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The Canadian Public Health Association has identified 12 “great achievements” in public health since the early 1900s:

- Control of infectious disease
- Decline in deaths from coronary heart disease and stroke
- Family planning
- Healthier environments
- Healthier mothers and babies

- Motor-vehicle safety
- Recognition of tobacco use as a health hazard
- Safer and healthier foods
- Safer workplaces
- Vaccination
- Universal policies
- Acting on the social determinants of health

These themes were adopted from the Centers for Disease Control and Prevention’s “Ten Great Public Health Achievements in the 20th Century” (1999) with the addition of achievements #11 and #12, which were defined as “particularly Canadian.” I took these 12 themes as the inspirational framework for my second-year undergraduate course *Introduction to Anthropology of Health’s* summative assignment this semester. The assignment, entitled “Anthropology of Health in 100 Objects,”* tasked students with choosing an object (read: artifact, thing, moment, discovery, item, photograph, etc.) and contextualizing their choice using the themes outlined by the Canadian Public Health Association. To aid in this venture, I created a 10-part series of “100 Object” examples, highlighting a specific event in Canadian public health history using historic dress and personas.



1900-1909: 1908 – Canadian Medical Association appoints a milk commission. The glass of milk represents efforts to improve food safety through pasteurization.

1910-1919: 1918 – Influenza pandemic. The gauze mask represents attempts at infectious disease

control.

1920-1929: 1927 – Prohibition repealed in the province of Ontario. The contemporary bottle of Watkin's liniment is presented with a wink to its 47% alcohol content, of which I am sure no one *ever* took advantage during the dry years.

1930-1939: 1936 – Health League of Canada was formally organized. I am lucky enough to be holding Health League founder Dr. Gordon Bates' stethoscope (a gift from his granddaughter).

1940-1949: 1942 – Official Food Rules introduced, the precursor to the Canada Food Guide. Four eggs were noted as the ideal weekly intake, though this may have been optimistic.



1950-1959: 1955 – Jonas Salk's polio vaccine declared viable. This character is a delighted mother, clutching the newspaper from April 12, 1955, as news of the polio vaccine trials made international headlines.

1960-1969: 1969 – All forms of contraception become legal in Canada. The birth control pill represents a revolution in reproductive health.

1970-1979: 1976 – Ontario is the first province to make use of seatbelts mandatory. Echoes from the seatbelt debates from the 1970s and '80s sound throughout the COVID-19 mask and vaccine mandate debates today.

1980-1989: 1988 – *Canadian Environmental Protection Act* is introduced in the same year as the Toronto Conference on the Changing Atmosphere. Public pressure and protest continue to be drivers in the climate change movement.

1990-2005: 2003 – first supervised injection site in North America (InSite) opens in Vancouver, British Columbia. I am holding a single-use syringe to represent safe use kits available at centres like InSite.

Objects selected by the students, à la Claude Lévi-Strauss as “good to think,” include mobile phones, milk bottles, condoms, yoga mats, PrEP, hand sanitizer, prosthetic limbs, Indigenous sacred medicines, speculums, guinea pigs, vaginal dilators, tampons, Naloxone kits, Nicorette, bicycles, antibiotics, cannabis, psychedelics, Vitamin D, fidget spinners, SSRIs, straitjackets, and more. All semester I have been meeting with students to discuss the clear resonances and frustrating silences, the clarity and obfuscation, the intimacy and the distance inherent in questions of health. The theme of embodiment is paramount, as students make connections between their own lives and the broader themes of health. In the context of the unfolding pandemic, is it any wonder then, that the most commonly chosen topic was masks?

Questions of health are tied to issues of time and place, which in turn intersect with privilege and access. In lectures we examined positionality, reflecting on how our own constellation of intersecting identities might have been a benefit or barrier to our health if we had been born in an earlier period. These ten personas were a formative step in encouraging student creativity and critical thinking as medical history and anthropology intertwined. The woman in 1908 concerned about the potential spread of tuberculosis through unpasteurized milk had white privilege, but not the right to vote. A family in 1942 might want to fulfill the four-eggs-a-week guideline for all members, but was that affordable for all households? The person holding the newly legalized birth control pill in 1969 would have to wait until 1988 to see Canada’s 1869 ban on abortions fully lifted. Students expressed shock at *how recently* so many of these scientific and legal themes had shifted society and how socioeconomic variables clearly affected an individual’s chance of benefiting from a public health discovery or movement.

What object might you choose? Would you have had access to this in the past? And does everyone have access now?

* The title is borrowed from the BBC’s “A History of the World in 100 Objects” in which artifacts currently curated at the British Museum (many stolen during periods of colonial expansion) were examined in 15-minute radio programs to tell a version of the story of humanity.

References:

Canadian Public Health Association. (n.d.) 12 great achievements. <https://www.cpha.ca/12-great->

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Centers for Disease Control. (1999). Ten great public health achievements – United States, 1900-1999. *Morbidity and Mortality Weekly Report*, 48(12): 241-243.

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