7.1 Module Overview									
Module Number		Module Title	Healing the People: History of Public Health and Medicine, 1800-2023						
Stage of Principal Programme			3	Semester	1	Duration. (Weeks F/T)	12	ECTS	5
Mandatory / Elective (M/E)	E Core	Hours of Learner Effort / Week	2						
Analysis of required hours of learning effort									
Teaching and Learning Modalities				√if relevant to this module		Approx. proportion of total (hours)			
Contact Hour	Contact Hours								
In person face-to-face				✓		24			
Synchronous									
Indirect/Non-	Indirect/Non-Contact Hours								
Asynchronous	Asynchronous								
Work Based	Work Based								
Other:									
Independent self- direct reading			✓		47				
Research, preparation and completion of assessment			✓		54				
Exam Preparation									
Total 125									

Pre-Requisite Module, i	f any. Module # and Title	N/A			
Co-Requisite Module, if	any. Module # and Title	N/A			
Maximum number of le	arners per instance of the module	120			
Specification of the qualifications (academic, pedagogical and professional/occupational) and experience					
required of staff working in this module.					
Role e.g.,					
Tutor, Mentor,	Qualifications & experien	ce required	Staff - Learner Ratio		
Lecturer, Research	X:Y				
Supervisor, etc.					
Lecturer	A minimum level 9 qualification in History or closely		1:120		
	cognate area				

Assessment Techniques – percentage contribution					
Continuous	100%	Proctored Exam – in		Practical Skills	
Assessment		person		Based	
Project		Proctored Exam -		Work Based	
		online			
Capstone (Y/N)?	Υ	If Yes, describe	The capstone is a large piece of assessment		
			that allows the learner to demonstrate the		
			range of skills and knowledge they have		
			developed in the subject over the course of		
			the programme. It provides scope for the		
			learner to showcase their own research and		
			ideas on the topic.		

7.2 Minimum Intended Module Learning Outcomes (MIMLOs)					
MIMLO On com	pletion of this module a learner will be able to:	Related MIPLO #			
1.	Assess how measures to improve the health of the people developed at national and international level over time, from 1800-2020, in the context of prevailing environmental and political decisions, and contemporary scientific knowledge and practice.	1, 2, 3, 4, 5			
2.	Learn how to interpret primary sources and formulate arguments based on the existing literature and primary sources on this era.	1, 2, 3, 4,5			
3.	Demonstrate knowledge of key historical changes in the field of public health from scientific, political, social, environmental and cultural perspectives.	1, 2, 3, 4, 5, 8			
4.	Differentiate between regional problems and management of health, in the context of the evolution of 19^{th} and 20^{th} century Europe, North America, and their relationship with the wider world.	1, 2, 3, 4, 5, 8			
5.	Critically assess the new ideas of this field in this era, within the historical context in which they were written, using both secondary and primary sources, and learn how to depict these in graphs, diagrams and tables	1, 2, 3, 4, 5, 7, 8			

7.3 Indicative Module Content, Organisation and Structure

How we manage – or fail to manage – health impacts on everyone in society. In the 19th century epidemics swept around a world more strongly connected by empire, modernised shipping, and the development of railways and canals. Public health came to the fore as a means of controlling the ever more rapid spread of epidemic and endemic disease, and public health doctors like Dublin's Sir Charles Cameron became media superstars. They raised awareness of social determinants of health, a critical factor in improving the health of the general population, but especially the poor and underprivileged. Using epidemiology, death certification by disease, increased public health service, and the 'new' bacteriological and hygiene methods, nations finally began to get control over infectious diseases which contributed to death rates in North America and Europe that were double what they are today. The collecting of national death-by-disease certification and statistics enabled wider enabled effective international cooperation, from 19th century sanitary conferences to the International Office of Public Hygiene, International Labour Organisation League of Nations, and the WHO. In the early 1900s, most countries in the 'global north' went through the epidemiological transition, greatly reducing death from infectious disease, using knowledge from the 19th century bacteriologists. International monitoring of health and death by disease become more and more developed. As the 20th century progressed, vaccination and antibiotics helped to make people healthier than ever before in human history, and health focus moved from infectious disease to chronic conditions and cancer. But problem areas remain: malarial countries, 'third world' countries, and poor or otherwise disadvantaged populations, such as the Sami in Scandinavia, Irish Travellers, First Nations in North America, Māori, Australian aborigines and other indigenous populations. Learners will be introduced to the issues and attitudes these groups face. The threat of a new global pandemic, once thought to be a thing of the past, remains ever present.

This module will introduce learners to the role and practice of public health, exploring how it impacts on our lives as citizens and workers – more evident since Covid-19. It looks at the evolution of public health in the context of 19th and 20th century growing modernity, with its environmental crises and problems, including epidemics, famine and increased urbanisation. Learners will be introduced to dominant theories of disease, and new scientific thinking, such as the key emergence of bacteriology and germ theory in the late 19th century, and the sanitary movement.

It explores key developments in making people healthier, including the development of international cooperation on public health from the 19th century to the present. It will have both an international and national focus, showing how the particular fits into the general.

Each week learners will be presented with a new topic and a new issue to problem solve, in a historic context. Learners will earn how to read health and morbidity statistics, public health publications and do microstudies, learning how to express these statistics in graphs and charts (digital skills objective). The problem solving could include, for example, how death statistics for a specific disease (like TB) were reduced in a specific country in a specific decade.

The module builds on what the learners will have learned in Revolutions in the Atlantic World, Nation States, and Europe and America in the Post War World, and permits them to examine in greater detail ideas introduced in those modules.

The systematic structure of the module helps to form learner knowledge and opinion. The two-hour weekly lectures will provide the knowledge forum and information on primary sources. Learners will receive readings on Moodle prior to attending lectures so their knowledge-base is broadened and they can pose informed questions or offer informed contributions. Having attended lectures, read the required material, conducted research and displayed comprehension and analytical skills in written and verbal assignments, learners will have covered all the learning outcomes of this module. Microsoft excel will be used to express health statistics in tables, graphs and diagrams.

7.4 Work-based learning and practice-placement (if applicable)

N/A

7.5 Specific module resources required (if applicable)

N/A

7.6 Application of programme teaching, learning and assessment strategies to this module

The teaching and learning strategy utilised for this module contributes to the development of the Carlow College graduate attributes in a number of ways. They will learn how identify and develop a research topic, asking key questions of the evidence. They will acquire skills to interpret and analyse health reports, statistics and secondary sources and health data. In this way they will enhancing problem-solving and communication skills.

Learners will be required to complete one assignment on this module. They will undertake the research and writing of a 3,000-4,000 word research essay based on relevant primary sources, supplementing their work with secondary readings. This will demonstrate that the learner can specialise in primary research, and present their findings in conjunction with contemporary academic opinion. The research essay sources will include accessing and evaluating digital source material, and learners will be required to do two graphs to illustrate an aspect of their work, thus enhancing their digital skills. Full instruction will be given on evaluating using statistics to present their research in these graphs.

Moodle will be used to encourage engagement with Technology Enhanced Learning (TLE). Lecturers will upload notes from lectures to enable learners to follow progress and they will supplement reading lists with relevant journal articles and online primary sources links. The latter will allow learners to have direct links to sources relevant to course work.

Written Assessment

Learners will submit a 3,000 – 4,000 word written summative assessment attracting a mark of 100%.

- Content
 - Learners are expected: to demonstrate an excellent command of concepts and demonstrate some originality of thought; address the central issues surrounding the topic assigned and present those issues in a coherent manner.
- Argument

- Learners are expected: to develop a coherent argument that demonstrates critical and analytical thinking; demonstrate an ability to respond to counter arguments posed by the other debate team.
- Primary Sources
 - Learners are expected to examine and utilise primary source documents related to the topic assigned; integrate primary source material into their overall argument.
- Secondary Sources
 - Learners are expected to examine and utilise secondary sources related to the topic assigned; demonstrate an excellent command of the secondary literature; demonstrate the ability to integrate these sources into the debate so that their argument is further solidified.
 - o Learners are expected to present an argument in an articulate and analytical manner.
 - Upon completion of the essay, all learners should have demonstrated all the learning outcomes for this module.

7.7 Summative Assessment Strategy for this module					
MIMLOs	Technique(s)	Weighting			
1-5	Major Essay : learners will submit a 3000- 4000 word research essay, on a disease control or public health history topic, using a minimum of two appropriate graphs and tables.	100%			

7.8 Sample Assessment Materials

Sample Essays:

This research essay, of approximately 3000-4000 words, will be a detailed critical analysis of an agreed key question or theme related to public health history. Learners must present their analysis in a clear and coherent way, in accordance with the standards and conventions of academic writing.

Learners are encouraged to develop their own research question. This might relate to a topic in lectures which you found interesting, or to your broader historical interests. Learners are encouraged to use online primary sources, and to include a minimum of two graphs in their work. Sample topics:

- 1. Using historical abstracts of death from the Irish Central Statistics Office (CSO.ie) and the 1901 Census, discuss the impact of infectious disease generally, or any one infectious disease in particular, on Irish health between 1900 and 1910. You may adapt a regional approach in your answer.
- 2. Why was disease such a major problem in the 19th-century city, and how successfully was the problem tackled? Draw on reports of city medical officers of health and statistics in your essay.
- 3. Using WHO reports, the reading lists, and other appropriate sources, examine the measures taken by the WHO to control measles globally between 1980 and 2000.
- 4. Explore the impact of vaccination on any one disease during the course of the 20th century, using national death statistics, health reports, and any other statistical source. You may choose from any nation which has accessible death by disease statistics.
- 5. Write about the impetus for and development of the 19th century international sanitary conferences.

Marking of assessments will be in line with the Marking Assessment Guidelines as outlined in Section 3.3 of the College's Regulations in Relation to Assessment and Standards unless otherwise indicated.

7.9 Indicative reading lists and other information resources

Indicative Core Readings

Duffin, Jacalyn, *History of Medicine: A Scandalously Short Introduction*, 3rd edn (Toronto: University of Toronto Press, 2021).

Geary, Laurence, Medicine and charity in Ireland, 1718-1851 (Dublin: University College Dublin Press, 2004).

Harrison, M., *Disease and the Modern World: 1500 to the Present Day* (Cambridge: Cambridge University Press, 2004).

Hays, J., *The Burden of Disease: Epidemics and Human Response in Western History* (New Brunswick: Rutgers University Press, 1998).

Jackson, M. (ed.), Routledge History of Disease (London: Routledge, 2016).

Johnson, Steve, *The Ghost Map: The Story of London's Most Terrifying Epidemic—and How It Changed Science, Cities, and the Modern World* (London: Penguin, 2008.

Jordanova, L., 'The Social Construction of Medical Knowledge', *Social History of Medicine*, 8:3 (September 1995), pp. 361-81.

Miller, I., Medical History (Basingstoke: Palgrave Macmillan, 2018).

Milne, I, Stacking the Coffins, Influenza, War and Revolution in Ireland, 1918-19 (Manchester: Manchester University Press, 2018).

Rosenberg, C., Framing Disease: Studies in Cultural History (New Brunswick: Rutgers University Press, 1992).

Rosenberg, C., *Explaining Epidemics and other Studies in the History of Medicine* (Cambridge: Cambridge University Press, 1992).

Sontag, S., Illness as Metaphor (New York: Penguin, 1978).

Shah, N., Contagious Divides: Epidemics and Race in San Francisco's Chinatown (Berkeley: University of California Press, 2001), chapter 1.

Online Databases and Primary Sources:

Centers for Disease Control and World Health Organisation historic reports and data (online).

Irish Registrar General Annual Reports on Births, Deaths and Marriages (online at Historical Abstracts CSO.ie), and other European and North American health historical abstracts (online).

Wellcome Library online resources (medical officer of health reports for towns and cities in Britain and Ireland, and other relevant data).

EBSCO