Public health, its institutions and policies, focuses on disease, illness and death in a community or some other polity. In its modern form, public health has its origins in the rapid, massive urbanization, often associated with industrialization, that occurred in the US and on the continent of Europe during the 19th century. The population of these cities suffered devastating epidemics and a stunningly high endemic rate of disease. Public health practitioners developed tools to characterize the morbidity and mortality they perceived and mobilized state and private resources to decrease both. In their actions, as in their perceptions, these practitioners were deeply influenced by contemporary factors and forces. Beginning in the 19th century, this course will trace the history of public health through various phases, periods characterized by changing social organization, disease patterns, disease theories, populations of interest, professional training, cultural values and social expectations.

At the heart of the course are three questions to which you should continually return. First, what is the social basis for the existence of disease? Specifically, how does the organization of society at a particular point in time facilitate or create the conditions for the patterns of pathology and death found in its populations? Secondly, why does a society frame disease as it does and how does that social construction of disease change over time? Finally, what factors influence society’s response to perceived problems of disease and death? These may include, in addition to dominant scientific ideas, politics and the state, and responses to contemporary issues of economics, class, race, and gender.

Although primarily concerned with the social history of public health, the course will also refer to present public health issues. We will examine whether, and to what extent, they are heir to the public health past. A subsidiary question will be whether history, as a craft and methodology, can prove useful in elucidating those contemporary issues, and influence public health policy. Finally, we will consider to what extent present public health problems frame the questions historians of public health currently ask.

Assignments:

*The course consists of short lectures and seminar discussions. Students will be expected to have completed the readings assigned and be prepared to analyze them in class. Each week, students must submit a 2-3 page paper summarizing at least one of the assigned readings, critiquing the arguments of the author(s) and comparing the arguments to those of other writers assigned that week and previously. (35% of grade) All readings are on e-reserve, accessed through the Mina Rees Library. The course password is “histoppenhimer.”

*Each week, one student will be asked to provide a list of 5-7 questions for general discussion and to lead the seminar, along with the instructor. The student will meet with the instructor prior to class to review the proposed questions. (10% of grade)

All readings are on e-reserve, accessed through the Mina Rees Library. The course password is
“histoppenheimer.”

*Each student will write a historiographic or research essay of approximately 20 pages, preferably examining one of the class topics in greater depth. The topic should be chosen in consultation with the instructor by the 4th session of the semester. Students will make a presentation of their research during the 14th and 15th sessions. (5% of grade) The paper is due and must be handed in no later than the 15th class of the fall semester. (50% of grade)

**Sessions and Topics:**

**Week 1 Introduction**
*Required Reading:*

*Additional Suggested Reading:*

**Week 2 Urbanization, Industrialization and Population: Mobilizing for the Public’s Health**
*Required Reading:*

*Additional Suggested Reading:*

**Week 3 Disease in Places and Bodies: Miasma, Immorality and Poverty**
*Required Reading:*

Additional Suggested Reading:

Week 4 Emergence of the Germ Theory of Disease Transmission
Required Reading:
*Eyler J, Victorian Social Medicine, pp. 97-108.

Additional Suggested Reading:
Week 5 Public Health: Scientific and Organizational Complexity

Required Reading:

Additional Suggested Reading:
Wade Hampton Frost: The Age Selection of Mortality from Tuberculosis in Successive Decades, Papers, pp. 593-600.

Week 6 Tuberculosis and the Public Health Response: The Preventorium
(Guest Lecture: Professor Cindy Connolly)

Required Reading:
Week 7 Beyond Microbes: Economic and Political Determinants of Health in the 20th Century: Pellagra

Required Reading:

Additional Suggested Reading:

Week 8 Disease, Ethnicity, Class, Gender and Germs

Required Reading:

Additional Suggested Reading:
Week 9 Which Public’s Health? Race, Racism, and the Ethical Implications

Required Reading:
* Selected Letters between the United States Public Health Service, the Macon County Health Department, and the Tuskegee Institute, 1932-1972, pp. 73-115.

Additional Suggested Reading:
J.C. Fletcher: A Case Study in Historical Relativism: The Tuskegee (Public Health Service) Syphilis Study, pp. 276-298.

Week 10 The Apparent Epidemiologic Transition and Chronic Disease Public Health: Lung Cancer

Required Reading:
Additional Suggested Reading:


Week 11 The Apparent Epidemiologic Transition and Chronic Disease Public Health: Heart Disease

Required Reading:


Additional Suggested Reading:


Week 12 The AIDS Challenge to the Public Health Status Quo

Required Reading:


267-300.


Select 3 articles:


Centers for Disease Control and Prevention, 1993 Revised Classification System for HIV Infection and Expanded Surveillance Case Definition for AIDS Among Adolescents and Adults, *MMWR* (December 18, 1992) 41(RR-17). Available at http://www.cdc.gov/mmwr/preview/mmwrhtml/00018871.htm

**Additional Suggested Reading:**


**Weeks 13 and 14 Student presentations based on research paper assignment.**