

James C. Riley

Jim Riley's eight books and dozens of articles represent a path from the esoteric world of eighteenth-century finance to a global history of health. In each area he has been a pioneer, crossing disciplinary frontiers and finding insights in new places. A native of North Carolina, Jim received his B.A. and Ph.D. from the University of North Carolina, and taught at the University of Houston before coming to IU in 1975. He has received numerous fellowships and grants both here and abroad, and in 2002 his many contributions were recognized with promotion to distinguished professor.

Jim began his career as a historian of public finance. His first book, *International Government Finance and the Amsterdam Capital Market, 1740–1815* (1980), examines the emergence of an international capital market and its role in financing political and military competition between states. In the *American Historical Review*, economic historian Jan de Vries called this book "easily the most comprehensive history of the Amsterdam capital market to exist in any language . . ." and it remains so today. In his second book, Jim turned his attention to France, examining the growing mountain of debt that eventually triggered the French Revolution.

Jim also led a revival of economic history at IU in the 1980s. IU had been a leader in this area in the 1960s and hosted the only meeting of the International Economic History Association ever held in the United States. Jim restarted the IU Economic History Workshop and brought leaders in the field to Bloomington. When our colleague Gyorgy Ranki died suddenly, Jim raised money to establish a prize in his name awarded by the Economic History Association.

With *Population Thought in the Age of the Demographic Revolution* (1985), Jim began a transition from the history of finance to the study of demography and public health. This book showed the links between population and government finance, and it offered a new appreciation for eighteenth-century theories of environmental pathology, which had been discounted by historians of medicine. In a brilliant article in the 1986 *American Historical Review*, Jim shows the impact of these theories on diseases carried by insects and links them to the declining prevalence of malaria. *The Eighteenth-Century Campaign to Avoid Disease* (1987) showed that these ideas stimulated campaigns for environmental engineering that began to reduce mortality before the discovery of the germ theory of disease.

With the publication of "Sickness in an Early Modern Workplace" in 1987, Jim created an entirely new area of historical research: the history of morbidity. His books and articles analyzed early forms of health insurance to show that sickness and health did not always follow trends in mortality. *Sickness, Recovery, and Death* (1989) drew the attention of researchers in medicine and health policy, who are not normally influenced by historical research, and Jim was awarded the Ernst Meyer Prize for research that "makes a significant and original contribution to the study of risk and insurance economics." *Sick, Not Dead: The Health of British Workingmen during the Mortality Decline* (1997) examined a fundamental paradox in modern gerontology: sometimes medical science is able to prolong the lives of persons who continue to be ill or disabled.

In his most recent work Jim has moved to a global perspective. *Rising Life Expectancy: A Global History* (2001) identifies six tactics that have been used to reduce mortality: public health, medicine, wealth and income, nutrition, behavior, and education. Jim carefully weighs the costs and benefits of each approach, and he argues that different combinations of these tactics have been successful in different places and times. He does not set out to paint modern "technomedicine" as either a savior or a villain, but he is most impressed by poor countries that have achieved life expectancies equivalent to the economically advanced areas with far fewer resources. *Poverty and Life Expectancy: The Jamaica Paradox* (2005) examines one of these cases. Jamaicans were able to achieve high life expectancy

without high incomes, expensive public investments, or advanced medical technology. In the 1920s, public health officers, schools, and representatives of the Rockefeller Foundation successfully collaborated to educate the public about the benefits of better hygiene. These campaigns emphasized changes in personal behavior and simple steps, like building latrines, that ordinary Jamaicans could undertake on their own. Jim offers the Jamaican system as a model for raising life expectancy in poor countries. This is an important new perspective in public health, and policy makers would do well to listen.

Jim has been a strong advocate of a global approach in his teaching too. His course The World Since 1945 was popular with undergraduates, and he offered courses on teaching world history to graduate students. Students in his course on the history of public health have learned how to use history to promote public health. Recent classes have published Internet guides, one of which, "Bioterrorism and Me," has been recognized by the Homeland Security Digital Library and the American College of Physicians.

Since Jim already has a new book manuscript in press, we know that his retirement will be anything but idle.

George Alter