

CUL 260 Health, Bodies, Identities

MQC1 Day 2015

Dept of Media, Music & Cultural Studies

Contents

General Information	2
Learning Outcomes	2
Assessment Tasks	3
Delivery and Resources	6
Unit Schedule	6
Policies and Procedures	14
Graduate Capabilities	15

Disclaimer

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General Information

Unit convenor and teaching staff Unit Convenor Lara Palombo Iara.palombo@mq.edu.au Contact via Iara.palombo@mq.edu.au

Credit points 3

Prerequisites 12cp

Corequisites

Co-badged status

Unit description

What does it mean to be 'healthy'? This course will critically examine the relationship between the way we understand and imagine 'health' and a range of practices, institutional frameworks and ways of bodily being. Contemporary debates such as those around smoking, obesity, sexual health and mental illness will be interrogated. We will explore how categories of 'health' and 'illness' play out in ethical and political decision making. How are ideas about 'normal' or 'pathological' bodies and identities tied into concepts of 'health'? And how does the idea that 'wellness' is an individual's responsibility underpin public policy and peoples' ways of understanding and managing their own bodies?

Important Academic Dates

Information about important academic dates including deadlines for withdrawing from units are available at https://www.mq.edu.au/study/calendar-of-dates

Learning Outcomes

On successful completion of this unit, you will be able to:

Demonstrate an understanding of the ways in which "health" is understood and experienced across a range of contexts.

Interrogate key concepts around "health" and normalizing practices, showing an

awareness of debates around definitions of these terms

Outline a theoretically informed account of the relationship between forms of knowledge and forms of embodied subjectivity and sociality Apply key methods of critical analysis to evaluate social economic, legal and or medical practices which focus on bodily-being

Apply the accounts of ethics offered in this unit to an analysis of contemporary practices and debates around "health"

Compose an analysis of and alternate response(s) to the issues and practices discussed in the unit.

Assessment Tasks

Name	Weighting	Due
Reading summaries	10%	3,4,5,10,12
take-home exam	25%	8.30 am - Thursday week 7
Essay plan	20%	8.30 am - Thursday week 10
Essay	40%	16 June 4.30 pm.
Participation	5%	ongoing

Reading summaries

Due: **3,4,5,10,12** Weighting: **10%**

Students will submit and discuss in class a 200 words max summary of one of the essential readings set for weeks 2, 3, 4, 9, and 11 (i.e. 5 in total). Summaries that are submitted late will not be marked and will be awarded an 'F' (Fail). Please Note that each tutorial cover the topic and readings introduced at the lecture of the previous week so each summary must be typed, submitted and discussed at the tutorial of weeks 3, 4, 5, 10, 12.

On successful completion you will be able to:

• Demonstrate an understanding of the ways in which "health" is understood and experienced across a range of contexts.

take-home exam

Due: **8.30 am - Thursday week 7** Weighting: **25%**

The take-hom exam will require students to provide definitions and critiques of 'everyday' terms, and also to explain key concepts and ideas discussed in the essential readings of this course.

The Exam will be released in iLearn at 8.30 am of Thursday of week 6. The Exam is due back

on **Thursday 8.30 am of week 7**. The paper must be submitted by 8.30 am in **Turnitin** and handed in **hard copy** at the Lecture. Papers will not be marked if submission procedure is not followed correctly and will be awarded an 'F' (Fail).

Please note that this is an exam. Extensions cannot be granted and no late papers will be accepted. Students will need to apply for Special Consideration to avoid an automatic Fail (0 grade).

On successful completion you will be able to:

- Demonstrate an understanding of the ways in which "health" is understood and experienced across a range of contexts.
- Interrogate key concepts around "health" and normalizing practices, showing an awareness of debates around definitions of these terms
- Outline a theoretically informed account of the relationship between forms of knowledge and forms of embodied subjectivity and sociality
- Apply key methods of critical analysis to evaluate social economic, legal and or medical practices which focus on bodily-being
- Apply the accounts of ethics offered in this unit to an analysis of contemporary practices and debates around "health"

Essay plan

Due: 8.30 am - Thursday week 10 Weighting: 20%

Students will submit a 500 words essay plan. Essay questions and a copy of the essay plan format required for this task will be made available in iLearn and discussed in class.

The Plan must be submitted in Turnitin and in Hard copy at the Lecture of week 10, by 8.30 am. Papers wont be marked if submission procedure is not followed correctly. Extensions must be organised *Prior* to due date. Late papers will receive a 5% penalty per every late day. After 7 days the paper wont be marked and will receive a Fail (0 grade).

On successful completion you will be able to:

- Demonstrate an understanding of the ways in which "health" is understood and experienced across a range of contexts.
- Outline a theoretically informed account of the relationship between forms of knowledge and forms of embodied subjectivity and sociality
- Apply key methods of critical analysis to evaluate social economic, legal and or medical

practices which focus on bodily-being

• Apply the accounts of ethics offered in this unit to an analysis of contemporary practices and debates around "health"

Essay

Due: **16 June 4.30 pm.** Weighting: **40%**

Students are required to write a 2000-2,200 word essay. Due date: 16 June 4.30 p.m.

Questions will be posted in iLearn and distributed in class.

The essay must be submitted in Turnitin and in hard copy at the MQC front desk by 4.30 pm. Papers wont be marked if submission procedure is not followed correctly.

Please note that this is in lieu of exams and extensions cannot be granted. Late papers wont be accepted and the essay will receive an automatic Fail (0 grade). Students will need to apply for Special Consideration to avoid an automatic Fail.

On successful completion you will be able to:

- Demonstrate an understanding of the ways in which "health" is understood and experienced across a range of contexts.
- Interrogate key concepts around "health" and normalizing practices, showing an awareness of debates around definitions of these terms
- Outline a theoretically informed account of the relationship between forms of knowledge and forms of embodied subjectivity and sociality
- Apply key methods of critical analysis to evaluate social economic, legal and or medical practices which focus on bodily-being
- Apply the accounts of ethics offered in this unit to an analysis of contemporary practices and debates around "health"
- Compose an analysis of and alternate response(s) to the issues and practices discussed in the unit.

Participation

Due: **ongoing** Weighting: **5%**

Students are required to attend and participate in this unit via in-class discussion (in tutorials). Students will be graded on the basis of the quantity and the quality of participation.

What is expected of students: Participate in class based and smaller groups discussions. Read in advance and be prepared to share your work with the class.

The only exception to not sitting an in-class test or examination at the designated time is

because of documented illness or unavoidable disruption. In these circumstances you should consider applying for Special Consideration otherwise you will not receive any mark for this component of assessment.

It is a course requirement that students attend 80% of classes to avoid an automatic Fail. It is an assessment requirement of this unit that students be punctual, attend classes, come prepared and participate in class work and discussions. The roll will be called 10 mins from start of class and late students will be marked as Absent.

Irrespective of the total marks scored in the unit, students MUST submit all the tasks to gain a passing grade in this unit.

On successful completion you will be able to:

- Demonstrate an understanding of the ways in which "health" is understood and experienced across a range of contexts.
- Interrogate key concepts around "health" and normalizing practices, showing an awareness of debates around definitions of these terms
- Outline a theoretically informed account of the relationship between forms of knowledge and forms of embodied subjectivity and sociality
- Apply key methods of critical analysis to evaluate social economic, legal and or medical practices which focus on bodily-being
- Apply the accounts of ethics offered in this unit to an analysis of contemporary practices and debates around "health"
- Compose an analysis of and alternate response(s) to the issues and practices discussed in the unit.

Delivery and Resources

This unit is available via iLearn. Assessments must be handed in by the due date unless a student has applied for Disruption of Studies. Take Home Exam and Final Essay will receive an automatic fail if they are not submitted by due date. Summaries cannot be submitted by email or after due date as they must be presented and discussed in class. Please read carefully details of individual tasks.

Unit Schedule

Week 1: Introduction: What is 'health'?

Essential reading:

Klein, Richard (2010) 'What is Health and How Do You Get it?' in Metzl, Jonathan & Anna Kirkland (eds.) *Against Health: How Health Became the New Morality*, New York: NYUP, pp.15-25.

Week 2: Health, illness and medicalization

Essential readings:

Conrad, Peter & Kristin K. Barker (2010) 'The Social Construction of Illness: Key Insights and Policy Implications', *Journal of Health & Social Behavior*, 51:S, 67-79.

Halfmann, Drew (2011) 'Recognizing Medicalization and Demedicalization: Discourses, Practices, and Identities', *Health*, 16:2, 186-207.

Further readings:

- Conrad, Peter and Joseph W. Schneider (1992) *Deviance and Medicalization: From Badness to Sickness*, Philadelphia: Temple University Press.
- Nye, R. A. (2003) "The Evolution of the Concept of Medicalization in the Late Twentieth Century" in *The Journal of the History of the Behavioral Sciences*, 39:2, pp 115 129
- Conrad, Peter (2007) "Medicalization: Context, Characteristics and Changes" in *The Medicalization of Society*, Baltimore: JHU Press, pp 3 – 19

Week 3: Health promotion and health identities

Essential readings:

Lupton, Deborah (1995) 'Technologies of Health: Contemporary Health Promotion and Public Health', in *The Imperative of Health: Public Health and the Regulated Body*, London: Sage, pp.48-75.

• Fox, Nick J & and Katie J. Ward (2008) 'What are health identities and how may we study them?', *Sociology of Health & Illness*, 30:7, 1007-21.

Further readings:

- Williamson, Deanna & Jeff Carr (2009) 'Health as a resource for everyday life: advancing the conceptualization', *Critical Public Health*, 19:1, 107-122.
- Petersen, Alan & Deborah Lupton (1996) *The New Public Health: Health and Self in the Age of Risk*, London: Sage.
- Ayo, Nike (2012) 'Understanding health promotion in a neoliberal climate and the making of health conscious citizens', *Critical Public Health*, 22:1, 99-105
- Gillick, Muriel (1984) 'Health Promotion, Jogging and the Pursuit of the Moral Life', *Journal of Health Politics, Policy and Law,* 9:3, 369-87.
- Gastaldo, Denise (2000) 'Is Health Education Good for You? Rethinking health education through the concept of biopower', in A. Petersen and R. Bunton (eds.) *Foucault, Health and Medicine*, London: Routledge, 113-33.

Week 4 (beginning 19 August): Biopolitics and disciplinary medicine

Essential readings:

Foucault, Michel (1980) "The Politics of Health in the Eighteenth Century" in Power/
 Knowledge: Selected Interviews and Writings 1972 – 1977 (edited by Colin Gordon) New York:
 Pantheon Books, pp 166 – 182

Renault, E. (2006) Biopolitics and Social Pathologies, Critical Horizons, 7 (1), pp 159 –

Further Readings:

- Armstrong, D. (1995). The Rise of Surveillance Medicine. Sociology of Health & Illness, 17(3), 393 – 404.
- Delaporte, Francois (1994) 'The History of Medicine According to Foucault', in J.
 Goldstein (ed.) Foucault and the Writing of History, Oxford: Blackwell.
- Foucault, M. (2003). The Birth of the Clinic: An Archaeology of Medical Perception (A. M. Sheridan, Trans.). London: Routledge
- Jones, Colin and Roy Porter (eds.) (1994) Reassessing Foucault: Power, Medicine and the Body, London: Routledge.
- Petersen, Alan and Robin Bunton (eds.) (1997) Foucault, Health and Medicine, London: Routledge.

- Scambler, Graham and Paul Higgs (1998) Modernity, Medicine and Health: Medical Sociology Towards 2000, New York: Routledge.
- Turner, Bryan (1987) Medical Power and Social Knowledge (2nd Edition), London: Sage.

Week 5: Tutorial Risk, (in)security, and responsibility

Essential readings:

Novas, C. & Rose, N. (2000) "Genetic risk and the birth of the somatic individual" in *Economy and Society*, 29: 4, 485 – 513

• Nelson, Alison L., Doune Macdonald & Rebecca Abbott (2012) 'A risky business? Health and physical activity from the perspectives of urban Australian Indigenous young people,' *Health, Risk & Society*, 14:4, 325-40.

Further readings:

- Hier, S. P. (2008) "Thinking beyond moral panic: Risk, responsibility, and the politics of moralization" in *Theoretical Criminology*, 12: 2, 173 – 190
- Waldby, Catherine, Martha Rosengarten, Carla Treloar and and Suzanne Fraser (2004)
 "Blood and Bioidentity: Ideas about Self, Boundaries, and Risk Among Blood Donors and People Living with Hepatitis C", *Social Science & Medicine*, 59:7, 1461-1471.
- Galvin, Rose (2002) 'Disturbing Notions of Chronic Illness and Individual Responsibility: Towards a Genealogy of Morals', Health, 6:2, 107-37.

Week 6: Take Home Exam: No lecture no Tutorial

Week 7: Morality and maternity

Essential readings:

Lupton, Deborah (2012) "Precious Cargo": foetal subjects, risk and reproductive citizenship, *Critical Public Health*, 329-40.

Macvarish, Jan (2010) 'The effect of 'risk-thinking' on the contemporary construction of

teenage motherhood', Health, Risk & Society, 12:4, 313-322

Further readings:

- Salmon, Amy (2011) 'Aboriginal Mothering, FASD Prevention and the Contestations of Neoliberal Citizenship', *Critical Public Health*, 21:2, 165-78.
- Faircloth, Charlotte (2010): "If they want to risk the health and well-being of their child, that's up to them": Long-term breastfeeding, risk and maternal identity', *Health, Risk & Society*, 12:4, 357-367.
- Knaak, Stephanie J. (2010) 'Contextualising risk, constructing choice: Breastfeedingand good mothering in risk society', *Health, Risk & Society*, 12:4, 345-35
- Ryan, Kath, Paul Bissell & Jo Alexander (2010) 'Moral Work in Women's Narratives of Breastfeeding', Social Science & Medicine, vol. 70, 951-8
- Leppo, Anna (2012) 'The emergence of the foetus: discourses on foetal alcohol syndrome prevention and compulsory treatment in Finland', *Critical Public Health*, 22:2, 179-191
- Lowe, Pam K. & Ellie J. Lee ((2010) 'Advocating alcohol abstinence to pregnant women: Some observations about British policy', *Health, Risk & Society*, 12:4, 301-311
- McNaughton, Darlene (2011) 'From the womb to the tomb: obesity and maternal responsibility', *Critical Public Health*, 21:2, 179-190
- Bell, Kristen, Darlene McNaughton & Amy Salmon (2009) 'Medicine, morality and mothering: public health discourses on foetal alcohol exposure, smoking around children and childhood overnutrition', *Critical Public Health*, 19:2, 155-170
- Ristovski-Slijepcevic, Svetlana, Gwen E. Chapman and Brenda L. Beagan (2010) 'Being a "good mother": Dietary governmentality in the family food practices of three ethnocultural groups in Canada', *Health*, 14:5, 467-83.
- Keenan, Julia & Helen Stapleton ((2010) 'Bonny babies? Motherhood and nurturing in the age of obesity', *Health, Risk & Society*, 12:4, 369-383.
- Wolf, Joan B. (2010) 'Against Breastfeeding (Sometimes)', in J. M. Metzl & Anna Kirkland (eds.) *Against Health: How Health Became the New Morality*, New York: New York University Press, 83-92.

Week 8: Men's health

Essential readings:

Cranshaw, Paul (2009) 'Critical Perspectives on the Health of Men: lessons from medical sociology,' *Critical Public Health*, 19:3-4, 279-85.

• O'Brien, R., K. Hunt & G. Hart (2009) "The average Scottish man has a cigarette hanging out of his mouth, lying there with a portion of chips": prospects for change in Scottish men's constructions of masculinity and their health-related beliefs and behaviours', *Critical Public Health*, 19:3-4, 363-81.

Further readings:

- Cranshaw, Paul (2007) 'Governing the healthy male citizen: men, masculinity and popular health in *Men's Health* magazine', *Social Science & Medicine*, 65:8, 1605-18.
- Broom, Alex & Philip Tovey (eds.) (2009) Men's Health: Body, Identity, and Social Context, London: Wiley-Blackwell
- Kampf, Antje, Barbara L. Marshall & Alan Petersen (eds.) () *Ageing Men, Masculinities and Modern Medicine*, London: Routledge
- Clarke, Juanne N. (2009) 'The Portrayal of Depression in Magazines Designed for Men (2000-2007)', *International Journal of Men's Health*, 8:3, 202-212.
- Scott-Samuel, Alex, Debbi Stanistreet & Paul Crawshaw (2009) 'Hegemonic masculinity, structural violence and health inequalities', *Critical Public Health*, 19:3-4, 287-292
- Monaghan, Lee F. & Michael Hardey (2009) 'Bodily sensibility: vocabularies of the discredited male body', *Critical Public Health*, 19:3-4, 341-362
- Kampf, Antje (20120) 'Tales of Healthy Men: Male Reproductive Bodies in Biomedicine from "Lebensborn" to Sperm Banks", *Health*, 17:1, 20-36.

Week 9: Pleasures and dangers: drinking (and alcoholism)

Essential readings:

Keane, Helen ((2009) 'Intoxication, harm and pleasure: an analysis of the Australian National Alcohol Strategy', *Critical Public Health*, 19:2, 135-142

Jarvinen, Margaretha ((2012) 'A will to health? Drinking, risk and social class', Health, Risk

& Society, 14:3, 241-256

Week 10: Pleasures and dangers 3: eating (and obesity)

Essential readings:

Schneider, Tanja & Teresa Davis (2010) 'Fostering a Hunger for Health: Food and the Self in *Australian Women's Weekly'*, *Health Sociology Review*, 19:3, 285-303.

LeBesco, Kathleen ((2011) 'Neoliberalism, public health, and the moral perils of fatness', *Critical Public Health*, 21:2, 153-164

Further readings:

- Rich, Emma (2011) "I see her being obesed!"; public pedagogy, reality media and the obesity crisis', *Health*, 15:1, 3-21.
- Lake, Jeffrey (2009) 'The development of surveillance and screening for childhood obesity in the UK', *Critical Public Health*, 19:1, 3-1
- Grønning, Ingeborg, Graham Scambler & Aksel Tjora (2012) 'From Fatness to Badness: The modern morality of obesity', *Health*, 17:3, 266-83
- Spoel, Philippa, Roma Harris and Flis Henwood (2012) 'The moralization of healthy living: Burke's rhetoric of rebirth and older adults' accounts of healthy eating', *Health*, 16:6, 619-35.
- Gough, Brendan & Gareth Flanders (2009) 'Celebrating 'Obese' Bodies: Gay 'Bears' Talk about Weight, Body Image, and Health, *International Journal of Men's Health*, 8:3, 235-53.
- Badger, Shirlene (2010) "Where the Excess Grows": Demarcating "Normal" and "Pathologically" Obese Bodies', in E. Ettorree (ed.) *Culture, Bodies and Sociology of Health*, Farnham: Ashgate, 137-54.
- Berlant, Lauren (2010) 'Risky Bigness: On Obesity, Eating, and the Ambiguity of "Health", in J. M. Metzl & Anna Kirkland (eds.) *Against Health: How Health Became the New Morality*, New York: New York University Press, 26-39.
- Koteyko, Nelya (2010) 'Balancing the Good, the Bad and the Better: A discursive perspective on probiotics and healthy eating', *Health*, 14:6, 585-602.
- Murray, Samantha (2009) 'Marked as "Pathological": "Fat" Bodies as Virtual Confessors',

in J. Wright and J. Harwood (eds.) *Biopolitics and the 'Obesity Epidemic'*, London: Routledge, 78-90.

Week 11: Pleasures and dangers 4: sex (and contagion)

Essential readings:

Gagnon, Marilou, Jean Daniel Jacob & Dave Holmes (2010) 'Governing through (in)security: a critical analysis of a fear-based public health campaign', *Critical Public Health*, 20:2, 245-56.

• Polzer, Jessica C. & Susan Knabe (2012) 'From Desire to Disease: Human Papilloma Virus (HPV) and the Medicalization of Nascent Female Sexuality', *Journal of Sex Research*, 49:4, 344-52.

Further readings:

- Marshall, Barbara (2012) 'Medicalization and the Refashioning of Age-Related Limits on Sexuality', *Journal of Sex Research*, 49:4, 337-343
- Giami, Alain & Christophe Perrey (2012) 'Transformations in the Medicalization of Sex: HIV Prevention between Discipline and Biopolitics', *Journal of Sex Research*, 49:4, 353-361
- Connell, Erin & Alan Hunt (2010) The HPV Vaccination Campaign: A Project of Moral Regulation in an Era of Biopolitics', *Canadian Journal of Sociology*, 35:1, 63-82.
- Kim, Eunjung (2010) 'How Much Sex is Healthy? The Pleasures of Asexuality', in J. M. Metzl & Anna Kirkland (eds.) *Against Health: How Health Became the New Morality*, New York: New York University Press, 157-69.

Week 12: Consuming Health

Essential readings:

Lee F. Monaghan, Robert Hollands and Gary Prtichard (2010) "Obesity Epidemic Entrepreneurs: Types, Practices and Interests" *Body & Society*2010 16: 37

Maria Fannin (2013) "The Hoarding Economy of Endometrial Stem Cell Storage" *Body* & *Society* 2013 19: 32

Week 13: Summary Lecture

Policies and Procedures

Macquarie University policies and procedures are accessible from <u>Policy Central</u>. Students should be aware of the following policies in particular with regard to Learning and Teaching:

Academic Honesty Policy http://mq.edu.au/policy/docs/academic_honesty/policy.html

Assessment Policy http://mq.edu.au/policy/docs/assessment/policy.html

Grading Policy http://mq.edu.au/policy/docs/grading/policy.html

Grade Appeal Policy http://mq.edu.au/policy/docs/gradeappeal/policy.html

Grievance Management Policy http://mq.edu.au/policy/docs/grievance_management/policy.html

Disruption to Studies Policy <u>http://www.mq.edu.au/policy/docs/disruption_studies/policy.html</u> The Disruption to Studies Policy is effective from March 3 2014 and replaces the Special Consideration Policy.

In addition, a number of other policies can be found in the Learning and Teaching Category of Policy Central.

Student Code of Conduct

Macquarie University students have a responsibility to be familiar with the Student Code of Conduct: https://students.mq.edu.au/support/student_conduct/

Results

Results shown in *iLearn*, or released directly by your Unit Convenor, are not confirmed as they are subject to final approval by the University. Once approved, final results will be sent to your student email address and will be made available in <u>eStudent</u>. For more information visit <u>ask.m</u> <u>q.edu.au</u>.

Student Support

Macquarie University provides a range of support services for students. For details, visit <u>http://stu</u> dents.mq.edu.au/support/

Learning Skills

Learning Skills (<u>mq.edu.au/learningskills</u>) provides academic writing resources and study strategies to improve your marks and take control of your study.

- Workshops
- StudyWise
- Academic Integrity Module for Students

Ask a Learning Adviser

Student Services and Support

Students with a disability are encouraged to contact the **Disability Service** who can provide appropriate help with any issues that arise during their studies.

Student Enquiries

For all student enquiries, visit Student Connect at ask.mq.edu.au

IT Help

For help with University computer systems and technology, visit <u>http://informatics.mq.edu.au/hel</u>p/.

When using the University's IT, you must adhere to the <u>Acceptable Use Policy</u>. The policy applies to all who connect to the MQ network including students.

Graduate Capabilities

Capable of Professional and Personal Judgement and Initiative

We want our graduates to have emotional intelligence and sound interpersonal skills and to demonstrate discernment and common sense in their professional and personal judgement. They will exercise initiative as needed. They will be capable of risk assessment, and be able to handle ambiguity and complexity, enabling them to be adaptable in diverse and changing environments.

This graduate capability is supported by:

Assessment tasks

- Essay
- Participation

Discipline Specific Knowledge and Skills

Our graduates will take with them the intellectual development, depth and breadth of knowledge, scholarly understanding, and specific subject content in their chosen fields to make them competent and confident in their subject or profession. They will be able to demonstrate, where relevant, professional technical competence and meet professional standards. They will be able to articulate the structure of knowledge of their discipline, be able to adapt discipline-specific knowledge to novel situations, and be able to contribute from their discipline to inter-disciplinary solutions to problems.

This graduate capability is supported by:

Learning outcomes

· Demonstrate an understanding of the ways in which "health" is understood and

experienced across a range of contexts.

- Interrogate key concepts around "health" and normalizing practices, showing an awareness of debates around definitions of these terms
- Outline a theoretically informed account of the relationship between forms of knowledge and forms of embodied subjectivity and sociality
- Apply key methods of critical analysis to evaluate social economic, legal and or medical practices which focus on bodily-being
- Apply the accounts of ethics offered in this unit to an analysis of contemporary practices and debates around "health"
- Compose an analysis of and alternate response(s) to the issues and practices discussed in the unit.

Assessment tasks

- Reading summaries
- take-home exam
- Essay plan
- Essay
- Participation

Critical, Analytical and Integrative Thinking

We want our graduates to be capable of reasoning, questioning and analysing, and to integrate and synthesise learning and knowledge from a range of sources and environments; to be able to critique constraints, assumptions and limitations; to be able to think independently and systemically in relation to scholarly activity, in the workplace, and in the world. We want them to have a level of scientific and information technology literacy.

This graduate capability is supported by:

Assessment tasks

- take-home exam
- Essay plan
- Essay

Problem Solving and Research Capability

Our graduates should be capable of researching; of analysing, and interpreting and assessing data and information in various forms; of drawing connections across fields of knowledge; and they should be able to relate their knowledge to complex situations at work or in the world, in order to diagnose and solve problems. We want them to have the confidence to take the initiative in doing so, within an awareness of their own limitations.

This graduate capability is supported by:

Assessment task

• Essay

Effective Communication

We want to develop in our students the ability to communicate and convey their views in forms effective with different audiences. We want our graduates to take with them the capability to read, listen, question, gather and evaluate information resources in a variety of formats, assess, write clearly, speak effectively, and to use visual communication and communication technologies as appropriate.

This graduate capability is supported by:

Assessment tasks

- · Reading summaries
- take-home exam
- Essay
- · Participation

Engaged and Ethical Local and Global citizens

As local citizens our graduates will be aware of indigenous perspectives and of the nation's historical context. They will be engaged with the challenges of contemporary society and with knowledge and ideas. We want our graduates to have respect for diversity, to be open-minded, sensitive to others and inclusive, and to be open to other cultures and perspectives: they should have a level of cultural literacy. Our graduates should be aware of disadvantage and social justice, and be willing to participate to help create a wiser and better society.

This graduate capability is supported by:

Assessment tasks

- Reading summaries
- take-home exam
- Essay
- Participation