

- Black, John B. 1975. *Organising the Propaganda Instrument: The British Experience*. The Hague, Netherlands: Martinus Nijhoff.
- Russell, Bertrand. 1922. *Free Thought and Official Propaganda*. London: Watts & Co. (Conway Memorial Lecture).
- Taylor, Philip M. 1981. *The Projection of Britain: British Overseas Publicity and Propaganda, 1919–1939*. Cambridge and New York: Cambridge University Press.

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## Public Health

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Public health is the health of populations. Modern public health focuses on preventing disease and promoting health and addresses a number of major concerns including epidemic disease, hygiene and sanitation, and child and maternal health, among others. Managing these concerns at the local or national level is challenging; doing so in an imperial context presented additional layers of complexity. Although modern public health did not appear until relatively late in the life of the British Empire, its development can be seen in the evolution of imperial medicine.

Imperial medicine initially was a practical response to the medical needs of the army, colonial officials, and British settlers. Later, it was concerned with laboring populations and indigenous elites. Much later, it expanded to encompass other indigenous populations. The institutionalization of imperial medicine began with providing for the medical needs of the British. Local population health became important when British colonists were affected or when labor and productivity were impacted. In these instances, controlling disease and reducing mortality among laborers and slaves became important considerations for policy makers.

The institutions of imperial medicine began with medical officers, usually ship's surgeons, who provided for the medical needs of colonists and soldiers. These officers helped establish medical services' facilities in colonial areas, and such facilities grew into dispensaries, hospitals, and asylums operated by both military and civil officials. Colonial hospitals were usually restricted to British residents, but gradually opened up to provide services to non-British individuals. Hospitals that provided services to the non-British were usually segregated, reflecting class and racial hierarchies in their physical structures and layout. In a number of colonies, missionaries were also responsible for providing medical care and established institutions for the delivery of services.

The initial focus of imperial medicine was epidemic disease. Increases in maritime exploration, trade, and travel brought increasing contacts with new populations, territories, climates, and maladies. Disease therefore emerged as an important concern. Among the first medical and political responses were attempts to contain disease through quarantine, to keep the afflicted away from the healthy.

Quarantine was founded on competing disease theories: *contagionism* (the belief that disease was transmitted by an infected individual to others); and *miasma theory* (the notion that disease was spread through atmospheric conditions). Quarantine

was often accompanied by other “purifying” efforts such as fire to cleanse an area, or flowers and herbs, which were thought to improve inhaled air.

Cholera was an important epidemic disease that engendered medical activities throughout the empire in the late 18th and 19th centuries. The first cholera pandemic entered Britain in 1831, reaching London in 1832. The quarantine approach failed, fell out of favor with the British authorities, and was supplanted with a compromise approach of port inspections and isolation. Additional interventions were developed, as well, including new practices of hygiene and sanitation. These developments had salubrious effects throughout the empire as rapid settlement increases, industrialization, and urbanization had led to overcrowding, polluted water, a lack of sewage disposal, and numerous related health issues.

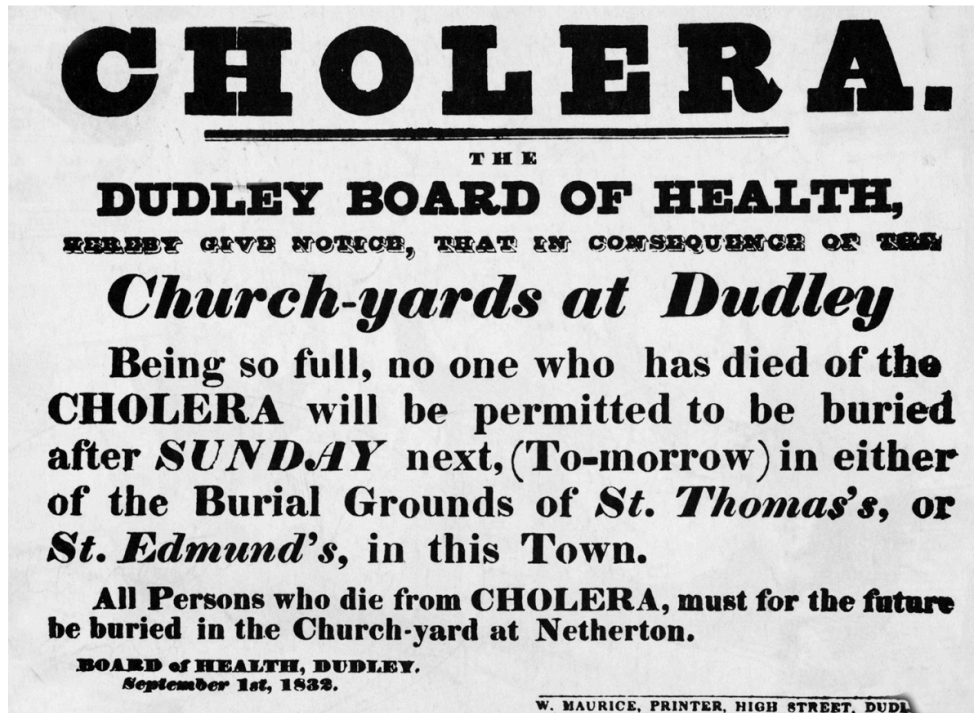
Cholera is a useful model for understanding the transition from imperial medicine to public health. The 1831–1832 epidemic in Britain, which caused more than 22,000 deaths in England, spurred a significant reform agenda (Warren 2000, 56). Sanitation efforts, new medical institutions and investments in medical training, labor legislation, poverty relief, temperance campaigns, nutrition schemes, and the extension of the franchise were all brought to bear in an effort to control disease, increase knowledge, change behavior, and improve the population’s health.

By 1854, a new disease understanding began to emerge when John Snow (1813–1858) traced the origin of that year’s cholera outbreak to sewage contamination of the water supply. Snow’s work resulted in parliamentary action, including the rebuilding of London’s sewers, and contributed to the emergence of the germ theory of disease. Even before Snow’s findings, however, the public health approach fostered by Britain’s experience with cholera was exported to other parts of the empire.

The circumstances of cholera point to an important feature of imperial medicine and public health in the empire: its dialectical nature. Interactions and conditions in one area influenced the development of policy, practice, knowledge, and technologies in others. Medicine and health were not simply the exercise of imperial authority, but developed out of the continuous interactions of people, ideas, goods, and other elements.

Colonial settlement and development also created conditions for sickness and disease. Colonization created a need for infrastructure: railways, canals, roads, and ports. These required changes to natural and built environments, often with negative health impacts. Agricultural development left standing water, supporting mosquito populations that spread malaria. Rail travel brought people, animals, and illnesses into sustained contact. It is important to recognize these developments and their human consequences, as well as the medical and health responses they initiated.

Full transition to modern public health came around 1890 with the establishment of “tropical medicine,” which arose from the consolidation of germ theory, the development of bacteriology and related fields, and the development of new medical technologies. In this period the importance of the health of indigenous populations was recognized, and medical humanism began to exert a significant impact. British medical authorities also made important contributions to international efforts to standardize diagnostic criteria and initiated attempts to improve access to health services.



Notice from Dudley, England, that the graveyards are full from cholera deaths and neighboring Netherton would take future burials, dated September 1, 1832. Cholera, which is spread by untreated human waste, was a persistent public health problem in 19th-century Britain and the empire. (Bettmann/Getty Images)

Not all public health efforts were benign, however. Imperial authorities used compulsory powers to regulate disease and behavior, including prohibitions against indigenous medicine, the formation of ghettos and other forms of social exclusion, and other discriminatory practices.

A. S. Catey

**See also:** *Organization and Administration: Humanitarian Intervention and Relief*

#### Further Reading

- Digby, Anne. 2006. *Diversity and Division in Medicine: Health Care in South Africa from the 1800s*. New York: W. W. Norton and Company.
- Johnson, Ryan, and Amna Khalid, eds. 2012. *Public Health in the British Empire: Intermediaries, Subordinates, and the Practice of Public Health, 1850–1960*. London and New York: Routledge.
- Jones, Margaret. 2004. *Health Policy in Britain's Model Colony: Ceylon (1900–1948)*. New Delhi: Orient Longman.
- McLeod, Roy, ed. 1988. *Disease, Medicine, Empire: Perspectives on Western Medicine and the Experience of European Expansion*. London: Routledge.



Warren, Michael. 2000. *A Chronology of State Medicine, Public Health, Welfare, and Related Services in Britain, 1099–1999*. London: Faculty of the Public Health Medicine of the Royal Colleges of Physicians of the United Kingdom.

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## Railroads

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Railroads had a tremendous impact on all facets of British society and were instrumental in spreading the Industrial Revolution throughout Britain and its colonies. The ease of transporting goods by rail spurred economic growth, and the selective placement of rail lines created industrial centers. Passenger travel allowed for development of the suburbs, quick movement of troops, and growth of the tourist industry.

The earliest trains were 18th-century horse-drawn wagons designed to roll on wooden rails. In 1767, simple rectangular cast-iron plates were introduced at the Coalbrookdale ironworks in Shropshire that could support heavier loads and were more durable. Additional refinements included adding a lipped edge to prevent wheels from slipping off the rails.

In 1769, James Watt (1736–1819), who was working on stationary steam engines, received a patent for his separate condenser, a device that reduced heat loss and improved the efficiency of steam engines. In 1794 Watt joined with Matthew Boulton (1728–1809) to form Boulton & Watt. The company manufactured engines that operated at a safe pressure of five pounds per square inch.

Other engineers toyed with the idea of “strong steam,” but Richard Trevithick (1771–1833) made it work. He constructed an engine that produced 145 pounds per square inch of steam. This powerful engine was relatively small, and Trevithick mounted it on a moving carriage. On December 24, 1801, he demonstrated the “Puffing Devil,” but a week later it was destroyed by fire when its boiler ran dry. Trevithick designed a safety mechanism that used a fusible plug that would melt if the boiler’s water level fell too low. In 1804 Trevithick built the first successful steam locomotive to run on tracks at the Penydarren Ironworks.

In 1814, George Stephenson (1781–1848) built the steam locomotive *Blucher* for the Killingworth Colliery. His four-foot, eight-and-a-half-inch gauge would become the national standard in 1846. Stephenson’s firm, Robert Stephenson & Company, built the *Locomotion* for the Stockton and Darlington Railway, which opened on September 27, 1825. Some 500 people scrambled to ride the train’s passenger coach, the *Experiment*, thrilling to speeds of up to 15 miles per hour.

In October 1829, the Liverpool and Manchester Railway held a multiday trial to determine the best kind of locomotive to use on their new line. Stephenson’s winning entry, the *Rocket*, was one of five competing engines. The *Rocket* awed spectators when it reached a top speed of thirty miles an hour while hauling twenty tons of freight.

The Liverpool and Manchester opened on September 15, 1830, and was the first rail line to open a formal station where passengers could purchase tickets. It was also the site of the first railroad accident, when Member of Parliament William Huskisson

## Constitutional Orders

How do constitutional theory and text intersect with practice? How does practice shape or reshape constitutional text, or text and theory determine practice? What are the roles of popular forces in constitutionalism? We are particularly interested in exploring those issues in ways that move constitutional study beyond the simple dualism of nation-state and citizen.

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2011.08.20

### Administrative Action and Student Free Speech

Two cases regarding students' right to speech, and when school administrators can restrict student speech, have been decided recently by the Third Circuit Court of Appeals in Pennsylvania. Both cases deal with students' creations of fake MySpace profiles, the content of which derogated school officials.

The first case, *J.S. v. Blue Mountain School District* (2010), concerns an eighth grade student, J.S., who was angry at having been disciplined for dress code violations and in response used her parents' computer to create a MySpace profile of her principal "which alluded to his interest or engagement in sexually inappropriate behavior and illegal conduct" (at 42). She was subsequently suspended for the profile. The Court found that the profile "threatened to substantially disrupt" the school (at 42), and concluded "that the school district did not violate J.S.'s First Amendment free speech rights by disciplining her for creating the profile" (at 4). The Court further concluded "that the Constitution allows school officials the ability to regulate student speech where, as here, it reaches beyond mere criticism to significantly undermine a school official's authority in challenging his fitness to hold his position by means of baseless, lewd, vulgar, and offensive language" (42).

The second case, *Layshock v. Hermitage School District* (2010), also concerned a student, a high school senior, who created a fake MySpace profile of his principal. In this case, the student used his grandmother's computer. In response, the school punished the student with suspension and other restrictions. The School District's main argument was that the student's "cut and paste" of the principal's photo from the District's website constituted entry into school property and created a nexus between the student's off-campus expressive conduct and disruption of school. The Court rejected this argument, and found no authority that would support punishment for creating such a profile as the student created (at 47). The Court held that the student's "use of the District's web site does not constitute entering the school, and that the District is not empowered to punish his out of school expressive conduct" (at 48).

(There are also additional concerns at stake in both cases, including the parents' Fourteenth Amendment rights to due process and liberty interests the raising of their children, but I will not address these issues here. The decisions are worth reading for the Court's reasoning and holdings on these points.)

Both panels found that students' non-disruptive behavior is protected under a *Tinker* analysis (*Tinker v. Des Moines Independent Community School District*, 393 US 503 [1969]). The critical distinction between *J.S.* and *Layshock* seems to be the connection of the off-campus conduct to disruption of school. The Court found that J.S.'s off-campus behavior caused disruption, while Justin Layshock's behavior did not. This distinction accounts for the divergent findings regarding the constitutionality of the school districts' administrative actions against the students.

Although there is settled law on students' right to free speech, most recently adjudicated in *Morse v. Frederick* (551 US 393 [2007]), the Supreme Court has yet to rule on student internet speech. These cases, and others like them, are therefore important constitutional milestones, and it is likely that the Supreme Court will soon begin to adjudicate internet speech cases. It is a good time for us to be thinking about issues of speech (and other liberties) vis-à-vis administrative action, and the status of constitutional protections of speech in the internet era.


Michael Simpson, from the National Education Association's Office of General Counsel, writes about the two decisions and the paired issues of student rights regarding off-campus speech and the extent of students' right of free speech on the internet. The article can be found [here](#) (although I believe issue can be taken with Simpson's conclusions regarding *J.S.*).

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Review of Pagan Kennedy, *The Secret History of the Rape Kit*, posted to NetGalley July 24, 2024.

[Link](#)

I need you to read *The Secret History of the Rape Kit*, because it's essential. Like most true crime stories, the "facts" about the origins and biography of the rape kit are a matter of indifference to most. The truth of these stories lies in the beliefs we carry, regardless of the veracity of those beliefs. Kennedy has done a great service by resurrecting the life of Marty Goddard as innovator and driving force behind the rape kit and restoring her to timely recognition. The book slots well into current important conversations and it deserves to be read and talked about. It's smart, compassionate, well researched and reported—and infuriating. How dare we forget the creator of something as vital as the rape kit? And how dare we turn away from the evidence it generates?

What, then, do we owe to those who survive sexual violence? What do we owe to the women innovators among us, overshadowed by men of lesser skill and intellect, but more rapacity? This brilliant, heartbreaking, necessary book captivated me immediately and does excellent, important work to define some of the key failures of thought, policy, and practice that led to Marty Goddard's virtual disappearance and to the squandering of opportunities to address sexual crime by discarding mounds of evidence over years and decades. These failures are not done wreaking their havoc and imposing human costs; Kennedy brings these forward with care and a honed sense of ire.

The interpolation of the author's own experiences with Goddard's struggles, and with the challenges of digging up such a worthwhile cold case of innovation and foresight, is incisive. Kennedy brings strong empathy to compelling storytelling and an eye for nuanced detail that adumbrates a hidden figure, one whose importance should never have been lost. The writing is graceful, and one gets a strong sense of the tempered relentlessness not only of Marty Goddard, but of the author herself, chasing ghosts that haunt them both.

There is an urgent need for explorations of the myriad ways the legal system has consistently undermined justice – ignoring and pathologizing rape victims, warehousing and forgetting rape kit evidence, disregarding forensic failures – and *The Secret History of the Rape Kit* is a welcome addition to this growing body of work. It also goes some way to address other legal and civic failures by taking head-on the misdirection of recognition that Marty Goddard – and all the unsung heroes like her – endured. Kennedy offers a well-timed cry to policymakers and others to take these failures seriously and take steps to correct the errors of evidence and address systemic biases that create and perpetuate injustice.

Kennedy interweaves histories – of innovation, criminal justice, police procedure – and biographies – of Marty Goddard, of the author herself, and, importantly, of the rape kit as intellectual property, social object, and evidentiary tool – to convincingly document and illustrate why failures of procedure and of attribution are so costly at so many levels. If you care about justice, stolen ideas, systemic indifference to women's experiences of violence, and the outcomes of a threadbare approach to forensic evidence, read this book.