

# Health, risk and history

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This seminar reviews modernist notions of 'risk society' and how and why they have come to pervade public health discourse and practice. We begin with interpretations of modernity and how risk society emerged from these. We then move on to consider the ways in which health is intimately connected to the formulation of risk, before tackling specific issues on a weekly basis.

This is a reading seminar and the full participation of students is essential. You will be expected to come to each class **at the very least** having read the required readings and be prepared to discuss them. Study questions are provided and these will give us a starting point for discussion. Additional materials such as data, policy documents, government publications and images, will be introduced during classes to stimulate and inform our debates.

## Times and location

2.00pm-4.50pm Tuesdays, Ames 219

## Timetable

<i>Week 1</i>	01 Feb 2005	<b>Introduction</b>
<i>Week 2</i>	08 Feb 2005	<b>Exploring modernity</b>
<i>Week 3</i>	15 Feb 2005	<b>Student prep</b>
<i>Week 4</i>	22 Feb 2005	<b>Risk society</b>
<i>Week 5</i>	01 Mar 2005	<b>Modernity, risk and health</b>
<i>Week 6</i>	08 Mar 2005	<b>Contagion</b>
<i>Week 7</i>	21 Mar 2005	<b>Occupational health and risk</b>
<i>Week 8</i>	29 Mar 2005	<b>Genetics and risk (Dr Nathaniel Comfort)</b>
<i>Week 9</i>	05 Apr 2005	<b>Student presentations on occupational health</b>
<i>Week 10</i>	12 Apr 2005	<b>Environment and health</b>
<i>Week 11</i>	19 Apr 2005	<b>Risky food</b>
<i>Week 12</i>	26 Apr 2005	<b>Inventing teenage motherhood</b>
<i>Week 13</i>	03 May 2005	<b>Sexually transmitted diseases</b>

## Assessment schedule

There are three components to the assessment for this course:

**1. Group presentation Week 9: 25 per cent.** Attendance and participation in student presentations on occupational health, industrial processes and risk is a course requirement (Week 9, 05 April 2005). Students will work in small groups towards a presentation on a topic decided in class during Week 7. While some additional readings on each topic will be distributed in class, this presentation is primarily an exercise to hone your research, team-work and presentational skills. You will be notified of the assessment criteria for presentations in week 7.

**2. Class participation: 5 per cent.** Participation in the weekly meetings is an assessed part of the course. You are expected to: contribute to small group discussions; to ask questions of the instructor and your fellow students; and make comments about the weekly readings.

**3. Written paper: 70 per cent.** Your individual paper (no more than 10 typed pages) will be based on the group presentation on occupational health in Week 9. The title will be agreed with me by the end of Week 9. Individual appointments will be made with me to discuss drafts before the final submission. Final submission will be to me in class on **03 May 2005**.

## Core texts

It is recommended that you purchase the following books:

Deborah Lupton. 1999. *Risk*. London and New York. Routledge. Paperback.  
ISBN 0415183340. \$19.95.

Ulrich Beck. 1992. *Risk society: towards a new modernity*. London. Sage.  
Paperback. ISBN 0803983468. \$39.95

Anthony Giddens. 1990. *The consequences of modernity*. Stanford, California.  
Stanford University Press. ISBN 0804718911. \$17.95

The journal *Health, Risk and Society* is available online via the JHU library catalog and is well worth browsing. While it rarely carries historical articles, a number of papers deal with theoretical aspects of 'risk society' (such as trust, expertise) as they relate to health, and a number of papers touch on the specific topics dealt with in this course.

week

1

## Introduction

This class will encourage you to begin to think about the notion of risk and how contemporary society thinks about it, deploys it and modifies it. You will be introduced to the theoretical foundations from which ideas about 'risk society' have developed. By using examples from contemporary health issues, we will begin to consider how risk might be considered from an historical perspective.

There are no required readings this week. Students will be asked to assess and discuss documents and images in small groups.

2

## Exploring modernity

The concept of modernity is central to the notion of risk society. This session explores the complex and multiple meanings of modernity, from its origins in the scientific rationality of the Enlightenment to the emergence of post-modernism. The purpose here is not for you to arrive at a concrete definition of 'modernity', but to understand the historical sociological underpinnings of how the idea of a 'risk society' could emerge.

Required readings

Hamilton, Peter. 1996. The Enlightenment and the birth of Social Science. In Stuart Hall, David Held, Don Hubert and Kenneth Thompson (eds.). *Modernity: an introduction to modern societies*. Oxford and Cambridge, Mass.: Blackwell, pp. 19-54.

Giddens, Anthony. 1990. *The consequences of modernity*. Stanford, California: Stanford University Press. Especially Chapter 1.

Background reading

- Black, J. 1990. *Eighteenth century Europe 1700-1789*. London: MacMillan.
- Gay, Peter. 1973. *The Enlightenment: an interpretation Vols 1 and 2*. New York: Knopf.
- Harvey, David. 1989. *The condition of postmodernity: An enquiry into the origins of cultural change*. Oxford and New York: Blackwell. Chapter 2.
- Porter, Roy. 2000. *Enlightenment: Britain and the creation of the modern world*. London and New York: Penguin Books.
- Hall, Stuart. 1996. Introduction. In Stuart Hall, David Held, Don Hubert and Kenneth Thompson (eds.). *Modernity: an introduction to modern societies*. Oxford and Cambridge, Mass.: Blackwell, pp. 3-18.

Study questions

What criteria define the society in which we live? (or, what makes a 'traditional' society and what makes a 'modern' one?) Do these criteria change over time? What do you understand by the Enlightenment? How are time and place inter-related and how might this relationship be modified?



## No class

Preparation for brief presentation on Risk Society in Week 4.

week

4

## Risk society

For most commentators, the notion of risk society is inseparable from that of modernity. This week we move from considering modernity in general to assessing specific aspects of it that gave rise to risk society.

### Required readings

Beck, Ulrich. 1992. *Risk society: towards a new modernity?* London: Sage. Part I, pp. 19-84.

Lupton, Deborah. 1999. *Risk*. London and New York: Routledge. Chapters 2 and 3.

Rothstein, William G. 2003. Public health and the risk factor. A history of an uneven medical revolution. Rochester: University of Rochester Press. Part I, pp. 9-74.

### Background reading

Adams, John. 1995. *Risk*. London and Bristol P.A.: UCL Press.

Caplan, Pat (ed.). 2000. *Risk revisited*. London: Pluto Press, pp.1-28, 'Introduction'.

Douglas, Mary. 1992. *Risk and blame: essays in cultural theory*. London: Routledge.

Lash, S. 2000. Risk culture. In Adam, Barbara, Beck, Ulrich, and van Loon, Joost (eds.). *The risk society and beyond: critical issues for social theory*. London and Thousand Oaks: Sage, pp. 47-62.

### Study questions

So, what exactly is the 'risk society'? In what sense is the notion of risk society a 'new' modernity? What does the notion of reflexive modernity add to our comprehension of the risk society? How and why has 'risk' been differentiated from 'fear', 'danger', 'uncertainty' and 'hazard'? Are the ideals of the Enlightenment compatible with the defining themes of the 'risk society'?

week

5

## Modernity, risk and health

According to Petersen and Lupton (1996), 'an elaborate body of theory, based upon the science of epidemiology, has been developed to explain associations between health outcomes and predisposing (that is, "risk") factors'. (p. 19). This session will consider one particular aspect of public health, namely health promotion, to illustrate the importance of risk to the regulation of health in contemporary society.

### Required readings

- Lupton, Deborah. 1995. *The imperative of health: public health and the regulated body*. London: Sage. Chapter 3, 'Taming uncertainty: risk discourse and diagnostic testing', pp. 77-105.
- Petersen, Alan. 1996. 'Risk and the regulated self: the discourse of health promotion as politics of uncertainty'. *Australian and New Zealand Journal of Sociology*, **32:1**, 44-57.

### Background reading

- Castel, R. 1991. From dangerousness to risk. In G. Burchell, C. Gordon and P. Miller (eds.). *The Foucault effect: studies in governmentality*. Hemel Hempstead, Harvester Wheatsheaf.
- Gabe, Jonathan (ed.). 1995. *Medicine, health and risk*. London: Blackwell.
- Petersen, Alan and Lupton, Deborah. 1996. *The new public health: health and self in the age of risk*. London and Thousand Oaks C.A.: Sage, Chapter 1, 'The new public health: a new morality?', pp 1-26.

### Study questions

Why is health so central to ideas about risk society? How has the concept of risk influenced research into health issues? Where does authority lie in assessing health risks? How is risk bound up with the regulation of populations for health purposes?

# Contagion

In addition to exacting an individual toll in terms of illness and death, infectious diseases represent a threat to the political and economic functioning of society. There are both continuities and shifts in the ways in which society protects itself from the ravages of disease over time. This session will explore whether organized attempts at securing public health can be evaluated in 'traditional' or 'modern' terms and whether the idea of risk society is useful to an understanding of how responses to infection are shaped.

## Required readings

- Bashford, Alison and Nugent, Maria. 2001. Leprosy and the management of race, sexuality and nation in tropical Australia. In Alison Bashford and Claire Hooker (eds.), *Contagion: historical and cultural studies*. London: Routledge, pp. 106-128.
- Carmichael, Ann G. 1991. Contagion theory and contagion practice in Fifteenth-Century Milan. *Renaissance Quarterly*, **44:2**, 213-256.
- Hordern, Peregrine. 2000. Ritual and public health in the early medieval city. In Sally Sheard and Helen Power (eds.), *Body and city: histories of urban public health*. Aldershot, England: Ashgate, pp. 17-40.

## Background reading

- Eyler, John. 1979. *Victorian social medicine. The ideas and methods of William Farr*. Baltimore: Johns Hopkins University Press.
- Riley, James C. 1987. *The eighteenth-century campaign to avoid disease*. Basingstoke: MacMillan.
- Skolbekken, J-A. 1995. The risk epidemic in medical journals. *Social Science and Medicine*, **40:3**, 291-305. Available online via JHU Library Catalogue.

## Study questions

What forms of disease prevention might you consider to be 'traditional' and what forms might you consider to be 'modern'? Do policies of disease prevention serve to marginalize specific groups in the population? How exactly can/does this marginalization take place, and how is it related to risk?

week

7

## Occupational health and risk

It is now well-known that certain occupations, some industrial processes, and the handling of some industrial materials, carry specific health risks. While the rise of urban industrial society is one obvious feature of modernization that is associated with the emergence of such risks, it is important to understand how and why these risks become 'knowable' and what conflicts of interest arise when they do. Identifying and quantifying occupational and industrial health risks was, and is, an important component of modern industrial society. In this particular class, we consider gender, employment and occupation in Victorian Britain.

### Required readings

- Harrison, Barbara. 1995. The politics of occupational ill-health in late nineteenth century Britain: the case of the match making industry. *Sociology of Health and Illness*, **17:1**, 20-41.
- Holdsworth, Clare. 1998. Dr Thomas Arlidge and Victorian occupational medicine. *Medical History*, **42:4**, 458-475.
- Levine-Clark, Marjorie. 2004. *Beyond the reproductive body: the politics of women's health and work in Early Victorian England*, Chapter 8, "'She continued at her work": negotiating employment and health', pp. 150-175.

### Background reading

- Bartrip, Peter W. J. 2002. *The Home Office and the dangerous trades: regulating occupational disease in Victorian and Edwardian Britain*. Amsterdam and New York: Rodopi.
- Harrison, Barbara. 1996. *Not only the 'dangerous trades': women's work and health in Britain, 1880-1914*. London and Bristol, P.A.: Taylor & Francis.
- Reich, Michael R., and Goldman, Rose H. 1984. Italian occupational health: concepts, conflicts, implications. *American Journal of Public Health*, **74**, 1031-1041.
- Weindling, Paul (ed.). 1986. *The social history of occupational health*. London and Dover N.H.: Croom Helm.



Study questions

What sets of conflicts arise when the risks of occupational and industrial health are revealed? What is the role of professional expertise in defining and quantifying occupational health risks? What common and unique features emerge when you compare the development of occupational health across time and space?



## Genetics and risk

Dr Nathaniel Comfort, Institute of the History of Medicine.

Required readings

- Burke, Wylie, Pinsky, Linda A. and Press, Nancy A. 2001. Categorizing genetic tests to identify their ethical, legal and social implications. *American Journal of Medical Ethics*, **106**, 233-240.
- Harper, Peter S. et al. 2004. Genetic testing and Huntington's disease: issues of employment. *The Lancet Neurology*, **3**, 249-252.
- Holtzman, Neil A., Leonard, Claire O. and Farfel, Mark R. 1981. Issues in antenatal and neonatal screening and surveillance for hereditary and congenital disorders. *Annual Review of Public Health*, **2**, 219-251.
- Kenna, George A., McGeary, John E. and Swift, Robert M. 2004. Pharmacotherapy, pharmacogenomics, and the future of alcohol dependence treatment, part 1. *American Journal of Health Systems Pharmaceuticals*, **61**, 2272-2279.
- Press, Nancy A., Yasui, Yutaka, Reynolds, Susan, Durfy, Sharon J. and Burke, Wylie. 2001. Women's interest in genetic testing for breast cancer susceptibility may be based on unrealistic expectations. *American Journal of Medical Genetics*, **99**, 99-110.

Study questions

The central theme in our discussion will be the differences between testing or screening for simple (single-gene, highly penetrant) genetic diseases and genomic profiling for complex diseases, which involve several to many genes and multiple environmental influences. What are the notions of risk attached to each of these? How much difference does it make whether a single gene confers a near-100% chance of getting a disease or a much smaller chance? Is this a

difference of degree or of kind? We will also discuss issues such as medical risk versus psychological risk.



## Student presentations on occupational health topics

Oral and visual presentations in small groups on a selected issue in occupational health and risk. Details and supplemental references will be announced in Week 7.



## Environment and health

Not only do the twin processes of urbanization and industrialization compromise the natural environment, industrial processes and modern technologies commonly produce waste products that result in specific health threats and hazards. But the nature and scale of environmental risks are not uniform and are subject to debate. Historical examples of regulation serve to illustrate tensions between government, business and professional expertise.

#### Required readings

- Petersen, Alan and Lupton, Deborah. 1996. *The new public health: health and self in the age of risk*. London and Thousand Oaks C.A.: Sage, Chapter 4, 'Risk discourse and the environment', pp. 89-120.
- Rosner, David, Markowitz, Gerald. 1985. A 'gift of god'? the public health controversy over leaded gasoline during the 1920s. *American Journal of Public Health*, **75**, 344-352.
- Tarr, Joel, Yosie, Terrie and McCurley, James. 1980. Disputes over water quality policy: professional cultures in conflict, 1900-1917. *American Journal of Public Health*, **70**, 427-35.

#### Background reading

- Douglas, Mary. 1966. *Purity and danger: an analysis of concepts of pollution and taboo*. London: Routledge and Kegan Paul.
- Douglas, Mary and Wildavsky, A. 1982. *Risk and culture: an essay on the selection of technological and environmental dangers*. Berkeley, California: University of California Press.
- Tarr, Joel A. 1996. *The search for the ultimate sink: urban pollution in historical perspective*. Arkon, Ohio: University of Arkon Press.

#### Study questions

What conflicts arise over the setting of standards in environmental quality? What criteria should be used in setting such standards? Should the geography of risk be an important consideration? What level of environmental risk should society be prepared to accept for industrial progress?



## Risky foods

From salmonella to BSE (mad cow disease), almost daily in the 1980s and 1990s, the popular press bombarded its readers with one food hygiene scare after another. Some of these stories had basis in 'scientific' fact, some didn't. This class considers how and why food safety came to be an important issue in modern society.

#### Required readings

Hardy, Anne. 1999. Food, hygiene and the laboratory. A short history of food poisoning in Britain, circa 1850-1950. *Social History of Medicine*, **12:2**, 293-311.

Rozenkrantz, Barbara. 1985. The trouble with bovine tuberculosis. *Bulletin of the History of Medicine*, **54**, 155-175.

Waddington, Keir. 2001. The science of cows: tuberculosis, research and the state in the United Kingdom, 189-1914. *History of Science*, **39:3**, 355-381.

#### Background reading

Kroll-Smith, Steve, Brown, Phil, and Gunter, Valerie J. (eds.). 2000. *Illness and the environment: a reader in contested medicine*. New York: New York University Press.

Tomes, Nancy. 1998. *The gospel of germs: men, women and the microbe in American life*. Cambridge, Mass: Harvard University Press. Chapter 7, 'Antisepticonscious America', pp. 157-82.

#### Study questions

What are the characteristics of industrial society that render the eating of food a potentially dangerous activity? What is the role of scientific authority and expertise in defining health risks from food? How is scientific authority legitimated (institutions, organizations, bodies of knowledge)? How do animals mediate health risks?



## Inventing teenage motherhood

The risks that have been formulated for teenage pregnancy and motherhood have many dimensions. For example, much sociological research has sought to identify which teenage women are at high risk of becoming pregnant.

Alternatively, medical studies have researched the links between teenage pregnancy and birth outcomes: that is, whether teenage pregnancies are 'riskier' for the health of the infant and the mother than pregnancies at other ages.

However, the category 'teenage pregnancy' is a relatively new term that has been interpreted as a scientific wording to replace moralistic and prejudicial labels such as 'single parent', 'lone mother' and 'unwed mother' that were more commonly used in the post World War II era.

Required readings

- Arney, W.R. and Bergen, B.J. Power and visibility: the invention of teenage pregnancy. *Social Science and Medicine*. 1984, **18**, 11-19.
- Kiernan, K.E. 1997. Becoming a young parent: a longitudinal study of associated risk factors. *British Journal of Sociology*, **48**, 406-28.
- Wong, J. 1997. The "making" of teenage pregnancy. *International Studies in the Philosophy of Science*, **11**, 273-88.

Background reading

- Coleman, Lester. 2002. New opportunities for reducing the risk from teenage pregnancy—what is the evidence base for tackling risk behaviours in combination? *Health, Risk and Society*, **4(1)**, 77-93 (online via JHU library catalog).
- Luker, Kristin. 1996. *Dubious conceptions: the politics of teenage pregnancy*. Cambridge, Mass.: Harvard University Press.
- Nathanson, Constance. 1991. *Dangerous passage: the social control of sexuality in women's adolescence*. Philadelphia: Temple University Press.
- Weir, Lorna. 1996. Recent developments in the government of pregnancy. *Economy and Society*, **25(3)**, 372-92.

Study questions

What are the specific health risks of teenage pregnancy? Should teenage pregnancy be considered a public health problem? How and why did teenage pregnancy become a term favored over and above other labels?

week

13

## Sexually transmitted diseases

The links between personal behavior and exposure to risk are no better illuminated than through studies of sexual health. This class considers how control of the exposure to a particular form of health risk—sexually transmitted diseases—has been approached through the attempted regulation of prostitution. Depending on the time and place under consideration, we can observe that the regulation of risk can have both racial and gendered dimensions.

### Required readings

- Bliss, Katherine. 1999. The science of redemption: syphilis, sexual promiscuity, and reformism in revolutionary Mexico City. *The Hispanic American Historical Review*, **79:1**. 1-40.
- Gibson, Mary. 1999. *Prostitution and the state in Italy, 1860-1915*. Columbus: Ohio State University Press. 2<sup>nd</sup> edition. Chapter 5, 'Prostitutes and doctors: examination', pp. 151-206.
- Howell, Phillip. 2000. Prostitution and racialised sexuality: the regulation of prostitution in Britain and the British Empire before the Contagious Diseases Acts. *Environment and Planning D: Society and Space*, **18:3**, 321-339.

### Background reading

- Bliss, Katherine. 2001. *Compromised positions: prostitution, public health, and gender politics in revolutionary Mexico City*. University Park: Pennsylvania State University Press.
- Davidson, Roger and Hall, Lesley A. (eds.). 2001. *Sex, sin and suffering: venereal disease and European society since 1870*. London and New York: Routledge.
- Walkowitz, Judith R. 1980. *Prostitution and Victorian society: women, class, and the state*. Cambridge and New York: Cambridge University Press.

### Study questions

What were the British Contagious Diseases Acts? How far is the study of prostitution and sexually transmitted disease a useful way of considering the moral dimensions to risk? What was organized medicine's role in the regulation of prostitution and how is this role crucial to understanding the formulation of health risks in modern society?