



Disease in World History (ASEM)

Hilary A. Smith
Department of History

Producing Responsibly Imaginative Historical Writing: Analysis of an ASEM Assignment

I have chosen to examine two pieces of student writing that respond to a major assignment from my Honors ASEM, Disease in World History. The assignment asked students to write a narrative recreating the experience of one patient at the Jewish Consumptives' Relief Society (JCRS) in the 1900s or 1910s. The JCRS was a charitable tuberculosis sanatorium in Denver; its records, including boxes and boxes of patient files, are housed in the archives in DU's main library. We made several visits to the archives together as a class, and students were to select a patient file and use the documents in it as the foundation for a 1200 to 2000-word narrative about that person's experience. I asked them to put the patient's story in a broader context by applying the things they were learning from class readings about TB and TB treatment, sanatoria, Colorado as a TB destination, and the JCRS.

I hoped that this assignment would help students achieve several things. First, I hoped their work would demonstrate empathy with people living in a very different time, under very different circumstances, from their own; I thought reading personal letters and seeing the photographs and personal effects of the JCRS patients would help foster that sense of empathy. Second, I wanted them to demonstrate knowledge of the historical context, gained through our secondary-source readings for class, and show that they could apply what they'd learned in those readings to a particular case. I also wanted them to smoothly integrate primary and secondary material into a lively narrative, producing something that was at once enjoyable to read and scholarly. This would give them a more intimate understanding of the historian's craft, how we construct a compelling interpretation from fragmentary evidence. It was a tall order. Most of the students rose to the challenge, however (it helped that it was an Honors class).

I have selected a paper that earned an *A* (Paper A) and one that earned a *B* (Paper B) as the focus of my analysis here. Both pieces of writing are satisfactory. Both do an excellent job of being faithful to the primary sources, carefully documenting in footnotes the letters and

telegrams and other archival documents that inform the major events in their stories. Both are virtually free of technical errors. They were produced by two competent writers.

Still, Paper A is much stronger. What most sets Paper A apart from Paper B is imagination and empathy. The contrast shows up in the opening line of each piece. Paper A begins, "The tragic story of Sam Fisher's illness with tuberculosis is a winding one, full of blackmail, intrigue, selfless actions, and familial love," while Paper B begins "24 year old Bennie Pitchonoc immigrated to the United States from Russia with his wife Sarah in 1901." This verve gap is consistent throughout the two pieces right up to their closing sentences. Paper A:

The Fishers felt the sting of tuberculosis ... and though they managed to survive and prevail throughout these difficult circumstances ... tuberculosis left an unforgettable mark on their lives.

Paper B:

In Bennie's case, his daughter, relatives, and friends dealt with many consequences after his death, as did many other people who had tubercular friends and family.

Paper A's author writes with gusto – occasionally verging on the melodramatic, in fact. But the overall effect is an exciting, moving and memorable piece of writing. Paper B's author, on the other hand, seems wary of appearing to take liberties with the evidence, and consequently takes very few risks at all. The patient that Paper B's author is writing about died at the JCRS, orphaning a three-year-old daughter and igniting a custody battle between two local women. But Paper B delivers this tragic, knotty story in such a detached way that it becomes boring. "It is understood," Paper B tells us in the passive voice (understood by whom?) that one of the women vying for custody "grew fond of the child."

Another relative weakness of Paper B is that it takes little account of secondary literature and neglects to set the individual's story in a broader context. Although the writer cites archival (i.e. primary) sources frequently, he includes only one citation to a secondary source. And this lonely secondary source he uses to support a *medical* claim about the nature of tuberculosis ("TB is known to lie dormant for years without openly revealing symptoms"), rather than to help the reader understand the social, economic, or cultural features unique to the time in which his subject lived. He seems not to have understood what sort of evidence historical scholarship is best suited to provide, in other words. Paper A's writer again does better in this regard. She cites multiple books to support claims about why her subject might have emigrated from Russia when he did, why Denver was "a hotspot for tuberculosis treatment" at this time, and how institutions like the JCRS were funded.

Finally, Paper A demonstrates more awareness of audience than does Paper B. The lackluster writing in Paper B as compared with the vivid style of Paper A, which I have mentioned above, is one example of this. More problematic, however, is that Paper B's writer inserts new actors into the narrative without explaining who they are. He writes, "Shortly after [the patient's] death, Rose" – a figure not mentioned up to this point – "wrote to [the director of the

JCRS] , ” but the reader never learns who Rose is, despite the fact that she is at the center of the second half of the narrative. He also puts a paragraph about his patient’s first physical examination after a paragraph about his death, an order that may have made sense in the writer’s head but that confuses a reader expecting a chronological narrative. I attribute this, too, to a failure to see his own piece as a reader would see it. Paper A has none of this awkwardness: new figures are consistently introduced the first time they appear and each paragraph follows the previous one naturally.

Upon reflection, I think Paper A’s writer felt more comfortable with the creative aspect of the assignment than did Paper B’s writer. This course attracted mostly science majors, and my impression is that some of them had little experience with or fondness for imaginative writing. As we discussed and peer-reviewed the assignment, many of the students expressed anxiety about the part of the grading rubric that emphasized imagination (interestingly, the history majors expressed just as much anxiety about this as did the biology and psychology majors). There are a couple of ways I might alleviate this anxiety in the future and encourage more “responsibly imaginative” papers. One is to provide examples of successful work by previous students as a model. Another is to plan a conversation in class on just this topic, the place of imagination in historical writing. This conversation would stress that empathetic historical writing does not mean hyperbole or overly dramatic language – and here we might look at the places in Paper A where the student goes a bit overboard, and talk about why those don’t enhance the reader’s understanding or empathy. Good, imaginative historical writing derives as much from the writer’s grasp of the larger picture as it does from her diction. How did people understand tuberculosis and TB sufferers at this time? What sorts of laws applied to them, and what sorts of stigma attached to them? What did the medical treatments prevalent at this time entail? What was it like to be a poor, Jewish immigrant from Eastern Europe? What was Denver like? The more one is able to answer questions like these, the better equipped one is to imagine what a JCRS patient might have felt and experienced, and to craft a compelling historical narrative around that.

I might also change the length parameters for the assignment. Many students originally complained that they felt hampered by the upper word limit, so I increased it from something like 1600 to 2000 words. Next time, I might also raise the lower threshold, to something like 1500 words, to encourage students like the writer of Paper B to make more use of secondary sources, explain things more thoroughly, and just generally let loose a little more.

On the whole, however, I think this assignment was successful. I genuinely enjoyed reading most of the narratives, and the work really seemed to engage most of the students. Some of them spent extra time in the archives outside of class and contacted both the archivist and our resident JCRS expert (Jeanne Abrams) with questions. Several of the students said something to the effect that “this was the most exciting paper I’ve done in college.” I look forward to using it again in a future ASEM and I would like to develop other research-based assignments along similar lines.