**Authorized Bodies: Sociocultural Health**

**Description:**
This course asks how logics present in the mid-nineteenth century have progressed, changed and continue to exist today in our understandings of what a healthy society and population is. The Course is divided into four sections that focus on key aspects of this system of knowledge and practice divided into two halves of the semester. The first half semester (sections 1&2) focuses on the history of the discipline and critiques of bias that have been levied against practitioners since the founding of public health. The second half semester (sections 3 &4) maintains that focus and applies it to the contemporary scientific forms of practice that may be growing to dominance, particularly the influence of genetics and biotechnology. The whole course serves as an introduction to the history of public health focused on the forms of expertise and knowledge involved.

Course work will include weekly annotation writing comparing methodological and theoretical perspective, location and temporal variation, as well as academic tradition of the scholars studied. A longer Cumulative paper at the end of each of the course sections that ask students to focus on one theme or topic within the conceptual framing of the four sections, respectively: Making the discipline, Contesting populations and exploitation, changing understanding of health, and contemporary issues.

A final examination will be based on full course readings.  Students will be asked to prepare two outlines selected from four topics. These outlines should be workable and represent original concepts for a paper. This exam is open book to the notes and annotations prepared by the student over the semester allowing greater verisimilitude to actual scholarly writing.

Primary Texts frame the whole course:

Adele E. Clarke, Et Al.2010. *Biomedicalization: Technoscience, Health, and Illness in the U.S.*

Dorothy Porter. 1999. *Health Civilization and the state: A history of public health from ancient to modern times*

**Course Outline:**

**SECTION 1 - Introduction -Making “public” health:**

John Snow serves as a starting figure in this course, famously identifying the source of a cholera outbreak in London in 1854, he served as a key popularizer of the need for public and population based medical science. It is in part his overlapping figure in the study of the science of epidemiology and its allied field of practice in public health, and the suggestion of their development that makes him interesting. Historical figures like John Snow (<http://www.ph.ucla.edu/epi/snow.html>) , Francis Galton, Margaret Sanger, and Louis Pasteur.

Examines the development of the concept of health as a governable object of political and medical control we look at the formation of the concept of a public as opposed to personal health, and the development of tools and institutions focusing on this new unit of health. Topics focus on the growth of Foucault’s governmentality of “Population”, the development of statistical logics connected to the Eugenics Movement, and the institutionalization of scientific medicine and public health.

Selections From:
Selections focusing on the concepts of discipline, discourse and Population in - Michel Foucault

( Madness and civilization; Security Territory Population; Society must be defended)
The Pasteurization of France(1993) – Bruno Latour

The Social Transformation of American Medicine (1984) – Paul Starr

**SECTION 2** - **Marginality, Inclusion and Public Health:**

The history of public health offers several of the most troubling and famous controversies in US race and class relations: the Tuskegee syphilis experiments, eugenic sterilization, application of public health measures against hepatitis and genetic disorders like sickle cell, or addiction research.

Since the founding of public health, tension has existed between the growth of belief in the ethical demand for public health, the growth of ‘human rights’ discourse and the practical/political argument that sanitary and public health laws correct for the pestilence of poverty within a society. The question of rights and access, along with technical questions about how populations are defined and appropriate policy and practice have led to criticism of marginalization, manipulation and abuse throughout the history of public health. In some poor areas of the United States and overseas in developing countries contemporary health aid work still struggles against this history. Filling in the historical survey begun in section 1, here controversial and famous moments are interrogated to show both their lasting importance for the contingent development of public health, and for their importance as ongoing lessons in bioethical thinking.

Tuskegee Truths (2000)-Susan M Reverby ,Ed.
Colonial Pathologies: American Tropical Medicine Race and Hygiene in the Philippines (2006) -Warwick Anderson

Subjected to Science: Human Experimentation in America before the second world war (1997)- Susan Lederer

**SECTION 3 - Changing Understandings of “Health”:**

                Having formed an outline of the history of public health as a medical practice and discipline, this section focuses on its development in conversation with and influencing the broader culture via the ongoing conversation about health, illness and appropriate behavior. Here students are asked to expand their view to the broader cultural definitions, movements and practices of health.  They are given examples of change in the way health, and the practices about health have changed and look at the changes of the discipline of public health as it has responded to or failed to respond to change.

Vita: Life in a zone of social abandonment (2005) – Joao Biehl
Bipolar Expeditions (2009) – Emily Martin
Into our own Hands: the Women’s health movement in the United States 1969-1990 (2002) – Sandra Morgan

**SECTION 4 - Making the “Science” of Health Public:**

The growth of genetics as an important discourse and system of scientific knowledge has begun to impact both new and long standing issues of public health such as GMOs, personalized/genetic medicine. These are not limited to but may include discussion of smoking, medical experimentation, Healthcare policy, alternative/complimentery medicine.

The Troubled Dream of Genetic Medicine: Ethnicity and Innovation in Tay Sachs, Cystic Fibrosis, and Sickle Cell Disease (2006) -Keith Wailoo and Stephen Pemberton, Eds.
Drawing Blood: Technology and Disease Identity in Twentieth Century America (1999)- Keith Wailoo