

**History of Public Health (HILD 30)  
Summer Session I – Edinburgh, Scotland**

**Mondays and Wednesdays (9 am-12 pm)**

**Professor Claire Edington**

Professor Edington's contact info:

Email: [cedington@ucsd.edu](mailto:cedington@ucsd.edu)

Office hours: XXX

Ever since classical antiquity, people have sought to understand why epidemics happen. How does disease travel? What might explain why one person or group of people become sick and others do not? Does the state have a duty to protect the health of the public, even if that interferes with the rights of individuals? This history is vast, and students tend to learn about the triumphs and turning points that characterize the experience of Western societies, to the exclusion of other parts of the world. Rather than attempt to cover every possible topic, this course instead pursues a global history of epidemics in order to introduce students to the major shifts, themes and tensions that have animated historical scholarship about public health on a global scale. In particular, it will center the histories of Scotland, Britain and its empire, taking advantage of the rich history of scientific discovery in Edinburgh.

Why focus on epidemics? First, as highly visible, dramatic events, epidemics capture the public's imagination and provoke immediate, widespread response. They intensify fears about the threats posed by social outsiders and thereby reinforce hegemonic notions of citizenship, race and belonging. They also ignite periods of disruption that cause social norms to be rewritten, in terms of who gets to participate in the creation of knowledge and who benefits from that knowledge. In short, epidemics generate responses which both reflect and remake our social worlds. Second, epidemics draw our attention to the global expansion of disease through warfare, international trade and colonial conquest. Tracing the globalization of epidemic disease demonstrates how different parts of the world became connected through the movement of germs, people, ideas, and technology. It opens a window onto how different cultural understandings of health and illness came to interact and transform as a result of that interaction. It helps us to understand how colonial power became projected through the language and practices of public health, and also resisted. Finally, attending to the global nature of epidemic disease exposes the shared challenges and shifting geopolitics that have characterized the rise of the field of international, and later global, health.

As recent events have made clear, we are continually confronted by epidemics of new diseases for which we do not have the adequate knowledge or tools to combat them. Meanwhile, even when we do have the tools to mitigate harm in ongoing health crises, those solutions do not always reach those most at risk. This class will help make sense of where these public health tools came from, and why these global health disparities persist. It will provide a historical account of how societies have explained and confronted epidemics in the past—from the Plague of Athens to Covid-19—and what we can learn from these experiences moving forward.

**Learning Objectives.** At the end of this course, students will be able to:

- 1) **Describe** the relationship between epidemics and warfare, colonial empires, the rise of the modern state and the growth of global trade networks in world history;
- 2) **Identify** the social, political and cultural factors that have shaped responses to epidemics over time;
- 3) **Think and write like historians** by engaging with both primary texts and reading seminal works in the field. Students will also learn how to ask good historical questions and to write well-reasoned, persuasive, empirically sound, essays;
- 4) **Evaluate** how our understanding of the past can be used as a tool for thinking about the future direction of policy.

**Grade breakdown.**

**Attendance (10%).** Please arrive to class on time. Attendance is mandatory. Absences will seriously jeopardize your ability to succeed in this class. If you must miss a lecture or section, please email Professor Edington *before* class.

**Class participation (20%).** Credit for participation will be relatively easy to get and you do *not* have to talk more than other people to get all ten points. This class is geared towards active and participatory learning, which means you need to show up to both lecture and section prepared to discuss the assigned reading. You will be asked at various points as an individual, pair or group to contribute your insights and questions. Participation credit will also be earned through a series of in-class activities for which you will be graded and for which absences will further count against your participation grade.

**Four short papers (15% each).** Beginning Week 2, every Monday morning in class I will distribute a prompt for your short paper to be completed by the following Sunday. The prompts may ask you to engage the main themes of that week's readings, to reflect on what you learned from the weekly excursion, and to analyze primary sources. In particular, the prompts will ask you to consider the importance of both the local *and* global dimensions of the themes and topics we will be exploring.

**Final Self-Reflection (10%).** At the conclusion of the course, every student will be asked to complete a final self-reflection on their performance in the course.

## **Policies.**

### **Academic Honesty.**

All written material must be the original work of the student. Any words and ideas that are taken from the work of others must be cited appropriately. Any student found to be plagiarizing will face disciplinary action.

*"Academic Integrity is expected of everyone at UC San Diego. This means that you must be honest, fair, responsible, respectful, and trustworthy in all of your actions. Lying, cheating or any other forms of dishonesty will not be tolerated because they undermine learning and the University's ability to certify students' knowledge and abilities. Thus, any attempt to get, or help another get, a grade by cheating, lying or dishonesty will be reported to the Academic Integrity Office and will result sanctions. Sanctions can include an F in this class and suspension or dismissal from the University. So, think carefully before you act by asking yourself: a) is what I'm about to do or submit for credit an honest, fair, respectful, responsible & trustworthy representation of my knowledge and abilities at this time and, b) would my instructor approve of my action? You are ultimately the only person responsible for your behavior. So, if you are unsure, don't ask a friend—ask your instructor, instructional assistant, or the Academic Integrity Office. You can learn more about academic integrity at [academicintegrity.ucsd.edu](http://academicintegrity.ucsd.edu/)." (Source: Academic Integrity Office, 2018)*

For more information on University policies, please visit the Academic Integrity Office's website at: <http://academicintegrity.ucsd.edu/>

### **Deadlines.**

All deadlines are firm. Except in the case of medical or family emergency or religious observance, I give no individual extensions. If, due to such an emergency, you cannot meet a deadline, please contact me as soon as possible so that we may work out an alternative schedule. A late paper will be marked down by a third of a letter grade for every 24 hours that it is late.

**\*\*In general, more communication is better! If you are struggling in the course and need additional help, please let me or your TA know as soon as possible so we can get you the support you need.\*\***

**\*\*All readings will be available on the Canvas course site under each weekly module. You are not required to purchase any textbooks for this class. Dates on the Calendar indicate the day that the reading is due.**

**Please make sure you know how to access the VPN if you are off campus in order to access all online library resources.\*\***

## Calendar.

### Week 1.

#### Day 1. What is an epidemic? / Epidemics in the Classical World

*Required reading.*

Charles Rosenberg. "What is an epidemic? AIDS in Historical Perspective" *Daedalus* (Spring 1989) 118(2):1-17.

Keith Wailoo. "Spectacles of Difference: The Racial Scripting of Epidemic Disparities." *Bulletin of the Journal of the History of Medicine* (2020) 94:602-626.

*Primary sources:* Excerpts from Hippocrates. *Airs, Waters, Places*; Thucydides, "The Plague of Athens" from *The History of the Peloponnesian War*.

#### Day 2. The Black Death: Europe and the Ottoman World

*Required reading.*

Paul Slack. Responses to Plague in Early Modern Europe; The Implications of Public Health. *Social Research* 55,3 (Autumn 1988): 433-453.

Nukhet Varlike. "New Science and Old Sources: Why the Ottoman Experience of Plague Matters." Special Issue: "Pandemic Disease in the Medieval World: Rethinking the Black Death" *The Medieval Globe* 1,1 (2014).

*Possible guest lecture:* Dr. Petro Bouras-Vallianatos (Wellcome Lecturer in the History of Medicine, University of Edinburgh), expert in the history of medicine in the medieval Mediterranean, with a particular focus on Byzantium and on the cultural exchanges between the Christian and Islamic world.

*Week 1 Excursion:* Visit to the mass burial sites or "plague pits," dating from 1645 in the Burgh Muir and on Leith Links.

### Week 2.

#### Day 1. Colonial Contagions and Indigenous Resistance in the Americas.

*Required reading:*

David Jones. "Virgin Soils Revisited." *The William and Mary Quarterly* 60,4 (Oct. 2003): 703-742.

Paul Kelton. "Chapter 2: Response" (pp. 59-101) in *Cherokee Medicine, Colonial Germs: An Indigenous Nation's Fight against Smallpox, 1518-1824*. University of Oklahoma Press, 2015.

Nick Estes. "The Empire of All Maladies: Colonial contagions and Indigenous Resistance." *The Baffler* July 2020 (No. 52).

## **Day 2. The Cholera Century.**

*Required reading.*

Pamela K. Gilbert. *Cholera and Nation: Doctoring the Social Body in Victorian England*. State University of New York Press, 2008. (Excerpts)

Primary source: International Sanitary Convention, signed in Paris on December 3, 1903.

*Week 2 Excursion:* Edinburgh University Library Special Collections – Records of the Royal Public Dispensary of Edinburgh. The first public dispensary in Scotland dating from 1776, the dispensary reflects the convergence of medical care and charity relief that characterized the rise of state medicine in Britain in the 19<sup>th</sup> century.

## **Week 3.**

### **Day 1. Tropical medicine in the age of empire: the 1894 bubonic plague outbreak and the view from British-controlled Hong Kong.**

*Required reading.*

David Arnold. The Place of the Tropics in Western Medical ideas since 1750. *Tropical Medicine and International health*. 2,4 (April 1997): 303-313.

Robert Peckham. "Chapter 6: Matshed Laboratory: Colonies, Cultures and Bacteriology" in *Imperial Contagions, Medicine, Hygiene and Cultures of Planning in Asia*. Robert Peckham and David M. Pomfret, eds. Hong Kong University Press, 2003.

*Primary sources:* Patrick Manson, 'The necessity for special education in tropical medicine', *Lancet*, ii (1897), 842-5; Wu Lien-The, et al. *Plague: A Manual for Medical and Public Health Workers* (Shanghai: Weishengshu National Quarantine Service, 1936).

## **Day 2. Race, germs and urbanization in the time of the Spanish Flu.**

*Required reading.*

Ismail Rashid. Epidemics and Resistance in Colonial Sierra Leone during the First World War. *Canadian Journal of African Studies* (August 2012) 45,3: 415-436.

And please choose one of the following:

Samuel K. Roberts. "Chapter 2: The Rise of the City and the Decline of the Negro: The Historical Idea of Black Tuberculosis and the Politics of Color and Class." In *Infectious Fear: Politics, Disease and the Health Effects of Segregation*. University of North Carolina Press, 2009.

Or

Natalia Molina. "Chapter 2: Caught between discourses of disease, health and nation: public health attitudes towards Japanese and Mexican laborers in Progressive-Era Los Angeles" *Fit to be Citizens? Public Health and Race in Los Angeles, 1879-1939* (Berkeley: University of California Press, 2006);

*Week 3 Excursion:* Visit to the Royal Botanic Gardens. Founded as a physic garden to grow medicinal plants in 1670, the Royal Botanic Gardens – much like Kew Gardens outside London – played an important role in the growth of knowledge about tropical nature, botanic conservancy and tropical medicine.

## **Week 4.**

### **Day 1. Colonial pathologies: sleeping sickness in the British empire.**

*Required reading.*

K. A. Hoppe, "Lords of the Fly: Colonial Visions and Revisions of African Sleeping-Sickness Environments on Ugandan Lake Victoria, 1906-61," *Africa*, 67,1 (1997): 86-104.

Luise White. "Tsetse visions: Narratives of Blood and Bugs in Colonial Northern Rhodesia, 1931-1939." *Journal of African History* 36 (1995): 219-245.

Listen to podcast: "On Truth: Vampires" from the UCI Humanities Research Institute.

## **Day 2. Eradication and the end of epidemic disease?: international health in the postwar era**

*Required reading.*

Nancy Stepan. *Eradication: Ridding the world of disease forever?* (Chapters 1-3, pp. 6-103).

Randall Packard. Malaria dreams: Postwar visions of health and development in the third world. *Medical Anthropology* (1997) 1,3: 279-296.

*Primary source:* Alma Alta Declaration (1978).

*Possible guest lecture:* Dr. Devi Sridhar (Chair of Global Public Health, University of Edinburgh).

NOTE: *No excursion this week.*

## **Week 5.**

### **Session 1. HIV/AIDS and the movement for human rights.**

*Required reading.*

Lukas Engelmann. *Mapping AIDS: Visual Histories of an Enduring Epidemic.* (Global Health Histories.) Cambridge: Cambridge University Press, 2018. (Excerpts)

Allan Brandt. How AIDS invented Global Health. *New England Journal of Medicine.* 386,23 (2013): 2149-2152.

*Primary sources:* First U.S. case report of “AIDS,” available online: [http://www.cdc.gov/mmwr/Preview/mmwrhtml/june\\_5.htm](http://www.cdc.gov/mmwr/Preview/mmwrhtml/june_5.htm) and Larry Kramer, “1,200 and Counting,” *New York Native*, March 1982.

*Possible guest lecture:* Lukas Engelmann (Senior Lecturer - History and Sociology of Biomedicine, University of Edinburgh).

### **Day 2. (Re)emerging epidemic diseases and the future of public health**

*Required reading.*

Frank Snowden. Emerging and re-emerging diseases: a historical perspective. *Immunological Reviews* 225 (2008): 9-26.

Robert Peckham. “COVID-19 and the Anti-Lessons of History” *The Lancet*. Published online March 2, 2020.

P. Wenzel Geissler and Ruth J. Prince. "Layers of epidemy: Present pasts during the first weeks of COVID-19 in Western Kenya." *Centaurus* (pub online 27 July 2020).

*Week 5 Excursion:* Visit to HIV Scotland headquarters. In the mid-1980s, Edinburgh became known as the AIDS capital of Europe. HIV Scotland played a crucial role in organizing the response to the injection-drug driven epidemic, and students will learn about the organization's history as well as their activist work today.