

# History 407/507: Biomedicine & Disease

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By definition, the medical treatment of disease for the purpose of public health relies on attachments. This may entail relationships to knowledge and scientific fields, culture and identities. Probably most important, medicine relies on social imaginaries which suggest how treatments might be deployed or be beneficial in specific contexts, how their effects might be expected to unfold and benefit public health. In this course, participants will explore the relationships between medicine, disease and public health. We will use interdisciplinary tools to think about medicine and disease broadly, in cultural and historical contexts globally, from the 19<sup>th</sup> century to the present. We will read expansively from humanities-oriented fields of science, technology and medicine (STM), feminist science studies, disability studies and postcolonial technoscience in order to understand the various ways that medicine and the treatment of disease have been imagined in the context of public health. Topics which will be explored include biomedical knowledge and its relationship to power and institutions; pandemics and toxins; cures and the incurable; race and scientific ethics; gender and disease beyond the clinic; ignorance and uncertainty with disease; disability and prosthesis; genomics and cures. Students will develop critical interpretive skills by studying diverse primary sources which speak to the theme of medicine and disease. The writing of historical figures in the sciences, scientific reporting in newspapers, scholarly writing, manifestos of medical activists, publicity and advertising, conference proceedings and film are some of the primary sources with which you might work.

## Learning Objectives:

By the end of term you should be able to:

- Understand the multiple events and historical currents that shaped the emergence of scientific or technological fields pertaining to medicine
- Understand aspects of the history of public health in various parts of the world.
- Understand the role of difference and power relationships as it pertains to medicine and the treatment of disease in different contexts.
- Analyze and interpret “primary” sources of historical information.
- Identify an author’s argument or thesis.
- Write an essay and develop your own argument, supported by evidence.

**Class Format:** Seminar

Requirements: active participation in class discussions (includes weekly questions on the reading), class presentation(s), final research paper or case study (18-20 pages for undergraduates; 25-30 pages for graduate students).

Research paper: Requirements for the research paper will be discussed in class at length.

### Grade Distribution\*

1. Participation	20 %
2. In class presentations	20 %
3. Approved paper description with bibliography	10 % (Due by the 4 <sup>th</sup> week/Meeting 3)
4. Preliminary Draft of Paper	15 % (Completed by 9 <sup>th</sup> week/Meeting 9)
5. Final Draft of Paper	35 % (Due one week after the last class)

\* All elements are required to receive a final grade.

All required readings will be provided on Canvas.

**Course Schedule** (this may be adjusted as we move through the term, I will announce these changes in advance). The readings are selected to be engaging, accessible and manageable in length given that our seminar meets once a week.

### **Week 1 Introduction**

Library session to locate primary sources.

### **Week 2 What is disease? What is medicine?**

Nikolas Rose, Introduction and Chapter 1, Biopolitics in the Twenty-First Century, in *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century*  
Kim Tallbear, Chapter 1 pp 31-66, Racial Science, Blood, and DNA, in *Native American DNA: Tribal Belonging and the False Promise of Genetic Science*

### **Week 3 Cures and the Incurable, and Medicalization**

Bharat Venkat, Cures, *Public Culture*, 2106, Vol 28, No.3., pp 475-497  
Hannah Landecker, Chapter 2 (11 pages), Immortality, In Vitro: A History of the HeLa Cell Line

### **Week 4 Discussion of Paper Proposals**

No seminar meeting, individual meetings with me in my office during class time to discuss your paper proposals and bibliographies.

### **Week 5 Toxins, Pandemics and Coloniality**

David Arnold, Chapter 2, The Imperial *Pharmakon* pp 41-77, and Chapter 3, Panics and Scares pp 78-97, in *Toxic Histories: Poison and Pollution in Modern India*

### **Week 6 Disease Beyond the Clinic**

Lochlan Jain, Chapter 3 pp 67-87, Cancer Butch: Trip Up the Fast Lane, in *Malignant: How Cancer Becomes Us*

Lawrence Cohen, Introduction and Chapter 1 pp 1-43, Orientations, in *No Aging in India: Alzheimer's, the Bad Family, and Other Modern Things*

### **Week 7**

#### **Part 1: Disability, Prosthesis and Design**

Jaipreet Virdi, Between Cure and Prosthetic: 'Good Fit' in Artificial Eardrums pp 48-69, in Claire L. Jones (Ed.), *Rethinking Modern Prostheses in Anglo-American Commodity Cultures, 1820-1939*.

**Part 2: TBA-collective seminar decision.**

**Week 8**

**Part 1: Ignorance**

Michelle Murphy, Chapter 5, Uncertainty, Race, and Activism at the EPA pp 111-130, in *Sick Building Syndrome and the Problem of Uncertainty: Environmental Politics, Technoscience, and Women Workers*.

**Part 2: Genomics and Post-Genomics**

Kaushik Sunder Rajan, Chapter 4, Promise and Fetish: Genomic Facts and Personalized Medicine pp 138-181, or Life Is a Business Plan, in *Biocapital: The Constitution of Postgenomic Life*.

**Week 9**

Individual discussions of drafts of your paper in my office, no seminar meeting.

**Week 10**

Paper presentations

**Final Draft of Research Paper due one week after the last day of class.**