

Unit 20 Twentieth-century medicine: how has it changed the lives of people?

About the unit

In this unit, pupils learn about the impact of medicine on the quality of people's lives in the twentieth century. They explore the impact of new discoveries and technical developments on medicine, surgery, public health provision and preventative medicine. They consider the ways in which these are delivered to the general public in Britain as well as in other parts of the world.

This unit is expected to take 8–11 hours. There is scope to adjust some of the teaching activities to take account of time constraints in different schools.

Where the unit fits in

The unit will provide a balance to unit 18 'Twentieth-century conflicts', and unit 19 'The Holocaust', which are concerned with destructive elements of twentieth-century history. The unit could also prepare pupils for aspects of GCSE history. Links could be made with unit 8C 'Microbes and disease' and unit 9B 'Fit and healthy' in the science scheme of work.

Expectations

At the end of this unit

most pupils will: demonstrate knowledge of major changes in twentieth-century medicine in Britain and the wider world; organise information about the work of particular individuals to medical developments in the twentieth century; explain the impact that developments in medicine and surgery have had on the wellbeing of many people in the twentieth century; establish some accurate links between these developments and wider changes in twentieth-century life; select and organise information about the impact of the National Health Service on health care in Britain; evaluate health care provision in other parts of the world; show an understanding of different views about how far changes in medicine have brought progress

some pupils will not have made so much progress and will: show some knowledge of a number of changes in twentieth-century medicine; describe some of the ways in which medical changes have had an impact on the lives of ordinary people in Britain and the wider world; comment on how one important medical development was linked to another change, such as a technical discovery or a political change; gather some information about the impact of the National Health Service; compare health care provision in different parts of the world

some pupils will have progressed further and will: demonstrate detailed knowledge of major changes in twentieth-century medicine and of inter-connections between individual changes; produce well-structured accounts of the work of particular individuals in medical developments in the twentieth century; assess the complex and controversial impact of medical developments on the wellbeing of people in the twentieth century; analyse connections between medical change and wider changes in twentieth-century life; evaluate the influences of health care from other parts of the world on British attitudes to medicine; challenge simplistic links between change and medical progress

Prior learning

This unit can build on prior work in the study of medicine and public health in units relating to the history of Britain prior to 1900. Pupils may, for example, have studied the Black Death and sanitary conditions in the towns of the Industrial Revolution.

It is helpful if pupils:

- know something about technological and scientific change in the twentieth century that made medical developments possible
- know something about the increasing involvement of the state in the affairs of ordinary citizens
- have analysed relationships between characteristic features of periods and societies
- have analysed and explained reasons for and results of historical events

Language for learning

Through the activities in this unit pupils will be able to understand, use and spell correctly words relating to:

- medicine, *eg vaccination, public health*
- politics and legislation, *eg liberal reforms, cabinet, resignation*
- international agencies, *eg World Health Organization (WHO), Red Crescent*

Speaking and listening – through the activities pupils could:

- ask different sorts of questions to extend thinking and refine ideas
- solve a problem, consider alternatives, structure plans and organise group activity
- follow an argument, demonstration, etc, making notes that are then used in another task

Reading – through the activities pupils could:

- identify what information is needed, and draw together information from different sources

Resources

Resources include:

- range of sources relating to the setting up of the National Health Service
- information about the work of international agencies, *eg WHO, Médecins Sans Frontières, Red Cross, Red Crescent*
- useful websites, *eg www.ifrc.org (Red Cross and Red Crescent); www.bbc.co.uk/education/medicine*

Out-of-school learning

Pupils could visit national and local museums dealing with the history of medicine, *eg Thakray Medical Museum, Leeds*, and exhibitions concerned with the workings of UN agencies.

Future learning

Links could be made with the role of individuals, like David Lloyd George and Christiaan Barnard, and with changes brought about by war in the twentieth century.

Pupils can draw on their ability to make links and connections across time and location in unit 21 'Scientific discoveries'.

The skills and concepts can be developed at GCSE and transferred to other contexts.

Better health – longer life: why?

- about the place medicine, in its broadest definition, plays and has played in their lives
- that people today are generally healthier than people 100 years ago
- about the reasons why certain diseases and conditions are no longer life-threatening
- to make joint decisions about the ways in which information should be presented
- Brainstorm what keeps pupils well and on the role doctors, hospitals and medicine play in our lives, *eg vaccination, diet, drains and toilets, check-ups by school nurse, appendectomies and tonsillectomies, setting a broken wrist, straightening crooked teeth, spectacles.*
- Pupils suggest categories and order these attributes, *eg medicine, surgery, public health, preventative medicine.*
- Introduce two families in Britain: parents and children in 1900 and parents and children in 2000. Locate the families in appropriate houses and locations. Produce a list of diseases and conditions, ranging from short sight, coronary artery disease and kidney failure through to diphtheria, polio, typhoid, tuberculosis, scarlet fever and measles.
- Working in groups, pupils decide which family member (1900 and 2000) will have, or be threatened by, which illnesses and conditions. It might be appropriate to give a range of different illnesses and conditions to different groups of pupils.
- Pupils research the likely outcomes and provide reasons for these.
- Pupils decide on the most appropriate way of presenting their findings to the whole class. This could be via drama, ICT, interview, wall display or talk.
- Return to the categories that emerged from the original brainstorming session, and explain how the various outcomes and their reasons all relate to these specific categories.
- identify and exemplify categories of medicine
- describe ways in which healthy living and life expectancy have changed between 1900 and 2000
- explain why certain diseases and conditions disabled and killed in 1900 and not in 2000
- select and organise their knowledge of the reasons why people are healthier in 2000 than they were in 1900
- Approach aspects of this unit sensitively, considering any particular health issues of pupils and their families.
- While the focus is on the health of people living in Britain, pupils or teachers may wish to refer to medicine from cultures other than those of Western Europe, or alternative treatments.
- The size, names and ethnic origin of the two families should be appropriate for pupils in the school. The housing needs to reflect local housing.
- Teachers will need to ensure appropriate diseases and conditions are selected to enable pupils to make comparisons and suggest reasons for differences.
- Links can be made with unit 12 'Middle-class life 1900'. Pupils might consider whether social class affected health.
- Key skills: researching and presenting their findings will enable pupils to provide evidence for the key skills of communication and working with others.
- Language for learning: in this activity pupils will use correctly terms of qualification and comparatives, *eg more, most, less, least, few, fewer*, solve a problem, considering alternatives and structure plans.
- ICT: pictures of houses, locations and members of the families can be acquired from CD-ROMs or other sources. Pupils might use appropriate software, *eg web publishing*, to analyse and compare the health of families in the two periods. The work of each group can be presented to the rest of the class using presentation methods selected by the pupils.

Pupils should learn:

Pupils:

Free at the point of delivery?

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| <ul style="list-style-type: none"> • about the ways in which the Liberal governments at the beginning of the twentieth century tried to improve health and welfare • to explain the reasons for the setting up of a National Health Service after the Second World War and the ways in which it was set up • to analyse and explain the widely differing views amongst doctors and the general public about the provision of a National Health Service • to phrase appropriate questions about problems that were encountered in setting up the National Health Service | <ul style="list-style-type: none"> • Remind pupils of the situation of the 1900 family. <i>How did they gain access to medicine and surgery?</i> Tell pupils about the Liberal governments at the beginning of the twentieth century and the reforms made relating to the provision of health and welfare. • Pupils, using textbooks and other points of reference as appropriate, draw up a grid showing the reforms, who paid for them and who benefited from them. • Move to the 2000 family. <i>How did they gain access to medicine and surgery?</i> Tell pupils about William Beveridge and the setting up of the National Health Service in 1948 by the newly elected Labour Government. • Provide pupils with a range of source material relating to the provision of a 'free' health service. Pupils analyse them as indicative of contemporary attitudes on the part of doctors and the general public to the setting up of the National Health Service. • Pupils prepare to interview Aneurin Bevan by drawing up a list of questions they would like to ask him about problems, pitfalls and successes in setting up the National Health Service. • In the role of Bevan, answer pupils' questions and then ask them to note responses. • Introduce the issue of how this new National Health Service was to be funded. Provide figures for contributions and expenditure. <i>Was it likely that the service could continue to be free at point of delivery?</i> Tell pupils that Bevan resigned from the Cabinet in 1951 in protest at the introduction of prescription charges. • Pupils use information about the setting up of the National Health Service to produce a summary poster of the views of the supporters or opponents. | <ul style="list-style-type: none"> • select and organise their knowledge of the Liberal reforms at the beginning of the twentieth century • evaluate and use sources of information critically to reach supported conclusions about setting up the National Health Service • conduct an interview and compile notes about the problems encountered by Aneurin Bevan in setting up the National Health Service • ask different sorts of questions to extend thinking and refine ideas | <ul style="list-style-type: none"> • Contemporary sources, such as the reports of Booth and Rowntree and accounts of the health of Boer War recruits could be used to introduce this section. • Teachers might wish to include oral history or fictional accounts of medicine in the 1930s and 1940s to help pupils' understanding of the public's reaction to the National Health Service. The reminiscence charity, Age Exchange, could be used as a resource. • Language for learning: the interview activity provides an opportunity for pupils to demonstrate speaking and listening skills through following an argument and making notes which are then used in another task. • Citizenship: links can be made where pupils evaluate public services and the role played by local and central government in providing them. • ICT: Pupils might use appropriate ICT tools to collect information from people within the local community. Pupils might design and create a spreadsheet using data on health service contributions and expenditure in the 1940s. They might include potential services that could have charges attached. Pupils could test out various 'what if?' scenarios to decide whether it was likely that the National Health Service would continue to be free at the point of delivery. |
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Is there a down-side to modern surgery and medicine?

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| <ul style="list-style-type: none"> • to identify the key changes in the National Health Service from 1948 to 2000 • to assess the factors which have contributed to changes in the provision of health care • to identify relationships between causes and assess their relative importance • to recall prior knowledge and use it to evaluate reasons | <ul style="list-style-type: none"> • Recap to check pupils' knowledge of the main features in the National Health Service in 1948. • Provide information to enable pupils to find out how the National Health Service changed or stayed the same from 1948 to 2000, <i>eg dentistry, free prescriptions</i>. • Recap pupils' knowledge of late twentieth-century medicine from the work earlier in the unit on the family in 2000. Use this as a basis for a class or group discussion on why things have changed or stayed the same. Encourage pupils to examine patterns against the wider background of improved technology, changing employment patterns, lifestyle, etc, as well as cost factors. • Pupils produce individual or group causation diagrams to summarise 'Change and continuity in health care 1948–2000'. | <ul style="list-style-type: none"> • make accurate comparisons of points of detail about the National Health Service in 1948 and 2000 • produce reasoned explanations of changes in the National Health Service • show, through discussion and summaries, an awareness of a range of causes, with some explanation of links between them | <ul style="list-style-type: none"> • Teachers will need to consider how much additional information pupils will need for the discussions. • Alternatively an initial class discussion could develop into structured group work to research some factors in more detail. • Citizenship: the work on health care in 2000 could be developed to focus on some of the moral choices arising from technological developments and associated costs. This would provide a basis for discussion of topical moral and social issues as well as possible links with PSHE. It can also develop pupils' financial literacy. • Language for learning: if the pupils work in groups, encourage them to consider the different approaches to planning and structuring their task. |
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Health for all?

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| <ul style="list-style-type: none"> • that the provision of health care varies widely between and within different countries • to evaluate approaches to health care in other societies and identify the influence these have had on attitudes to health care in Britain • about the activities of various agencies and organisations that are active in the provision of help and advice • that a range of problems arise from the giving and receiving of aid and that these include practical problems as well as political, moral and ethical ones • about the WHO 'Right to Health' and whether it is attainable by all • to reach balanced judgements and present them clearly | <ul style="list-style-type: none"> • Remind pupils that so far their work has focused on Britain, a rich western European country. <i>What about the rest of the world that is not so affluent?</i> • Introduce two different families: <ul style="list-style-type: none"> – one living in a less affluent part of the world. Pupils describe and evaluate the health care provision available to this family. <i>In what ways does it meet the needs of the family? In what way have ideas about health care from this country influenced attitudes to health care in Britain? Are there aspects of medicine and healthcare in Britain that would be helpful for this family?</i> – one living in an area of the world where health care was previously available but because of war or a natural disaster is no longer functioning. Pupils describe and evaluate the situation the family now find themselves in, suggest agencies and organisations that could help improve the situation so far as health is concerned • Provide information cards relating to the sorts of aid that could be delivered by a range of agencies and organisations, eg <i>WHO, Oxfam, UNICEF, Médecins Sans Frontières, Red Cross, Red Crescent</i>. Pupils decide which agencies could provide the most appropriate aid. • Class discussion reaches consensus. • Pupils then consider the problems associated with giving this aid, eg <i>communications, national pride, conflicting interests</i> and construct a flow chart to show the steps from problem identified to aid received. • Pupils consider the 'Right to Health' statement in the Constitution of the WHO: 'The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition'. Ask pupils whether this 'Right to Health' is attainable. • Pupils construct a 'temperature graph' of the pluses and minuses of modern medicine and use it to support a reasoned conclusion as to whether change has meant progress. | <ul style="list-style-type: none"> • make comparisons between health care in other societies and evaluate different approaches • identify influences these have had on attitudes to health care in Britain • make links between need and aid provision by various agencies and organisations • examine a range of problems associated with the giving and receiving of aid • select and organise their knowledge and understanding in order to determine whether the main aim of the WHO is attainable | <ul style="list-style-type: none"> • Information about the activities of various relief and health organisations is available direct from the organisations themselves. These can also be used to provide information on the circumstances of typical families in an area. Alternatively, teachers might want to focus on an area in the news. • ICT: groups of pupils could organise an effective web search to find information about the various international agencies. • Citizenship: links with where pupils learn about the world on a global community. • Language for learning: pupils identify what information is needed, and draw together information from different sources. |
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