Face of Medicine” begins on (DAY, DATE). Call (TELEPHONE NUMBER) or visit (WEB SITE ADDRESS) for details.

:20 A new traveling exhibition at the (NAME OF LIBRARY) tells the remarkable story of how women struggled for the right to study in medical schools and to practice medicine in the U.S. “Changing the Face of Medicine” begins with Elizabeth Blackwell, who became the first woman to earn an M.D. degree in America in 1849, and ends with women doctors today, who have achieved success in work once considered “unsuitable” for a woman. Woman are now represented in every area of medicine—they are researchers on the cutting edge of new medical discoveries, educators, surgeons, family practitioners, specialists, and government officials. Come to (NAME OF LIBRARY), beginning on (DAY, DATE) to see for yourself how women have “changed the face of medicine.” Call (TELEPHONE NUMBER) visit (WEB SITE ADDRESS) for details.

:30 The (NAME OF LIBRARY) invites you to discover how women are changing the face of medicine in the United States. A new traveling exhibition beginning on (DAY, DATE) at the library tells the remarkable story of how women struggled for the right to study in medical schools and to practice medicine in the U.S. “Changing the Face of Medicine” begins with Elizabeth Blackwell, who became the first woman to earn an M.D. degree in America in 1849, and ends with women doctors today, who have achieved success in work once considered “unsuitable” for a woman. Among them are Antonia Novello, the first woman Surgeon General of the United States, and Lori Arviso Alvord, a Navajo physician who incorporates elements of traditional healing in her practice. Woman are now represented in every area of medicine—they are researchers, educators, surgeons, family practitioners, specialists, and government medical officials.

Changing the Face of Medicine will be on display for six weeks at the (NAME OF LIBRARY). The exhibition was organized by the National Library of Medicine and the American Library Association with support from the National Library of Medicine, the National Institutes of Health Office of Research on Women’s Health, and the American Medical Women’s Association.

For more information about the (NAME OF LIBRARY)’s schedule of programs for the exhibition, call (TELEPHONE NUMBER) or visit (WEB SITE ADDRESS).
Promotion Guide

INTRODUCTION

To draw the audience you seek and create awareness about your exhibition-related events, your library needs to plan and implement an effective promotional campaign.

The following guidelines are intended to help you launch a successful campaign. Included are general suggestions for promotional activities and sample media materials.

GETTING STARTED

To meet media and other deadlines, you will need to start promoting the exhibition and events at least two months in advance.

First, you will need to determine your target audience, goals for audience size and the best communication methods for this program. Involving your fellow staff members in program planning can be a great way to start determining these things and foster new ideas and additional support and enthusiasm. Try holding a mini-workshop or brainstorming session for staff. During this session:

- Emphasize the potential for recruiting new users and building support for the library.
- Communicate the goals for your program – what audiences you wish to reach, what you wish to accomplish.
- Assign staff with various interests/talents to work in small groups to carry out the goals.

Additionally, share your program plans with the library director, board, Friends and other library support groups and invite their ideas and cooperation.

DEFINING YOUR TARGET AUDIENCE

Your general promotional materials such as flyers, press releases, and advertisements are great vehicles for reaching a general audience of mixed ages and backgrounds. However, there are probably many other groups in your community that will be very interested in the Changing the Face of Medicine exhibition. These groups can provide support through passing the information on to members of their organization who may be interested in attending or providing financial and other support. Following is a list of organizations in your community that may be interested in the exhibition:

- Hospitals and other medical institutions
- Local museums, arts and humanities councils
- Local historical societies
- Book discussion groups
- Minority group associations
- Kiwanis and other civic organizations
- Local college and university departments (medicine, history)
- Local high school classes
- Local elementary and high school teachers, college and university professors/staff
• Professional associations and societies (interested in medicine, history, medical history)
• Councils on aging
• Senior centers
• AARP groups
• Lifelong learning societies and educational centers

DEVELOPING AN AUDIENCE PROFILE

Ask yourself the following questions when you are developing an idea of the audiences you want to reach with “Changing the Face of Medicine” publicity:

Where do they work?
What newspapers do they read?
What radio programs do they listen to?
What restaurants do they eat in?
Where do they spend their leisure time?
What other community activities do they take part in?
What social, religious, professional, civic organizations do they belong to?
What educational institutions do they or their children attend?
What special arrangements do they require?
  Is a particular time of day best for programs?
  Need child care?
  Need transportation?
  Need access/space for wheelchairs?
  Need signing for deaf/hard of hearing?
  If your program is outside the library, is parking available, public transportation?
Other physical/space/time considerations?

CHOOSING YOUR COMMUNICATION METHODS

Once you’ve determined “who” you would like to participate in your program, you need to focus on “how” you’re going to let them know about the event. Most communication methods fall into these four categories:

• **Public Relations/Publicity:** newspaper and magazine articles, announcements on television and radio programs, Web sites, Web publicity, public service announcements (PSAs), letters to the editor
• **Direct Marketing:** direct mailings, mass e-mail messages, Web marketing
• **Personal Contact:** word-of-mouth, public speaking engagements, telephone, letters, e-mails
• **Advertising:** print ads, TV and radio spots, banners, flyers, bookmarks, posters, buttons, displays
Public Relations/Publicity

NOTE: Several sample promotional materials have been developed for this exhibition. Feel free to use these materials as they are or adapt them for your particular needs. You will find these materials in previous pages of this notebook section:

- Press Release
- Media Alert
- Public Service Announcements
- Letter to Community Groups

Contacting the media and using the Web to publicize your event is key to getting your message out to a mass audience. Here are a few methods you can use to contact your local media and through the Web:

Press and media

- Send a press release announcing the event to your local newspapers, radio stations and television stations at least two to four weeks before the event. If you have regional magazines or talk shows that list upcoming events, you may want to send a release to them as well. Since these media outlets often have longer lead times, send these press releases out at least four to eight weeks before the event.

  If possible, address press releases to a specific reporter. Call your local media outlets to find out who covers community, arts or literary events, and send your release to his/her attention. If that information is not available, address press releases to the “News Desk” for larger publications or “Editor” for smaller publications. Most media outlets prefer to receive press releases via fax. However, if you wish to send additional materials, such as a brochure or bookmark advertising the event with the release, mail is acceptable. Also, if any of these publications also have a “Calendar of Events” section, be sure to send a press release to the contact for this section. Quite often, publications will run an article about an upcoming event and include information about it in their community calendar sections.

- About a week before your event, follow up the press release by sending a media alert via fax to key contacts. The alert provides specific information about the date, time and location for reporters and photographers who may be interested in attending the event or including the information in an “Upcoming Events” section. If possible, call each contact a day or two later to confirm that they received the media alert, find out if they have any questions and see if they are interested in attending or getting more information about the program.

  If you find that media professionals are interested in attending the event or in getting more information, you will need to have additional materials available in a press kit. The press kit should contain one copy of the press release, media alert, photos and biographies of your speakers and other key participants, and copies of all promotional materials – flyers, bookmarks, etc. If you do get an opportunity to discuss the event with a reporter, suggest story ideas and offer to schedule an interview with your speakers and partner organizations. (First make sure your scholar and partner organization representatives are willing to be interviewed.)
• Since television and radio stations are required to use a percentage of their airtime for non-profit and public announcements, your local stations may be willing to air a free public service announcement (PSA) about your program or event.

The Web
• In today’s world, using the Web to promote your events is very important. If your library’s Web site doesn’t have a “Coming Events” section, talk to your Webmaster about creating one. This is the perfect place for library patrons to find out details about your programs. Make sure you include as much information as possible on your Web site. Some of your current library patrons may use your Web site to find other information or find out about upcoming events, but very few new or potential patrons are likely to visit your site. The Web is a key way to provide details to patrons and community members who may have heard about the event, but need details about the date, time, location, topics discussed, etc.

• Also include links from your site to your partners’ sites. When the Web site is up, send an e-mail with the address of the site to the ALA Public Programs Office to include on their project Web site (www.ala.org/publicprograms/). The ALA Public Programs Office e-mail address is publicprograms@ala.org.

If you post information about the series on your library’s Web site, be sure to include the Web address on all promotional materials. Using just your library’s short address (e.g., www.ala.org) is acceptable and usually easier to read. While some promotional materials still carry the long version (e.g., http://www.ala.org), this is not necessary since most browsers are configured to automatically place the http:// before an address. However, if your library has an address with a different hyper tag, such as https://, you will need to include this in the address.

• The Web can also be useful for getting the word out about your event through other organizations’ Web sites. Your city, community centers, local media outlets and Chamber of Commerce may post information about community events on their Web sites. Additionally, many major cities also have Web-based entertainment and event guides, like citysearch.com, which provides information about events in several cities. Find out if these Web sites exist in your area and contact the site’s staff about posting your event and information. Many of these sites will post information about non-profit organizations’ events free of charge.

Direct Marketing
Using the list of community organizations and other groups you identified as your target audience, you can use direct marketing to contact these groups and individual members of these groups:

• When contacting community and other organizations, use a personalized letter or phone call. You can also use a copy of your program flyer as an informal letter, if needed, but be sure to include a personal note soliciting support, especially if you are asking for financial or other support.

• In addition to contacting organizations, you may want to target individuals in your
community. If you keep a list of patrons’ e-mail addresses, sending a mass e-mail message about the upcoming event can be an effective and inexpensive way to get the word out to a number of people. If e-mail addresses are not available, you may want to consider creating a postcard to mail to library patrons, community members or others. Additionally, you may want to send an e-mail message about the program to community group leaders to post to their electronic discussion groups or forward on to their own address lists.

**Personal Contact**

One-on-one personal contact can be one of your most effective ways of communicating with key individuals and groups. It can create a better understanding of programs and more enthusiasm than any other communication method. Some tips:

- Create a list of influential individuals in your community – the mayor, city council members, business leaders, etc. – who may be interested in your event. Send them a letter and program flyer about the event and ask to meet with them to discuss further. If a meeting is not possible, mention in your letter that you will call them within a week to follow-up. Even if these individuals cannot participate in the series, letting them know about the program could help the library in other ways.

- When contacting community groups, you may want to ask to speak for five to 10 minutes at one of their upcoming meetings or events. This is inexpensive and effective since it allows you to both deliver your message and gauge responses. At the meeting, outline your overall series plan and present convincing reasons why the series may be of interest to them. Bring flyers, bookmarks and other materials along to handout after your speech. If possible, speak at the end of the meeting or offer to stay until the end of the meeting to answer questions.

- If speaking at a meeting is not possible, solicit support from these groups to help promote the program themselves. Ask the group leaders to pass out flyers or mention the program to their members and staff.

**Advertising**

Often the most expensive promotional method, advertising can also be one of the most effective vehicles for promoting your program. Here are a few advertising methods:

- *Promotional flyers and posters* should be simple and include: the basic title or theme for the series, an identifying graphic, times, place, speakers’ names and brief biographical information, acknowledgement of funders and program partners, and if applicable, your library’s Web address. Flyers and/or posters can be posted at your library, other libraries and museums, and community centers (e.g., city hall, the post office and schools, local college student centers), restaurants, grocery stores, dry cleaners, bookstores, cafes, health clubs, etc. Ask Friends and trustees to post flyers and posters at their local grocery store, dry cleaners, hair salon, etc.

- *Paid advertising* in local newspapers and on local radio or television stations can be another effective, but costly method. Before considering paid advertising, approach your local newspapers, radio and television stations regarding free public service announcements. Some newspapers and broadcast stations may be willing to donate or offer discounted
airtime or ad space for non-profit groups. If you do receive free advertising, acknowledge
the media outlet as a sponsor on program materials. If you consider paid advertising, also
look to your Friends or other groups to underwrite costs.

- Developing simple, cost effective bookmarks, buttons or other promotional items is another
effective way to promote your event. These promotional items can also double as a "freebie"
for patrons who attend the programs. Hand out promotional items at schools, community
group meetings or other locations. Ask Friends and trustees to hand out bookmarks to
their friends and others.

PUTTING IT ALL TOGETHER

After reviewing this list, spend a little time thinking about which of these methods will work
best for your event, your community and your library. Consider your budget and time
available. Consider your planning team – is this effort a one-person production or committee-
based? And, consider past successes and failures by looking at which communication methods
you’ve used to promote past events. For this exhibition, you may want to combine some
successful methods you've used before with some new ideas.

Also, keep in mind your goals for the size and type of audience you wish to attract. If your
library can only hold a group of 50, you don't need to spend hundreds of dollars on publicity.
Instead, use your resources wisely. Use cost-effective methods and spend most of your time
contacting individuals and groups you think will be most interested instead of contacting
everybody in town. It is important to make sure that public is aware of your event, but this can
be done with flyers and a few press releases to key media outlets. The rest of your time can be
spent on letters and phone calls.

On the other hand, if you are want to attract a group of 200 people who have never set foot in
the library, you will need to be more creative in your promotional activities. Most likely, you
will need to spend a little more time contacting new people and developing promotional
materials for new outlets and locations. However, this time and effort could pay off. Bringing
new faces into the library for a program will undoubtedly result in issuing more library cards
and finding new life-long library patrons.
Exhibition Support Materials

NOTE: Brochures and posters will be shipped eight weeks before the library's exhibition period, unless otherwise requested by libraries. Please use the materials request form distributed at the seminar to request materials or contact Sofiana Peterson for another form (1-800-545-2433, ext. 5045, speterson@ala.org).

Interactive kiosks: Two interactive kiosks are traveling with the exhibition. Separate instructions will be distributed about their operation and packing.

Exhibition web sites: There are two major web sites associated with this exhibition, both of which will be available through the exhibition kiosks. Developed by the National Library of Medicine, they offer an impressive array of information and activities to complement the exhibition. The web sites are:

http://www.nlm.nih.gov/changingthefaceofmedicine
At this web site, students can find out if a career in medicine is for them through a guide to medical career Web sites. Teachers can print classroom lesson plans and view an extensive bibliography including books and videos. Online interactive activities use games and learning modules to bring issues of science and medicine to life. Users can perform their own customized database search to learn about the woman physicians featured in the exhibition and learn about their sources of inspiration, the challenges they faced, and their accomplishments. Users can also post their own story about a woman physician they think should be part of the project and read stories that others have submitted.

http://www.nlm.nih.gov/locallegends
A companion gallery to the Changing the Face of Medicine: Celebrating America's Women Physicians exhibition at the National Library of Medicine, in Bethesda, Maryland, Local Legends highlights the contributions of women physicians in rural and urban towns and cities throughout America. Nominated by a Congressional representative, each extraordinary local legend has made a positive, enduring contribution to the health care of their community and our country.

Brochure: A color illustrated brochure will provide visitors to the exhibition with an overview of exhibition themes as well as a list of additional readings. Each library exhibition site may request up to 2,000 brochures.

Poster: Libraries will receive 25 copies of the poster created for this exhibition.

Banner: Two large exhibition banners will travel with each copy of the exhibition. Banners are in a vertical design. They have sleeves at the top and bottom for weighting and can be used inside or outside the library.
“Changing the Face of Medicine”
Overview of Exhibition Themes

The exhibition begins by addressing the struggle women waged in America beginning in the mid 19th century to gain access to medical education after being shut out when medicine became established as a formal profession. Among the first generation to challenge assumptions about women’s intellectual abilities and traditional responsibilities were Changing the Face of Medicine Blackwell, the first woman in America to earn an M.D. degree, and Mary Putnam Jacobi, a medical scientist trained in Paris who was the first woman elected to the New York Academy of Medicine.

Women of color also faced financial hardship and racism when building their careers. Among women who went on to make remarkable contributions despite these obstacles is Matilda Evans, the first African American woman to be licensed as a physician in the state of South Carolina. In 1901, she established Columbia, South Carolina’s first black hospital, and her survey of the health of black school children became the basis for a permanent medical examination program in South Carolina public schools.

By the early 20th century, women had made impressive inroads into the medical profession, but they were still discouraged from working in certain specialties and from pursuing scientific research. Women physicians created their own opportunities by founding new specialties and focusing on issues that in the past had received little attention. Alice Hamilton studied the effects of industrial metals and chemicals on the body and advocated for public health protection for workers. Virginia Apgar developed the first standardized way to evaluate a newborn’s condition through ranking five vital signs, and Helen Taussig helped develop an operation to compensate for heart defects in newborns, paving the way for the development of adult open heart surgery.

Women physicians have made breakthrough discoveries that benefit everyone. They have brought new perspectives that are reshaping patient care, medical education, and public health policies. Barbara Barlow worked to make playgrounds in Harlem safe for children. Lori Arviso Alvord, the first Navajo woman to become a board certified surgeon, combines conventional Western medicine with traditional healing practices, and Katherine Flores works to increase the number of Latina women in the profession. Susan Briggs has devoted her career to medical emergencies in the U.S. and abroad, including the response to the September 11, 2001, attacks on the World Trade Center in New York.

What about the physicians of the future? This exhibition offers role models such as Antonia Novello, the first woman and first Hispanic Surgeon General of the United States, Catherine DeAngelis, the first woman editor of the Journal of the American Medical Association, and many more remarkable women physicians, whose lives and achievements may inspire people who view this exhibition to follow in their footsteps through a career in medicine, or to nurture their special talents and contribute to the world in other ways.
Programming Ideas

**REQUIREMENTS:** Minimum requirements for host libraries include an opening reception for "Changing the Face of Medicine" and a minimum of two free public programs (one may be combined with the reception) featuring a lecture/discussion or panel by qualified speakers focusing on exhibition themes. Speakers may be physicians, historians, educators, public health experts, and others. Programs about women in leadership roles in medicine, and programs that inspire young people of all backgrounds to pursue careers in medicine are especially encouraged.

**For adults**

Libraries are encouraged to invite women physicians featured in the Local Legends audiovisual section of the exhibition and other women physicians to participate in public programs. The NLM also suggests the following program topics:

--Breaking down barriers of racism and sexism in medicine.
--Providing opportunities to other women physicians as mentors, teachers, and employers.
--Confronting glass ceilings and creating opportunities by working in developing fields or forging new specialties.
--Making breakthrough discoveries.
--Bringing different perspectives to the profession, highlighting issues such as women's health and the connections between poverty and illness.
--Focusing on the underrepresentation of women and minorities in medicine at the highest levels of the profession.
--Making contributions to the well-being of communities at home and around the world by taking a broad view of the responsibilities of physicians.
--Working for change in medical schools and throughout the profession to provide equity in salary levels and career advancement.
--Serving as role models for a widely diverse group of young people beginning their careers today.

Other ideas:

• Reading and/or viewing and discussion programs. Sponsor a series of book discussions about books written by women physicians (see book list in Resources Section), or a series of films about women in medicine (see film information in Resources Section).

• Dr. Peter E. Dans of Johns Hopkins University has researched and written about women physicians in film. Dr. Dans lectures on “Women Doctors in the Movies: Where Are They?” This entertaining article talks about his research on physicians in film [http://www.ama-assn.org/amednews/2000/04/24/prsa0424.htm](http://www.ama-assn.org/amednews/2000/04/24/prsa0424.htm)

• Present a program about medical devices or techniques invented by women physicians and researchers.
• Compare the cultural climate in the U.S. regarding the status and responsibilities of women and how it has changed in the last century. How has this affected medicine?

• Use the 19th century, early 20th century, or later 20th century as a focus for a series of programs on the era's medical education, medical practices, and how women were faring in medicine at the time—perhaps in your own institution or in your region.

• Ask an experienced speaker or actor to read from the memoirs of women physicians.

• Focus on a women physician from your area, either historical or contemporary, and trace her education and career in medicine.

**Programs with students and schools**

• With a lead teacher or teachers, sponsor a Changing the Face of Medicine curriculum workshop for teachers in your area. Use curriculum materials and lesson plans from the exhibition web site at [http://www.nlm.nih.gov/changingthefaceofmedicine](http://www.nlm.nih.gov/changingthefaceofmedicine) (Click on “Resources”, then “Lesson Plans”; also click on “Activities”)

• Ask local women physicians to contribute their ideas and expertise to planning some programs and activities for students and younger people.

• Encourage teachers at local schools to use themes from the exhibit in the curriculum during the exhibition. Send them printouts of lesson plans from the web site.

• Sponsor a special viewing of the exhibition for teachers only.

• Ask women physicians to meet one on one with students to speak about their education and experiences.

• Ask a local hospital or medical school to hold a “Junior Medical School” program at the library or in schools.
Short-Term Grants
for Library Humanities Programming

Humanities council contact information for all states can be obtained on the
Internet at: http://www.neh.gov/whoweare/statecouncils.html

♦ Many state humanities councils award "mini-grants" or "resource grants" to support free
admission public humanities programs of short duration. In most states, programs must
involve a humanities scholar in order to qualify for a grant.

♦ Short-term grants usually cover only the direct costs of a humanities program, for example,
honoraria and travel expenses for lecturers, film or video preparation and presentation, printing
and postage for promotional items, and the purchase of books for discussion programs. Short-
term grants do not in most cases cover the costs of food or beverages for receptions or other
social events.

♦ Mini-grants and resource grants range from $100 to $1,500 or more, depending upon the
state's guidelines and the purpose of the grant. Matching funds or in-kind contributions are
often required for state humanities council grants.

♦ Application deadlines for short-term grants vary from state to state. In general, state
humanities councils ask that mini-grant applications be received from six to ten weeks before a
program is to begin. Some states also award one-time grants of a few hundred dollars that can
be applied for at any time.

♦ Contact your state humanities council for short-term grant guidelines and application
requirements.

♦ For a list of state humanities councils, contact:

The Federation of State Humanities Councils
1600 Wilson Boulevard
Suite 902
Arlington, VA 22209
Tel.: 703-908-9700
Fax: 703-908-9706 Suite 902
Books and videos about exhibition themes for various ages

The best list of age-designated books and videos related to the exhibition can be found on the NLM exhibition web site:

http://www.nlm.nih.gov/changingthefaceofmedicine/resources/

(Click on “Suggested Reading,” “Videos,” and “Research”)

Additional books for adults and young adults not on the web site:


**Web sites**

Primary exhibition web sites:

http://www.nlm.nih.gov/changingthefaceofmedicine
http://www.nlm.nih.gov/locallegends

There are a number of web site links, especially on the first site above, that should not be missed—about medical careers, medical education, summer internships for high school students, financial aid, medical residencies, and practicing medicine. These web site links provide an astonishing array of information and opportunities for students who are contemplating medicine as a career and for medical students seeking research and other types of opportunities. The address within the web site is:


Other web sites:

http://www.mtsu.edu/~kmiddlet/history/women/wh-med.html American Women’s History: A Research Guide (Women in Medical Fields). Excellent guide to biographical and primary resources in print and digital formats. A link to many outstanding online resources about women in medicine.


http://womenshistory.about.com/library/prm/blwomeninmedicine1.htm An article from Women’s History which gives a brief synopsis of women in medicine in the U.S.

http://www.galenpress.com/extras/extra30.htm
An article on Civil-War era women physicians.

http://www.womensderm.org/news/63_percent_question.html
Article about contemporary salary disparities between male and female physicians.

http://www.aamc.org/newsroom/reporter/dec01/womenphysicians.htm
Article on the first women physicians in the U.S. and women who followed them.

An article examining why more women do not choose to be physician/scientists.
Films

• Each library wishing to show films or videos related to “Changing the Face of Medicine” to the public must arrange for its own public performance rights (PPR)

• Swank Motion Pictures, Inc. now offers a Movie Public Performance Site License to libraries on an annual basis. Information is at [www.movlic.com/library.html](http://www.movlic.com/library.html).

• Please share information about films and videos with other libraries on the tour through the Changing the Face of Medicine electronic discussion site. The ALA Public Programs Office will also pass along to you any film information we find.

Some films and videos about women in medicine:

Note: Dr. Peter Dans, Associate Professor of Internal Medicine and Health Policy and Management at Johns Hopkins University, who researches physicians in film, notes that “the good news for budding filmmakers is that the great American woman doctor film has yet to be made.”

Dr. Dans lectures on “Women Doctors in the Movies: Where Are They?” and has written the book *Doctors in the Movies: Boil the Water and Just Say Aah* (Medi-ed Press, 2000).

The NLM web site features a list of videos about women in medicine at:


Others films include:

*The Girl in White* (1952), directed by John Sturges. June Allyson plays the first woman doctor in New York, Dr. Emily Dunning Barringer, in this well-reviewed film.

*Spellbound* (1945), directed by Alfred Hitchcock. A stretch, but Ingrid Bergman plays a psychiatrist in this classic.

Unfortunately, most movies with a woman physician as a principal character have received poor reviews. The longest list of movies featuring women physicians is at:

[http://endeavor.med.nyu.edu/lit-med/lit-med-db/webdocs/webkeywords/women.in.medicine.kw.html](http://endeavor.med.nyu.edu/lit-med/lit-med-db/webdocs/webkeywords/women.in.medicine.kw.html)
Exhibition Text

[Section One]

**Changing the face of Medicine**
**Celebrating America’s Women Physicians**

**Women have always been healers.** As mothers and grandmothers, women have always nursed the sick in their homes. As midwives, wise women, and *curanderas*, women have always cared for people in their communities. Yet, when medicine became established as a formal profession in Europe and America, women were shut out.

**Women waged a long battle** to gain access to medical education and hospital training. Since then, they have overcome prejudices and discrimination to create and broaden opportunities within the profession. Gradually, women from diverse backgrounds have carved out successful careers in every aspect of medicine.

 **Changing the Face of Medicine** introduces some of the many extraordinary and fascinating women who have studied and practiced medicine in America. If you have a favorite woman doctor, please add her to the roster by clicking on “Share Your Story” at the online exhibition www.nlm.nih.gov/changingthefaceofmedicine. We invite you to celebrate all of America’s women physicians.

**Photo Captions:**

Dr. Lori Arviso Alvord, the first Navajo woman physician to be board-certified in surgery. *courtesy: Lori Arviso Alvord, M.D.*

Dr. Sarah Adamson Dolley (seated, center) co-founded the Practitioners' Society of Rochester, New York, one of the first general women's medical societies in the United States, in 1886. *Courtesy: Edward G. Miner Library, Rochester New York*

Dr. Marilyn Roubidoux, a cancer specialist who focuses on American Indian and Alaskan Native populations. *courtesy: Marilyn A. Roubidoux, M.D.*

**Making a Difference**

In 1994, Lori Arviso Alvord (background photo) became the first Navajo woman to be board certified in surgery. After completing her training at Stanford University, she returned for six years to the New Mexico reservation where she had grown up. Surgery can remedy many ills, but as Alvord worked with her Navajo patients she learned that modern scientific medicine by itself could not reestablish the missing harmony in their health. Nowadays, Alvord incorporates elements of traditional healing practices in all aspects of medical care, aiming to better prepare patients for surgery, childbirth, or chemotherapy, for example. The psychological and spiritual comfort can make a big
difference for those people facing serious illness and surgery as well as speed their recovery afterwards.
courtesy: Lori Arviso Alvord, M.D., 1990s.

I went back to the healers of my tribe to learn what a surgical residency could not teach me. From them I have heard a resounding message: everything in life is connected.—
Lori Arviso Alvord, 2002

In 1991, cardiologist Bernadine Healy (b. 1944) became the first woman to be appointed director of the National Institutes of Health. Over the course of her career, she has held a series of high-profile leadership positions in medicine, serving as deputy director of the White House Office of Science and Policy, president of the American Heart Association, and president of the American Red Cross.
courtesy: American Red Cross, 2000

It is clear that all of us in the scientific community have a lot of breaking to do—especially old rules, self-defeating habits, and glass ceilings.—Bernadine Healy, Science, 1992

In 1967, Jane Wright (b. 1919), a cancer researcher and chemotherapy specialist, was named professor of surgery, head of the Cancer Chemotherapy Department, and associate dean, at New York Medical College, her alma mater. At the time, when African American women physicians numbered only a few hundred in the entire United States, Dr. Wright was the highest ranked African American woman at a nationally recognized medical institution.

Ruth Harriet Bleier (1923–1988), feminist, activist, and neurophysiologist, was among the first American scholars to examine gender bias in scientific research. A leading figure in the women’s movement, she was also a vocal supporter of civil rights and reproductive freedom, and faced discrimination during her career because of her work on behalf of others.
courtesy: Medical History Department, University of Wisconsin, 1980s.

It does not seem unreasonable to expect that the development of feminist scientific theory and philosophy will proceed hand-in-hand with the feminist struggle to change the conditions of our lives and work…—Ruth Bleier, Science and Gender: A Critique of Biology and Its Theories on Women, 1984

Dermatologist Nancy E. Jasso (b. 1960) is one of the founding physicians of a laser tattoo-removal project in the San Fernando Valley in California. Many of her patients have been turned down for jobs because of their tattoos, or they live in fear of retaliation because the designs link them to past membership in gangs. Because laser removal is expensive and takes many sessions, those who cannot afford the procedure can work for the community in exchange for their treatment.

Providing care is more than just curing a disease.—Nancy E. Jasso, 2002
Fighting for Rights

As part of the wider movement for women’s rights during the mid-1800s, women campaigned for admission to medical schools and for the opportunity to learn and to work alongside men in the medical profession. Such rights came slowly. Despite all the gains that were made, women’s struggle to receive equal pay and access to the same career opportunities as their men colleagues continues today.

In the nineteenth century, ideas about women’s traditional roles as wives and mothers were used to exclude them from the professions. Since then, women have faced criticism for pursuing careers, balancing family life with work responsibilities, and speaking out about discrimination and unfairness in the job market and in society at large.

Over the last 150 years, women physicians have confronted barriers in every area of medicine. By succeeding in work once considered “unsuitable” for women, these leaders have overturned assumptions about the differences between men and women and opened doors for others.

Elizabeth Blackwell (middle row, far left) grew up among reformers, including abolitionists and campaigners for women’s rights. This family photograph was taken in 1906.

courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University

In 1849, Elizabeth Blackwell (1821–1910) became the first woman in America to earn the M.D. degree. She was an advocate for women in medicine and argued that they were especially suited to the caring professions. The idea that women were more sensitive, sympathetic, and nurturing than men had previously been used to limit women’s education and to exclude them from careers in the professions. Instead, Blackwell made a case for women physicians based on precisely these qualities.

Elizabeth Blackwell’s letter of admission to Geneva Medical College, 1847.

courtesy: Blackwell Family Papers, Manuscript Division, Library of Congress

Elizabeth Blackwell later said that a dying friend’s plea—to give women patients the option of being cared for by a woman physician—motivated her to apply to study medicine. She was turned down by every medical school in New York City and Philadelphia. At Geneva Medical College in upstate New York, the faculty tried to avoid the issue entirely by asking the all-male student body to vote on Blackwell’s admission to the school. They had assumed that the students would never allow a woman to enroll, but as a practical joke, the students voted to admit her.

Anatomical lectures at the Woman’s Medical College of the New York Infirmary, Frank Leslie’s Illustrated Newspaper, April 16, 1870.

courtesy: National Library of Medicine, Images from the History of Medicine

Elizabeth Blackwell’s graduation from medical school and her efforts to increase the number of women in medicine received great attention in the press, inspiring debate around the country.
on the issue of women physicians and encouraging women to apply to medical school. After graduation, however, many women physicians were often denied hospital internships, or jobs teaching or practicing medicine. In 1857, Elizabeth and her sister Emily Blackwell founded the New York Infirmary for Women and Children. Twelve years later, they added a medical school for women. The Woman’s Medical College of the New York Infirmary offered students the chance to care for patients, and provided employment for women physicians as teachers and doctors.

Mary Putnam (later Mary Putnam Jacobi), early 1860s.
courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University, photograph by Bogardus

Mary Putnam Jacobi (1842–1906) was the first woman elected to the New York Academy of Medicine. Her colleagues regarded her as a scientist of the highest caliber, and over the course of her career, she wrote more than 120 scientific articles and nine books. She was also a wife and mother, combining family life with an eminent career. In her work, and by her own example, Mary Putnam Jacobi discredited the ideas that women were not suited to intellectual pursuits, and that education damaged women’s bodies and their ability to raise children.

Letter from Mary Putnam Jacobi to Elizabeth Blackwell, December 25, 1888.
courtesy: Blackwell Family Papers, Manuscript Division, Library of Congress

In this letter (above) to her former mentor, Mary Putnam Jacobi acknowledged the importance of Elizabeth Blackwell’s early work, but criticized her limited view of women’s role in medicine. Jacobi had served on the faculty of the Woman’s Medical College of the New York Infirmary, but she and Blackwell disagreed profoundly on the future of the profession and the best way to advance the cause of women physicians. Jacobi asserted that women should have equal access with men to the best education because they were equally capable, and not because of any special qualities they might have as women.

Sphygmograph tracings showing the measurement of a woman’s pulse.
From Mary Putnam Jacobi’s prize-winning manuscript, “The Question of Rest for Women during Menstruation,” 1876.
courtesy: National Library of Medicine

In 1875, Edward H. Clarke, a former professor at Harvard Medical School, published Sex in Education: or, A Fair Chance for the Girls. In it, he argued that women risked illness and even sterility if they were educated alongside men and held to the same intellectual standards. Mary Putnam Jacobi won Harvard University’s prestigious Boylston Prize for her essay refuting this idea, basing her arguments for equality on scientific proof. She used an instrument known as a sphygmograph to study and record measurements of the pulse, demonstrating the stability of a woman’s health regardless of her physical and mental exertion.

Mahomed sphygmograph, ca. 1880.
courtesy: M. Donald Blaufox, M.D., Ph.D.
Confronting Prejudice

The first women of color to build careers in medicine confronted financial hardship and racism as well as discrimination against women. For generations, their families had been enslaved or oppressed. To even begin training, these women often had to work to pay their way through medical school or seek funding from supporters of women’s and minorities’ rights.

Once they became doctors, women of color often made important contributions by bringing better standards of care to their own communities and serving as role models for all women.

In the twentieth century, the discrimination experienced by women and minorities fueled broad social movements for change. Women physicians involved in this struggle often became advocates for those who were suffering from neglect or abuse.

Susan La Flesche (later Susan La Flesche Picotte) graduated from the Woman’s Medical College of Pennsylvania in 1889. She is shown here (third row, standing, fourth from right) with her graduating class.

*courtesy: Archives and Special Collections on Women in Medicine, Drexel University College of Medicine*

Susan La Flesche Picotte (1855–1915) was the first American Indian woman to graduate from medical school, receiving federal funding to pay for her education. She returned to her birthplace, the Omaha Reservation in Nebraska, to practice medicine, and helped bring better standards of health care to her own community.

*Susan La Flesche Picotte, early 1900s.*

*courtesy: Nebraska State Historical Society Photograph Collections*

As a child, Susan La Flesche Picotte had watched an Indian woman die when a white doctor refused to treat her. This experience shaped her desire to study medicine and to bring the best medical care to the Omaha reservation. Like her father, who was chief of the Omahas, Picotte firmly believed in collaborating across cultures for the benefit of her community. She brought many innovations to the reservation to improve health and the quality of life, including a much needed hospital in 1913.

*Susan La Flesche Picotte’s diary, September 28, 1910.*

*courtesy: Nebraska State Historical Society, Library/Archives*

During her career, Susan La Flesche Picotte looked after more than 1,300 Omaha people, scattered over 450 square miles. She had many roles in the community, serving as physician, educator, personal and legal advisor, and chair of the civic committee. In her diary, Picotte recorded her work resolving legal disputes, counseling patients, and treating various illnesses and injuries, as well as the details of everyday life on the reservation, including births, marriages, and deaths.
The influence of Matilda Evans extended far beyond the individual patients she treated. Her survey of the health of black schoolchildren in Columbia became the basis for a permanent medical examination program in South Carolina public schools, and she founded several health care organizations. She also mentored aspiring women students, offered a recreational program for underprivileged boys, ran her own farm, and published a weekly newspaper—*The Negro Health Journal of South Carolina*.

Matilda Evans treated patients in her own home until she established the Taylor Lane Hospital, Columbia’s first black hospital, in 1901. By 1906, railway and utility companies were paying the institution to provide care for their employees, giving one dollar a day for each patient.

Matilda Evans served as vice president of the National Medical Association, an organization founded in 1895 in response to the exclusion of blacks from the American Medical Association.

After Matilda Evans (1872–1935) received her M.D. degree from the Woman’s Medical College of Pennsylvania in 1897, she returned to Columbia, South Carolina, to build a practice. When the state board of medical examiners awarded her a license to practice “physic and surgery” the following year, she became the first African American woman licensed as a physician in the state.

**Making a Difference**

(Background photo) Emily Barringer (1876–1961) was the first woman ambulance physician at New York City’s Gouverneur Hospital. Although she was at first denied an appointment at the hospital, she was later allowed to take up the position and became the hospital’s first woman medical resident and ambulance physician in 1902. During World War II, Barringer lobbied Congress to allow women physicians to serve as commissioned officers in the Medical Reserves. The Sparkman Act granted that right in 1943.

Dorothy Ferebee (1890–1980) devoted her career to the care of some of the poorest members of society. As medical director of the Mississippi Health Project, Ferebee traveled south every summer during the Great Depression to provide medical care to the state’s rural black communities. In 1925, in her home town of Washington, D.C., she
established the Southeast Neighborhood House in a neglected area of Capitol Hill to offer affordable health care to the local African American community. Ferebee is shown here (center) presenting information on the Howard University Medical School health services program, which she directed from 1949–1968.
courtesy: Moorland-Spingarn Research Center, Howard University, 1950s

_We women were always the last to get assignments in amphitheaters and clinics. And I? I was the last of the last because not only was I a woman, but a Negro, too._—**Dorothy Ferebee, The Washington Post, 1978**

Sharon Malotte (b. 1955) is a member of the TeMoak Band of Western Shoshones of the South Fork Indian Reservation, and the first American Indian from Nevada to become a physician. She is shown here in traditional dress, with her daughter Bhie-Cie Naïve Malotte-Ledesma.
courtesy: Sharon M. Malotte, M.D., photograph by d’Joyce Bismarck, 1986

_When you see me, you see an American Indian, a Shoshone Indian from the local area, and that makes a difference with my minority patients. I have an off-the-reservation accent to my voice, and other Indian people know I’m Indian when I speak on the phone. I may be educated, but I still have that inflection to my voice. How does that make a difference? I am seen as a role model, one who overcame significant difficulties becoming a doctor. I talk with students, and tell them anything is possible._—**Sharon Malotte, 2002**

(Below) Margaret Craighill (1898–1977) was the first woman to be commissioned into the Army Medical Reserve Corps after the passage of Sparkman Act in 1943. The act granted women the right to receive commissions in the Army, the Navy, and the Public Health Service.
courtesy: National Library of Medicine, Images from the History of Medicine, 1946

[Section three]

**Achieving Breakthroughs**

By the early 1900s, women had made impressive inroads into the medical profession as physicians, but few had been encouraged to pursue careers as medical researchers. Women physicians were unwelcome in the most prestigious medical specialties, such as surgery, and excluded from influential leadership positions in scientific institutions.

Trying to build careers in a sometimes hostile climate, women physicians created their own opportunities—by founding new specialties, building expertise in neglected areas, and fighting for access to mentors, laboratory facilities, and research grants.

The achievements of these trailblazers often went unrewarded or unacknowledged for years. Yet these resourceful innovators carved paths for other women to follow, and eventually they gained recognition for their contributions to medical science. Their breakthrough discoveries have benefited us all—patients and practitioners.
Florence Sabin left Johns Hopkins to join the Rockefeller Institute for Medical Research in 1925, the first woman to be granted full membership. She is shown in her lab at the Institute in the 1930s.

courtesy: Colorado Historical Society

In 1901, as a student at The Johns Hopkins University School of Medicine, Florence Sabin received a fellowship to work with Professor Franklin P. Mall in the department of anatomy. Her first book, *An Atlas of the Medulla and Midbrain*, was published the same year and quickly became a standard text in the field of anatomy. Her later work overturned the traditional explanation of the development of the lymphatic system. In 1917, after the death of Professor Mall, Sabin seemed a natural choice to succeed him, yet she was passed over for promotion in favor of a male candidate—one of her former students. Eight years later, she left Johns Hopkins for the Rockefeller Institute for Medical Research.

Florence Sabin teaching anatomy at The Johns Hopkins University School of Medicine, early 1900s.

courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

Florence Sabin (1871–1953) was one of the earliest women physicians to build a career as a research scientist. In 1903, she became the first woman appointed to the faculty of The Johns Hopkins University School of Medicine, her alma mater. When the School of Medicine was founded in 1893, a group of women philanthropists donated the funds needed to open it on the condition that women be admitted on the same terms as men. Women students were not always made to feel welcome, however, and Sabin experienced some harassment from other students during her medical training.

Florence Sabin with her laboratory staff at the Rockefeller Institute for Medical Research, 1930.

courtesy: Rockefeller Archive Center

Eventually, Florence Sabin began to receive the accolades appropriate to her reputation as one of the most eminent scientists of her era. In 1924, she served as the first woman president of the American Association of Anatomists, and in 1926, she became the first woman elected to the National Academy of Sciences. Later in her career, Sabin was also appointed health advisor to Colorado’s Post-War Planning Committee, where she helped design a series of new public health laws.

Helen Taussig examines a child, ca. 1947. Taussig’s large boxed hearing aid is next to the child.

courtesy: The Alan Mason Chesney Medical Archives of The Johns Hopkins Medical Institutions

Often called the founder of pediatric cardiology, Helen Brooke Taussig (1898–1986) is renowned for her work on the once untreatable and fatal “blue baby” syndrome. In spite of suffering from dyslexia, a reading impairment, Taussig excelled as a student and planned to begin her career in medicine by studying public health at Harvard University. The university did not grant women students degrees, however, so instead she enrolled at The Johns Hopkins University School of Medicine. Taussig lost her hearing after contracting whooping cough as an intern, and relied on lip reading and hearing aids until an operation restored it in 1963.
In 1930, Helen Taussig was appointed head of the Children’s Heart Clinic at Johns Hopkins Hospital, where she studied heart defects in babies and young children. In 1944, she proposed a new surgical procedure to compensate for the heart defect that causes “blue baby” syndrome. The operation, developed with surgeon Alfred Blalock and surgical technician Vivien Thomas, was an immediate success. It has since prolonged countless lives and is considered a key step in the development of adult open-heart surgery.

With the success of the “blue-baby” operation, families flocked to clinics where it was performed. Helen Taussig put her international medical celebrity to use to encourage the establishment of other centers to train pediatric cardiologists. She also supported efforts to educate the public about issues affecting public safety and scientific progress, such as responsible animal-based biomedical research. In the early 1960s, she successfully campaigned against the release of the sedative thalidomide in the United States, after the drug was shown to have caused birth defects when taken by pregnant women in Europe.

Helen Taussig enjoyed the affectionate gratitude of her patients and their families and earned the admiration of her colleagues for her contributions to medicine. In 1965, she became the first woman to serve as president of the American Heart Association. Taussig received the prestigious Lasker Award, sometimes known as the “American Nobel Prize,” in 1954, and was awarded the Medal of Freedom by President Lyndon Baines Johnson in 1964.

May Edward Chinn (1896–1980) practiced medicine in Harlem for more than 50 years. Her father was a former slave from the Cheyne (Chinn) plantation in Virginia, and her mother, Lulu Anne, was an American Indian from the Chickahominy Reservation near Norfolk, Virginia. The same year that the University and Bellevue Hospital Medical College announced that it would admit women for the first time, May Edward Chinn marched for women’s rights. She enrolled at the school three years later and graduated in 1926—the first African American woman to complete her medical education there.
“Pap” smear test to detect early cervical cancer. In 1945, she was invited to join the staff of the Strang Cancer Clinic of Memorial Hospital in New York City. After years of enduring little welcome within the medical profession, Chinn began to receive the recognition and respect she deserved, and in 1954, she was elected to the New York Academy of Sciences.

May Edward Chinn (front row, third from left) with Harlem Hospital staff, 1926. courtesy: George B. Davis, Ph.D.

May Edward Chinn was the first African American woman to hold an internship at Harlem Hospital in New York City and the first woman to serve on the hospital’s emergency ambulance crew. In spite of this, she was barred from a residency at the hospital because she was a woman. Black physicians could not admit patients to the city’s white hospitals during the 1930s and 1940s. In 1928, Chinn opened her own medical practice in Harlem. She saw most of her patients in their office or at their homes—even for surgery, in some cases. To learn the latest techniques in cancer diagnosis, and how to take biopsies, Chinn accompanied her patients to their clinic appointments.

Virginia Apgar played in an orchestra as a young student, and performing and making instruments remained lifelong interests. She is shown above shortly after completing her graduate training at The Johns Hopkins University, in the workshop where she made musical instruments, 1960. courtesy: Archives & Special Collections, Columbia University Health Sciences Division, photograph by Elizabeth Wilcox

In 1959, while she was on sabbatical leave, Virginia Apgar earned a master’s degree in public health from The Johns Hopkins University. She then devoted herself to the prevention of birth defects, through public education and fundraising for medical research. Apgar later became the director of the division of congenital defects at the National Foundation for Infantile Paralysis (now the March of Dimes) and received many honors and awards for her work.

Virginia Apgar with a newborn baby, 1958. courtesy: Archives & Special Collections, Columbia University Health Sciences Division, photograph by Elizabeth Wilcox

Virginia Apgar (1909–1974) originally trained as a surgeon, but because other women had been unable to build successful careers in surgery, the chief of the department at Columbia University College of Physicians and Surgeons encouraged her to study anesthesiology instead. Apgar studied obstetrical anesthesia—the effect of maternal anesthesia given during childbirth on the newborn baby. In 1952, she developed the Apgar score, the first standardized way to quickly evaluate the general health of a newborn baby.

Virginia Apgar demonstrating the Apgar score chart, 1970. courtesy: The Mount Holyoke College Archives and Special Collections, photograph by Harry Benson

The Apgar score is the total of 0 to 2 points assigned to each of five assessments of a newborn’s vital signs: Appearance (color), Pulse (heart rate), Grimace (reflex response), Activity (muscle tone), and Respiration (respiratory effort). The research of Virginia Apgar and her colleagues later demonstrated that the Apgar score predicts not only neonatal survival, but also a baby’s
neurological development. Calculating an infant’s Apgar score is now standard practice in delivery rooms worldwide.

Making a Difference

Gerty Cori (1896–1957) was the first woman in America to receive a Nobel Prize in Physiology and Medicine. In 1947, she and her husband were named joint recipients for their work on carbohydrates in the human body. 
courtesy: Becker Medical Library, Washington University School of Medicine, 1947

The love for and dedication to one’s work seems to me the basis for happiness…For a research worker, the unforgotten moments…are those rare ones, which come after years of plodding work, when the veil over nature’s secret seems suddenly to life…

Gerty Cori, on This I Believe, a series of radio broadcasts with Edward R. Murrow, 1952

Through her detailed research and fearless field investigations, Alice Hamilton (1869–1970) drew attention to the hazards of industrial work. A pioneer in toxicology, she studied occupational illnesses and the dangerous effects of industrial metals and chemical compounds on the human body. Hamilton’s benchmark studies helped raise awareness of on-the-job dangers and laid the foundation for the development of occupational safety standards for workers in the United States.

courtesy: National Library of Medicine, Images from the History of Medicine

In the early 1970s, Dr. Janet Rowley identified a process of “translocation,” or the exchange of genetic material between chromosomes in patients with leukemia. This discovery, along with her subsequent work on chromosomal abnormalities, has revolutionized the medical understanding of the role of genetic exchange and damage in causing disease.

courtesy: Janet Davison Rowley, M.D.

[Section four]

Leading Change

Bringing fresh perspectives to the profession of medicine, women physicians often focused on issues that had until then received little attention, such as the social and economic costs of illness, and new research and treatments for women and children. As the first to address some of these needs, women physicians often led the way in shaping new health programs and reforms designed to protect the most vulnerable members of society.

Encompassing all aspects of patients' lives, this approach to health care is reshaping the way medical practitioners and patients deal with disease and injury. Together, we are widening the scope of medical care for individuals and communities and improving the quality of life.

Applying a broad definition of their professional responsibilities, women physicians from diverse backgrounds have reached out across communities, establishing innovative programs to improve quality of life and to provide better access to medical care.
I am interested in public health in the broad meaning of the health of the people... If you define health not merely as the absence of disease but as physical, mental and social well-being, there isn’t anything you don’t get into.—Leona Baumgartner, Modern Medicine, 1965

Martha May Eliot.
courtesy: National Library of Medicine, Images from the History of Medicine
photograph by Bachrach

Martha May Eliot (1891–1978) devoted her life to the care of children. For more than a quarter of a century, she worked for the Children’s Bureau, a federal agency established in 1912 to improve the health and welfare of children in America. Eliot began her career there in 1924 as director of the Division of Child and Maternal Health, and went on to become the bureau’s assistant chief in 1935 and chief in 1951.

(Below) Martha May Eliot and Ethel Collins Dunham, 1915.
courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University

Martha May Eliot left) majored in classical literature at Radcliffe College, where she also completed her premedical training. On principle, she first applied to Harvard University Medical School, which did not admit women at the time. In 1914, she entered The Johns Hopkins University School of Medicine, where her life partner, Ethel Collins Dunham, was also enrolled. Dunham, a pediatrician who specialized in the care of newborns and premature infants, became director of the Division of Child Development at the Children’s Bureau in 1935. She and Eliot received numerous awards for their work on children’s health. They were the first women to receive the American Pediatric Society’s prestigious Howland Medal, awarded to Dunham in 1957 and to Eliot 10 years later.

courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University

After World War II, Martha May Eliot (center, front) was a delegate to the first World Health Assembly, which led to the creation of the World Health Organization (WHO) and the United Nations International Children’s Emergency Fund (UNICEF). She was the only woman to sign the founding document of the WHO, and from 1949 to 1951 she served as the organization’s assistant director general. She chaired the department of child and maternal health at the Harvard School of Public Health between 1957 and 1960 and continued her work for the World Health Organization and UNICEF after her retirement from Harvard in 1960.

When she is not working in the city, Barbara Barlow likes to relax at her country home in Lancaster, Pennsylvania. She is an experienced beekeeper and enjoys tending to her beehives.
courtesy: Barbara Barlow, M.A., M.D., 2001

Barbara Barlow changed her plans to become a medical missionary abroad when she did a surgical residency in a poor New York neighborhood and saw a critical need for pediatric medical services in the city. One of the first things Barlow noticed when she later moved to
Harlem was the high rate of hospital admissions of children suffering from preventable playground injuries. With a colleague, she compiled data showing that the injury rate for children in Harlem was twice the national average. Barlow sought funds to repair the area’s playgrounds and enlisted volunteers to help with the work.

(Above) The P.S. 196 district playground was refurbished by Barbara Barlow and a group of volunteers, Harlem, New York, 2000. courtesy: Barbara Barlow, M.A., M.D.

In 1988, with funding from New York City’s Parks Department, Barbara Barlow enlisted an architect to design safe but low-cost playground structures, and invited artists and volunteers to paint murals near playgrounds. Since 1991, more than 40 playgrounds have been rebuilt in Harlem, and a coalition of funding sources and Harlem community organizations now offers after-school activities ranging from sports to creative art classes. Through the “Injury Free Coalition for Kids,” an organization developed by Barlow with support from the Robert Wood Johnson Foundation, similar programs now exist around the country—each of them reflecting the needs and conditions of the community it serves.

Barbara Barlow and her colleagues at Harlem Hospital, ca. 2000. courtesy: Barbara Barlow, M.A., M.D., photograph by Hakim Mutlag

Barbara Barlow (b. 1938) was the first woman to train in pediatric surgery at Babies Hospital, Columbia University Medical Center (now called Babies’ and Children’s Hospital of New York). By researching and documenting the causes of injuries to children in Harlem, and increasing public education about prevention, she has helped to reduce dramatically accidents and injuries to inner-city children in New York City and throughout the United States.

Inspiring Others

In the 1960s, the social changes brought about by the civil rights and women’s movements and the passage of equal opportunity legislation led to a dramatic increase in the numbers of women and minorities entering medicine. This demographic shift has helped ensure that a more diverse cross-section of society is now represented in the medical profession.

Recognizing the value of different cultural and sociological perspectives in medicine, many of the women who now train future physicians are developing innovative teaching strategies and programs to encourage students from many backgrounds to enter all medical specialties.

Patients can find doctors from their own communities and cultures whom they may feel are better able to understand their concerns.

Edith Irby (later Edith Irby Jones) is shown here in 1947, the year before she became the first black student to attend the University of Arkansas School of Medicine. Later in her career, Jones was honored by “Edith Irby Jones Day” in Houston, Texas, and an ambulatory center at the former Southeast Memorial Hospital in Houston was named after her.

courtesy: Edith Irby Jones, M.D.
In 1948, nine years before the “Little Rock Nine” integrated Central High School in Little Rock, Arkansas, Edith Irby Jones (b. 1937) became the first black student in the South to attend classes with white students, and the first black student to attend the University of Arkansas School of Medicine. Her medical education reflected a community-wide effort. African Americans in Little Rock and across Arkansas contributed to her medical school education with dimes and quarters. High school alumni helped pay for her tuition, and a similar effort sponsored by the black newspaper, the *Arkansas State-Press*, paid for her other expenses. Her enrollment in a previously segregated southern medical school made news headlines across the nation.

**Edith Irby (later Edith Irby Jones) in the hallway of the University of Arkansas School of Medicine, 1949.**  
*courtesy: Photograph by Phil Stern*

Although Edith Irby had been accepted to attend classes at the university, she was not allowed to use the same dining, lodging, and bathroom facilities as other students. Forced to dine in the segregated staff dining room, every day she found a vase of fresh flowers placed on her table by the custodial staff—a sign of support from African American workers at the school. Later in her career, Edith Irby Jones made her own efforts to strengthen black community ties, spending many nights traveling the state to help enlist new members in the National Association for the Advancement of Colored People (NAACP).

**Edith Irby Jones in her office in Houston, 1986.**  

Throughout her career, Edith Irby Jones has worked to improve life for the poorest members of society. Her efforts to eliminate segregation in medical education and to promote equal access to affordable health care have made her a role model for many African American physicians. In 1985, she was elected president of the National Medical Association, a professional association founded in 1895 in response to the exclusion of blacks from the American Medical Association. She has also been active in the American Medical Women’s Association and Planned Parenthood, as well as other groups. In 1991, she helped establish a medical clinic in Haiti.

**Katherine Flores with students from a research seminar in the Junior Doctor’s Academy program, Fresno, California, 2002.**  
*courtesy: Katherine A. Flores, M.D.*

The Sunnyside High School Doctor’s Academy and the middle school Junior Doctor’s Academy, established by Katherine Flores in Fresno in 1999, provide much-needed support for Latino students who are interested in careers in medicine. Because she remembers the difficulties she faced in becoming a physician, Flores hopes that programs like these will attract students who otherwise might not consider medical careers. Students in the programs are encouraged to research health issues and present their findings, and in the process to imagine themselves as medical students.

**United Farm Workers flag and beret.**  
*courtesy: Katherine A. Flores, M.D.*
Katherine Flores vividly remembers the exhausting work of gathering buckets of plums, as a young child growing up in a migrant farm worker community. Because she witnessed the effects of inadequate medical care for farm workers, which worsened her grandfather’s health, she decided early in life to try to make a difference. Later she recalled, “Growing up in the fields with my family was what I knew and accepted. As I got older and understood the world better, the injustices farm workers suffered became clearer to me. As a college student I became involved with ‘La Causa’ and marched with [labor activist and founder of the United Farm Workers organization] Cesar Chavez… I began to fully appreciate the mission in life we each must commit to for the betterment of our communities.”

Katherine Flores’s grandfather, Juan Hernandez, 1953.
courtesy: Katherine A. Flores, M.D.

Katherine Flores was born in Fresno, California, into a family of migrant farm workers. Her mother died when Flores was an infant, and her mother’s parents, originally from Mexico, raised her. Her grandmother always reminded Flores of her priority—la familia. Her grandparents, who worked in the fields near Fresno, imparted their strong work ethic to her in spite of the hardships of their own lives.

Katherine Flores and her grandmother, Antonia Hernandez, 1972.
courtesy: Katherine A. Flores, M.D., photograph by Olan Mills

Sustained by her family and her Mexican heritage, Katherine Flores (b. 1953) brings a vibrant sense of community to her medical practice, her teaching, and her work as an administrator. Currently a faculty member of the University of California San Francisco Fresno Medical Education Program, she also serves as the project director of the California Health Education Training Center and the Latino Center for Medical Education and Research in Fresno.

Making a Difference

(Background photo) In 1950, obstetrician and gynecologist Helen Dickens (1909–2001) became the first African American woman admitted to the American College of Surgeons. During her career, Dickens founded a teen clinic for school-age mothers in Philadelphia, and as associate dean for minority admissions at the University of Pennsylvania, she helped increase student diversity at the medical school.
courtesy: Archives and Special Collections on Women in Medicine, Drexel University College of Medicine, photograph by G. M. Wilson, 1940s

I think that, being an African American physician, you may see some African American social and cultural issues that a white physician may not, in all honesty, be aware of. They might deal differently if they were aware it was there.—Helen Dickens, Penn Medicine, 1990

Reaching a broad audience and providing a forum for helpful discussion of any medical issue, psychiatrist Rebekah Wang-Cheng (b. 1953) wrote a bi-weekly question-and-answer column for the Milwaukee Journal Sentinel which is still syndicated over the
Internet. She also served as co-host of the *Adventist Development and Relief Agency World*, a cable television program reporting on humanitarian work.

*courtesy: Rebekah Wang-Cheng, M.D., 2000*

“All the world’s a classroom” (to paraphrase Shakespeare) and patients of all ages, given the time and opportunity, are some of the most eager learners.—*Rebekah Wang-Cheng, 2000*

As a member of the women’s health movement of the 1970s, Helen Rodriguez-Trias (1929–2001) campaigned for reproductive rights and prenatal care for the underserved, and fought against enforced sterilization. She expanded the range of public health services for women and children in minority and low-income populations in the United States, Central and South America, Africa, Asia, and the Middle East.

*courtesy: JoEllen Brainin-Rodriguez, M.D., 1970s*

An activist and passionate advocate for poor women of color, Helen educated a generation of women activists of all colors who sought to advance women’s rights through health… If anyone deserves the title of mother of the movement for reproductive rights, it’s Helen Rodriguez-Trias.—*Susan E. Davis, American Journal of Public Health, 2002*

Through her pioneering work in sex education, Mary Steichen Calderone (1904–1998) brought an uncomfortable subject to the forefront of public debate. Beginning in the 1950s, when public discussion of such issues was controversial, Calderone flouted convention by speaking out in the first place on such a topic, and by speaking out as a woman. In 1964, she founded the Sex Information and Education Council of the United States (SIECUS) to promote sex education for children and young adults. Her lifelong efforts to equip young people with the confidence and knowledge to enjoy safe and healthy sex lives in adulthood were truly revolutionary. The debate she began in the 1950s has paved the way for vital discussions today about sexually transmitted diseases, AIDS, and unplanned pregnancies.

*courtesy: The Schlesinger Library, Radcliffe Institute, Harvard University, photograph by Henry Grossman, 1970s*

*Our children are not going to be just “our children” —they are going to be other people’s husbands and wives and the parents of our grandchildren.—Mary Steichen Calderone, NBC TV, 1974*

[“Section five”]

**Transforming the Profession**

In recent decades, women physicians have risen to the very top ranks of institutions that are at the forefront of medical research and that define the highest standards of practice in medicine. They identify and respond to many of the most urgent crises in modern medicine, from the needs of underserved communities, to AIDS, to natural and man-made disasters.

As leaders, the direct research and funding and are instrumental in implementing the policies, developing the drugs and treatments, and drafting the legislation required to meet emerging medical challenges.
They are promoting reforms to eradicate the professional barriers that many of them faced in their own careers, and they are working to change the way that medicine is taught and practiced.

**Catherine DeAngelis, ca. 1990.**

*courtesy: Catherine DeAngelis, M.D., M.P.H.*

During her career, Catherine DeAngelis was vice dean of academic affairs and faculty at The Johns Hopkins University School of Medicine. In this position, she worked to remedy gender bias at the medical school. She also launched the Women’s Leadership Council, which met monthly to address women’s concerns about professional advancement, including salary inequities and the low numbers of women in senior faculty positions. In 2000, DeAngelis became the first woman to be appointed editor of the *Journal of the American Medical Association.* By focusing attention on topics that have often been overlooked, she has brought a new emphasis on women’s health to the internationally influential journal.

**Catherine DeAngelis with fellow students at Wilkes College, 1960s.**

*courtesy: Catherine DeAngelis, M.D., M.P.H.*

To pay for premedical training at Wilkes College, Pennsylvania, Catherine DeAngelis worked as a nurse and lab researcher. She also set up an infirmary. A dedicated, successful student, DeAngelis was the first woman elected class president and was named homecoming queen. She received her M.D. degree in 1969 and a master’s degree in public health in 1973. Over the next 20 years, she combined pediatrics care with teaching at Columbia University, the University of Wisconsin, and The Johns Hopkins University.

**Catherine DeAngelis at the Scranton State Hospital School of Nursing, ca. 1960.**

*courtesy: Catherine DeAngelis, M.D., M.P.H., photograph by Prestwood Studio*

Catherine DeAngelis (b. 1940) grew up in a coal-mining town in Pennsylvania. She developed an interest in medicine early in life, and began asking her parents for a toy doctor’s kit from the age of four. As a young girl, DeAngelis considered working with the Maryknoll Sisters, a missionary order whose humanitarian work appealed to her, but she eventually decided to pursue her interest in medicine. She could not afford to go to medical school and instead enrolled at Scranton State Hospital School of Nursing. While she was in nursing school, DeAngelis “read everything in the library and loved it.” After graduation, she took a job at Columbia Presbyterian Medical Center in New York as a nurse, hoping one day to be able to attend medical school.

**Susan Briggs helps to evacuate children following an earthquake in Armenia, 1989.**

*courtesy: Susan M. Briggs, M.D., M.P.H.*

Trauma surgeon Susan Briggs has spent her career responding to medical emergencies at home and around the world. “Every disaster leaves behind devastated and disrupted lives,” she says. Her job is to provide the practical aid and the expert medical care required to help survivors begin rebuilding their lives. As a volunteer with Project Hope, a charitable organization that sends medical personnel to large-scale accidents and disasters, Briggs has visited scenes of
trauma around the globe. During the earthquake rescue effort shown here, one hundred children were evacuated to the United States for medical treatment.

**Susan Briggs (above, second from right) with an American burn team near Ufa, Russia, June 1989.**
*courtesy: Susan M. Briggs, M.D., M.P.H.*

“Natural and man-made disasters such as hurricanes, earthquakes, industrial accidents, terrorists attacks, and transportation accidents all present major challenges to disaster medical personnel,” says Susan Briggs. The burn team was called to the scene of an accident in which a gas pipeline exploded, derailing two passing trains. Almost 1,100 passengers were involved in the accident, and many of them were injured.

**Susan Briggs at Ground Zero, World Trade Center site, New York City, September 2001.**
*courtesy: Susan M. Briggs, M.D., M.P.H.*

Susan Briggs (b. 1943) is the supervising medical officer of the International Medical Surgical Response Team in Boston, an organization that she established in 2000 to respond to natural and man-made disasters. On September 11, 2001, Susan Briggs had just finished a routine medical procedure when she received a call from the Office of Emergency Preparedness in Washington, D.C., concerning the attacks on the World Trade Center in New York City. She quickly assembled a team of 70 Boston-area medical professionals. Within hours they were on their way to New York to provide relief and medical care.

**Antonia Novello is sworn in as surgeon general of the United States in 1990. She is shown with her husband, Joseph Novello, also a physician, President George H. W. Bush, and Justice Sandra Day O’Connor.**
*courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.*

When Antonia Novello (b. 1944) was appointed surgeon general of the United States by President George H.W. Bush in 1990, she was the first woman—and the first Hispanic—ever to hold that office. Her appointment followed nearly two decades of public service at the National Institutes of Health, where, among other responsibilities, she worked with Congress on developing organ transplantation legislation.

*courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.*

Antonia Novello (left) joined the U.S. Public Health Service Commissioned Corps in 1978, working first with the National Institute of Arthritis, Metabolism, and Digestive Diseases at the National Institutes of Health. Novello’s focus on children’s health began in her early years of private practice as a pediatrician, and continued through her public health service career. In 1986, she became deputy director of the National Institute of Child Health and Human Development, where she focused research on the issue of pediatric AIDS. As surgeon general, she targeted tobacco advertising aimed at children, particularly the cigarette ads that featured the cartoon character Joe Camel.
Antonia Novello with members of the Lakota Nation, 1991.
courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.

Antonia Novello marshalled the prestige of her position as surgeon general to educate the public. Focusing on the health of young people, women, and minorities, she issued frank reports and spoke out on smoking, underage drinking, drug abuse, and AIDS. She also promoted immunization and injury prevention for children, as well as improved health care for Hispanics and other minorities. Novello visited a number of Indian reservations to draw attention to the health needs of American Indians. To commemorate her visits to the Pine Ridge Reservation, South Dakota, the public health officers at the reservation had a stethoscope beaded especially for her.

Stethoscope presented to Antonia Novello by the public health officers at the Pine Ridge Reservation, South Dakota, 1991.
courtesy: Antonia C. Novello, M.D., M.P.H., Dr. P.H.

Local Legends

The National Library of Medicine, in partnership with the American Medical Women’s Association, invites you to celebrate the accomplishments of women physicians throughout your communities. These Local Legends were nominated by Congressional representatives for their contribution to the health of their communities.

(Local Legends logo)
www.nlm.nih.gov/locallegends

Linda Warren, M.D.
Kansas
Nominating Member of Congress: Jerry Moran (R-KS-1)

Mercy Obelme, M.D.
Indiana
Nominating Member of Congress: Julia Carson (D-IN-7)

Janice F. Gable, M.D. (left)
Virginia
Nominating Member of Congress: Rick Boucher (D-VA-9)

Making a Difference

(Background photo) After the sudden death of her father, S. Josephine Baker (1873–1945) gave up a scholarship to Vassar College. Instead, she trained as a physician so that she could earn a steady income and help support her family. Baker built a prominent career in public health, caring for communities and devising broad social programs to improve health and welfare. In 1908, she was appointed the first director of the New
York City Bureau of Child Hygiene, the first organization of its kind in the country, and later a model for the United States Children's Bureau.  
courtesy: Library of Congress, Prints and Photographs Division, LC-USZ62-058326, 1920

During the suffrage days I had no great illusion about my sex; I wanted the vote as a matter of common justice. But I still believe that women have something to offer this sick world that men either do not have or have not offered.—S. Josephine Baker, Fighting for Life, 1939

During her first year at medical school, Lisa I. Iezzoni (b. 1954) was diagnosed with multiple sclerosis. Because of her illness, she was denied an internship and so she moved into research to continue her career. Today, Iezzoni is a leading authority on methods to evaluate health care. In 1998, she became the first woman to be appointed professor in the department of medicine at Beth Israel Hospital in Boston, Massachusetts.  
courtesy: Lisa I. Iezzoni, M.D., M.Sc., 1990

This [her diagnosis with multiple sclerosis] was years before the 1990 Americans with Disabilities Act, and from early on, I received frequent hints that my medical career was in jeopardy. Confronting the physical limitations and uncertainty of MS was only one step. I also had to deal with people’s reactions to me—the “me” they equated with my disease.—Lisa I. Iezzoni, 2002

(Above) Frances Conley (b. 1940) was the first woman to be appointed a tenured full professor of neurosurgery at a medical school in the United States. In 1991, Conley made national headlines when she announced her intention to resign her tenured position at Stanford University Medical School to protest against sexism in the school.  
courtesy: Frances K. Conley, M.D., M.S.

Her exceptional judgment in evaluating a new drug for safety for human use has prevented a major tragedy of birth deformities in the United States. Through high ability and steadfast confidence in her professional decision she has made an outstanding contribution to the protection of the health of the American people.—President John F. Kennedy, awarding Frances Kelsey the President’s Award for Distinguished Federal Civilian Service, 1962

In 1960, during her first month on the staff of the U.S. Food and Drug Administration, Frances Kelsey (b. 1914) refused to approve the release of the drug thalidomide in the United States. Thalidomide had been used as a sleeping pill in Europe, and was later proven to have caused thousands of birth deformities in Germany and Great Britain.  
courtesy: National Library of Medicine, Images from the History of Medicine, 1962

Barbara Ross-Lee (b. 1942) was appointed dean of the College of Osteopathic Medicine of Ohio University in 1993, making her the first African American dean of an American medical school. As a college student, her academic advisor—who did not believe women should be physicians—had refused to authorize Ross’s request to major in human anatomy. She was later able to complete her pre-medical training while serving in the National Teacher Corps, studying part-time while teaching in public schools in Detroit.  
I never planned, or had a dream of being a dean of a medical school, or a vice president at an institution of higher education. It came in a very serendipitous way. At each step along the way in my professional life... I have tried to take the next step, to make a bigger difference.—Barbara Ross-Lee, 2003

[Section six]

Building the Future

Addressing today’s challenging health care needs, women physicians work in the highest ranks of medical administration and research. Drawing on their own interests and experiences, women physicians are instituting changes that are having far-reaching benefits for the health and happiness of families, communities, and medical practitioners themselves.

The influence of these women reaches across the profession and out into our lives, helping to redefine women’s roles and society’s responsibilities. By changing the face of medicine, women physicians are helping to change our world.

What about the physicians of the future?
Will you, your child, your sister, or your neighbor walk in the footsteps of the remarkable women in this exhibition? Will you discover life-saving cures, care for neglected communities, solve unforeseen health problems? We hope you will be inspired by American’s women physicians to nurture your own talents and to make your own unique contributions to the world.

Photo captions:

(Left) The P.S. 196 district playground was made safe by pediatrician Barbara Barlow and a team of volunteers, Harlem, New York, 2000.
courtesy: Barbara Barlow, M.A., M.D.

Dr. Nancy Snyderman was a correspondent for ABC’s Good Morning America during the Persian Gulf War of 1991.
courtesy: Nancy Snyderman, M.D.

Dr. Joan Reede (center) with students Thuyanh Le (left) and Joyce Imahiyerobo (right) at Harvard University’s Biomedical Sciences Career Program Conference, 2001.
courtesy: Joan Reede, M.D., M.P.H., M.S.

Exhibition Credits

Changing the Face of Medicine: Celebrating America’s Women Physicians was developed by the Exhibition Program of the History of Medicine Division of the National Library of Medicine in collaboration with the American Library Association Public Programs Office. The traveling exhibition is based upon a major exhibition displayed at the National Library of Medicine from 2003–2005.
This traveling exhibition has been made possible by the National Library of Medicine, dedicated to making the most accurate and up-to-date health information freely available to all, and the National Institutes of Health Office of Research on Women's Health, dedicated to promoting, stimulating, and supporting efforts to improve the health of women. The American Medical Women’s Association provided additional support.

Message from the Ad Hoc Advisory Group

In 2001, Donald A.B. Lindberg, M.D., director of the National Library of Medicine, and Tenley E. Albright, M.D., invited distinguished individuals in the medical community to participate in an Ad Hoc Advisory Group and to nominate exemplary physicians for inclusion in Changing the Face of Medicine, an exhibition that celebrates the lives and achievements of America’s Women Physicians.

Over the last 150 years, thousands of women have pursued a medical degree, have practiced medicine, conducted research, and lived full and rich lives. Their stories and their careers inspire each succeeding generation of women as they open doors, make new discoveries, and change the face of medicine.

It would be impossible to recognize the achievements and contributions of every woman physician. We hope that by examining this exhibition, you will consider the women physicians here as examples of the fuller fabric of women’s contributions to medicine and their personal achievements in society.

If you know of a woman physician who you think should be part of this project, we invite you to Share Your Story in a link of that name on the exhibition’s Web site.

www.nlm.nih.gov/changingthefaceofmedicine

(List of committee members)

Exhibition design: Riggs Ward Design, Richmond, VA
Interactive design: Second Story Interactive Studios, Portland, OR
Exhibition tour management: Public Programs Office, American Library Association, Chicago, IL
Exhibit shipping and Receiving Information
(This form is also in the online site support notebook.)

The shipper for "Changing the Face of Medicine" will be VIP Transport East, the Fine Arts Transportation Agent for Mayflower Transit. The exhibit travels in six, wheeled, molded hard plastic cases, each approximately 45” x 35” x 9”, and two crates containing the interactive kiosks, for a total of 8 containers.

**All shipping costs will be billed to the ALA Public Programs Office.**

**Important exhibit display information:** The first date of your exhibit period is a Wednesday. This is the last day for the shipper to deliver the exhibit to you. Please do not plan programs on Wednesday, and we recommend not scheduling programs on Thursday in case of unforeseen delivery problems. The last date in your exhibition period is a Friday, the day when the exhibit should close (you may close the exhibit earlier if you wish). Because there is limited time to ship the exhibition from one site to another, libraries should dismantle the exhibition and have it ready for pick-up by the Monday after the exhibition closes. *This does not mean the shipper will always pick up the exhibit on Monday, but the exhibit should be ready to go then.*

**HOST LIBRARIES ARE REQUESTED TO PROCEED AS follows:**

1. VIP Transport/Mayflower will call libraries to arrange convenient delivery and pick-up times. **If you have not heard from VIP by at least 48 hours before the exhibit should be delivered, please call VIP at the following number between 9 a.m. and 5 p.m. Eastern Standard Time to confirm delivery arrangements:**

   **1-800-261-6088**

   Ask for Beth Bochniak at ext. 206 (leave a message if she does not answer)

   **If you have not heard from VIP by 48 hours before the exhibit closes,** please call the above to arrange for pick-up.

2. Please arrange for delivery and pick-up during business hours (9-5 your time). Give VIP the following information:
   
   - Name and telephone number of a contact person.
   - Address where exhibition should be delivered or picked up and actual place of delivery or pick-up at that address, such as back or front of building, etc.
   - Opening and closing times of building if relevant.
   - Special conditions that apply, e.g., parking restrictions, no loading dock, ramp access, use of back door only, tractor-trailer access, stairs, etc.

The contact person for inquiries about “Changing the Face of Medicine” shipping is:

**Administrative Assistant/Registrar**
ALA Public Programs
50 E. Huron St.
Chicago, IL 60611
Phone: 312-280-5045, fax: 312/944/2404,
e-mail: publicprograms@ala.org
Condition/Damage Report-Changing the Face of Medicine  
(form also in the online site support notebook)

Libraries are required to complete the condition report form when they receive the exhibit.

Library: __________________________________ City/State: ____________________________

Person completing form _____________________________ Date exhibit arrived ________________

1. Please check the condition of all materials as you unpack crates.

2. If you observe damage that prevents display of the exhibit and/or may require a panel replacement, **immediately call** Sofiana Peterson at 1-800-545-2433, ext. 5045. Use the panel replacement codes found in the Exhibition Manual to report damage. Please take pictures of the damage if possible and email them to Sofiana Peterson at speterson@ala.org.

3. If there is no major damage, **complete this form within 48 hours** and fax or e-mail to the address below. We must have a damage report form on file from each library. Duplicate pages if needed.

4. Please fax or e-mail this form within 48 hours of exhibit opening to: Sofiana Peterson, Administrative Asst/Registrar; phone: 312-280-5045; fax: 312-944-2404; e-mail: speterson@ala.org

Case #1

1. **Assess the exterior condition of the case.**
   - Check here if there is no visible damage to the exterior of the case.
   - Check here if there is damage to the exterior of the case, straps, handles, fasteners, wheels or other. Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair:
   - ___________________________________________________________________________________
   - ___________________________________________________________________________________

2. **Inventory the contents of the case.**
   - Check here if the contents of the case match the packing plan found in the exhibition manual, p. 3.
   - Check here if the contents have been incorrectly packed or if there are items missing (cardboard packing inserts, header packing trays, etc.) Describe below the nature of the discrepancy:
   - ___________________________________________________________________________________
   - ___________________________________________________________________________________

3. **Assess the condition of the case contents.**
   - Check here if all the contents of the case are clean and in good physical condition.
   - Check here if any of the contents of the case have visible damage. Consider physical integrity, metal frame unit condition, graphics condition. Describe below the nature of damage and its location. Use the panel codes found in the exhibition manual to report damage.
   - ___________________________________________________________________________________
Case #2

1. **Assess the exterior condition of the case.**
   - Check here if there is no visible damage to the exterior of the case.
   - Check here if there is damage to the exterior of the case, straps, handles, fasteners, wheels or other. Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair:

2. **Inventory the contents of the case.**
   - Check here if the contents of the case match the packing plan found in the exhibition manual, p. 3.
   - Check here if the contents have been incorrectly packed or if there are items missing (cardboard packing inserts, header packing trays, etc.) Describe below the nature of the discrepancy:

3. **Assess the condition of the case contents.**
   - Check here if all the contents of the case are clean and in good physical condition.
   - Check here if any of the contents of the case have visible damage. Consider physical integrity, metal frame unit condition, graphics condition. Describe below the nature of damage and its location. Use the panel codes found in the exhibition manual to report damage.

Case #3

1. **Assess the exterior condition of the case.**
   - Check here if there is no visible damage to the exterior of the case.
   - Check here if there is damage to the exterior of the case, straps, handles, fasteners, wheels or other. Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair:

2. **Inventory the contents of the case.**
   - Check here if the contents of the case match the packing plan found in the exhibition manual, p. 3.
   - Check here if the contents have been incorrectly packed or if there are items missing (cardboard packing inserts, header packing trays, etc.) Describe below the nature of the discrepancy:

3. **Assess the condition of the case contents.**
   - Check here if all the contents of the case are clean and in good physical condition.
   - Check here if any of the contents of the case have visible damage. Consider physical integrity, metal frame unit condition, graphics condition. Describe below the nature of damage and its location. Use the panel codes found in the exhibition manual to report damage.
Case #4

1. Assess the exterior condition of the case.
   - Check here if there is no visible damage to the exterior of the case.
   - Check here if there is damage to the exterior of the case, straps, handles, fasteners, wheels or other.
     Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair:

2. Inventory the contents of the case.
   - Check here if the contents of the case match the packing plan found in the exhibition manual, p. 3.
   - Check here if the contents have been incorrectly packed or if there are items missing (cardboard packing inserts, header packing trays, etc.) Describe below the nature of the discrepancy:

3. Assess the condition of the case contents.
   - Check here if all the contents of the case are clean and in good physical condition.
   - Check here if any of the contents of the case have visible damage. Consider physical integrity, metal frame unit condition, graphics condition. Describe below the nature of damage and its location. Use the panel codes found in the exhibition manual to report damage.

Case #5

1. Assess the exterior condition of the case.
   - Check here if there is no visible damage to the exterior of the case.
   - Check here if there is damage to the exterior of the case, straps, handles, fasteners, wheels or other.
     Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair:

2. Inventory the contents of the case.
   - Check here if the contents of the case match the packing plan found in the exhibition manual, p. 3.
   - Check here if the contents have been incorrectly packed or if there are items missing (cardboard packing inserts, header packing trays, etc.) Describe below the nature of the discrepancy:

3. Assess the condition of the case contents.
   - Check here if all the contents of the case are clean and in good physical condition.
   - Check here if any of the contents of the case have visible damage. Consider physical integrity, metal frame unit condition, graphics condition. Describe below the nature of damage and its location. Use the panel codes found in the exhibition manual to report damage.
Case #6
1. Assess the exterior condition of the case.
   _____Check here if there is no visible damage to the exterior of the case.
   _____Check here if there is damage to the exterior of the case, straps, handles, fasteners, wheels or other. Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair:
   
   ____________________________________________________________
   ____________________________________________________________

2. Inventory the contents of the case.
   _____Check here if the contents of the case match the packing plan found in the exhibition manual, p. 3.
   _____Check here if the contents have been incorrectly packed or if there are items missing (cardboard packing inserts, header packing trays, etc.) Describe below the nature of the discrepancy:
   
   ____________________________________________________________
   ____________________________________________________________

3. Assess the condition of the case contents.
   _____Check here if all the contents of the case are clean and in good physical condition.
   _____Check here if any of the contents of the case have visible damage. Consider physical integrity, metal frame unit condition, graphics condition. Describe below the nature of damage and its location. Use the panel codes found in the exhibition manual to report damage.
   
   ____________________________________________________________
   ____________________________________________________________
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Case #7—Computer Kiosk A
1. Assess the exterior condition of the shipping case.
   _____Check here if there is no visible damage to the exterior of the case.
   _____Check here if there is damage to the exterior of the case, handles, fasteners, wheels or other. Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair.
   
   ____________________________________________________________
   ____________________________________________________________

2. Inventory the contents of the shipping case.
   _____Check here if the contents of the kiosk shipping case match the packing plan found on p. 10 of the exhibition manual. Are three keys and the restore CD disc attached to the inside of the case? If not, notify ALA immediately. Is the touch-up paint in the shipping case? Packing materials intact? Are there screws missing on the “door” panel of the case?
   _____Check here if the contents have been incorrectly packed or if there are items missing. Describe below the nature of the discrepancy:
   
   ____________________________________________________________
   ____________________________________________________________

3. Assess the condition of the kiosk itself.
   _____Check here if the kiosk is clean and in good physical condition.
   _____Check here if the kiosk has any visible damage. Consider keyboard, monitor, headphones, cables, switches, physical integrity, paint condition, functioning of hardware, etc. Describe below the nature of damage and its location, and whether it needs repair. (Follow the separate “Computer Kiosks Mini-manual” to set up and operate the computer.)
   
   ____________________________________________________________
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   ____________________________________________________________
Case #8—Computer Kiosk B

1. Assess the exterior condition of the shipping case.
   _____Check here if there is no visible damage to the exterior of the case.
   _____Check here if there is damage to the exterior of the case, handles, fasteners, wheels or other. Describe below the nature of the damage, its location, whether it was damaged before arrival or at the library, and whether the case needs repair.
   ___________________________________________________________________________________
   ___________________________________________________________________________________
   ___________________________________________________________________________________

2. Inventory the contents of the shipping case.
   _____Check here if the contents of the kiosk shipping case match the packing plan found on p. 10 of the exhibition manual. Are three keys and the restore CD disc attached to the inside of the case? If not, notify ALA immediately. Is the touch-up paint in the shipping case? Packing materials intact? Are there screws missing on the “door” panel of the case?
   _____Check here if the contents have been incorrectly packed or if there are items missing. Describe below the nature of the discrepancy:
   ___________________________________________________________________________________
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   ___________________________________________________________________________________
   ___________________________________________________________________________________

3. Assess the condition of the kiosk itself.
   _____Check here if the kiosk is clean and in good physical condition.
   _____Check here if the kiosk has any visible damage. Consider keyboard, monitor, headphones, cables, switches, physical integrity, paint condition, functioning of hardware, etc. Describe below the nature of damage and its location, and whether it needs repair. (Follow the separate “Computer Kiosks Mini-manual” to set up and operate the computer.)
   ___________________________________________________________________________________
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   ___________________________________________________________________________________
   ___________________________________________________________________________________

Please fax or e-mail this form within 48 hours of exhibit opening to:
Sofiana Peterson
Administrative Asst/Registrar
ALA Public Programs office
phone: 312-280-5045
fax: 312-944-2404
e-mail: speterson@ala.org
Final Report—Changing the Face of Medicine Exhibition
(also at www.ala.org/publicprograms/ChangingtheFaceofMedicine)

PLEASE NOTE: This report must be completed and returned to the address below within 30 days of the closing of the exhibition. Reporting is a requirement for all exhibit projects organized by the American Library Association. Failure to make a timely final report may affect your library's opportunities to host future exhibits or take part in other ALA Public Programs Office projects. It is often difficult to monitor exhibit attendance, but informed attendance estimates are required. Please use extra paper if necessary.

1. LIBRARY NAME: __________________________________________________________

2. CITY/STATE: ____________________________ EXHIBITION DATES: __________

3. EXHIBITION ATTENDANCE
Total # exhibit visitors: __________________________ Actual ___ Estimate ___ (check one)
Source of statistics: ____________________________________________________________
OR
Total # library visitors during exhibit: ______________________ Actual ___ Estimate ___ (check one)
Source of statistics: ____________________________________________________________

4. PUBLIC PROGRAMS
Please summarize your programming efforts in a few sentences, characterizing your audience and scope of programming. Mention how you presented the required reception and programs.

Individual program descriptions (include Title, Format and Presenter for all programs; use extra paper if necessary). Please provide final overall attendance figure for all programs.

1) Required Opening Reception

______________________________________________________________________________
Total attendance ______ Adults _____ YA _____ Children _____ School Groups_____

2) Required program

______________________________________________________________________________
Total attendance ______ Adults _____ YA _____ Children _____ School Groups_____

3) Required program

______________________________________________________________________________
Total attendance ______ Adults _____ YA _____ Children _____ School Groups_____

4) Program

______________________________________________________________________________
Total attendance ______ Adults _____ YA _____ Children _____ School Groups_____

59
5) Program

______________________________

Total attendance_______ Adults _____ YA ______ Children _____ School Groups_____ 

Total number of programs _________ Total program attendance ____________

5. ELEMENTARY AND HIGH-SCHOOL INVOLVEMENT

Total number of students/ elementary_____ H.S. ________ visiting the exhibition 
Total number of classes using Changing the Face of Medicine materials in the curriculum:
  elementary ______ H.S. __________
(Include descriptions of programs for students under No. 4)

6. FUNDING (include sources and actual/in-kind amounts of support for any exhibition-related programs, invitations, printing, events, etc.):

Source:_____________________________________________________________ Amount:_______
Source:_____________________________________________________________ Amount:_______
Source:_____________________________________________________________ Amount:_______

Total: _______________

7. PUBLICITY If your library is an academic or medical library, describe how you tried to attract public audiences from outside your customary user groups to the exhibit and programs, and indicate whether or not you were successful. Public libraries please describe the results of your publicity strategies for the exhibit.

8. PUBLICITY SAMPLES Please attach three copies of all library-produced publicity pieces, including posters and flyers, all newspaper articles, and other materials such as bibliographies, bookmarks, invitations, etc.; copies of your Changing the Face of Medicine web site pages; and captioned photographs taken at exhibition programs if you have them.

9. COMMENTS ABOUT THE EXHIBITION

Please identify source of comments, e.g., librarian, program participant, presenter or partner organization. Comments are valuable in reports to funders about exhibitions, and we appreciate your gathering them.

Submitted by: _____________________________ Date: _____________________________
Phone: _____________________________ E-mail: _____________________________

Return this form and attachments within 30 days of the closing of the exhibition to:
Sofiana Peterson, ALA Public Programs, 50 E. Huron St., Chicago, IL 60611
Any questions, please call 312/280/5045 or contact speterson@ala.org