On several occasions I have been with my brother Herodicus or some other physician to see one of his patients, who would not allow the physician to give him medicine, or apply a knife or hot iron to him; and I have persuaded him to do for me what he would not do for the physician just by the use of rhetoric . . .


Life and death, hope and healing, disease and wellness, risk and safety, innovation and tradition—these are among the topics of the rhetoric of medicine. In this course, we will consider medicine and health from a humanistic perspective. More specifically, we will investigate the rhetorical dimensions of medicine and health across interactional, institutional, and public settings. Our primary objectives will be to explore how our understanding of health and illness is influenced by rhetorical norms and practices; how provider-patient interaction, institutional imperatives, and public deliberation structure health care opportunities and decision-making; how medical discourses contribute to or inhibit improved health care practices and policies; and what these reveal about the character and functions of rhetoric in shaping health and medicine. Case studies will delve deeply into the discourses of death and dying, contagion, the body in medicine, biopower, and other topics.

"Be careful about reading health books. You may die of a misprint."

--Quotation attributed to Mark Twain
COURSE OBJECTIVES

To develop increased awareness of the rhetoric of health and medicine, this course has the following four objectives:

1. **HISTORY**
   To gain a deeper understanding of the history and context from which current rhetoric about health and medicine emerged.
   
   *To achieve this aim, we will identify key concepts, figures, ideas, historical developments and policies that influence current discourses of health and medicine.*

2. **CRITICISM**
   To develop facility reading texts about medicine and health rhetorically.
   
   *To cultivate an appreciation of the ethical and political dimensions of the rhetoric of medicine.*
   
   *To achieve these aims, we will read, discuss, interpret, and evaluate texts related to rhetoric and health with a specific focus on key concerns from the rhetorical tradition.*

3. **THEORY**
   To gain insight into how the rhetoric of medicine shapes our understanding of bodies, wellness, and disease.
   
   *To achieve this aim we will isolate recurrent patterns, themes, tensions, arguments, and metaphors pervasive in the rhetoric of medicine and health and critique their implications for thought and action.*

4. **PRACTICE**
   To consider how our own rhetorical practices contribute to the public discussion and private understanding of health and medicine.
   
   *We will also consider the implications of our own rhetorical practices for understanding bodies and health, health policy, disease and wellness and so on.*

READINGS AND COURSE TEXTS

Most of the readings for this course will be posted on the course website under the link “Readings.” You will need to download them, mark them up, and bring them to class. In addition to your required typed reflection, for each class, students will be responsible for identifying one passage from each article to bring up for discussion. We will primarily be reading journal articles in communication, English, and sociology/anthropology of medicine. In addition, students are required to purchase two books:

1. Judy Z. Segal, *Health and the Rhetoric of Medicine* (Southern Illinois UP, 2007); and

WHAT KIND OF CLASS IS THIS?

Although we will engage in a variety of activities, the course designation gives a clue about our primary activity: discussion. The term *seminar* generally refers to a small group of advanced students who engage in **intensive study** and/or **original research** on a particular topic, and who meet regularly under the supervision of a professor to discuss their progress. In addition to honing our critical thinking skills through discussion, we will enrich them through two other activities: first, by formulating a typewritten reflection for each set of assigned readings that challenges, extends, or problematizes some key aspect or aspects of the texts; and second, by composing in stages and presenting and original example of rhetorical criticism of a health care or medical text suitable for presentation at a professional convention. The seminar will be conducted according to the tenets of critical feminist pedagogy as taught in the medical humanities by Brad Lewis. We will talk about how this will work in practice on our first meeting, but respect and rigor are key terms.
COURSE REQUIREMENTS

Measure of Evaluation                  Percentage of Course Grade                  Assessment Dates
Class Participation                    20% of final grade                      daily and continuous
Typed Weekly Reflections               40% of final grade                      collected each session
Final Paper Project                    40% of final grade                      final draft due 5/3**

**This assignment will be divided into parts with earlier due dates and point values.

OVERVIEW OF COURSE REQUIREMENTS

Class Participation
Class participation includes coming to class having carefully read the assigned material, listening closely to your classmates’ comments during class, enthusiastically trying in-class exercises, bringing in outside material pertinent to our discussions, and contributing your ideas to the class. Class participation is not credit for mere attendance. It is credit for active and insightful engagement that is both respectful of others and intellectually robust.

Typed Weekly Reflections
Each week you turn in one typed discussion question that responds to the readings. These will be graded on a check (B), check plus (A), check minus (C), check minus minus scale (D; or some combination thereof). At the end of the term, these scores will be considered as a whole when assigning your grade for this portion. More details to come.

Final Paper
Over the course of the term, you will compose an original ~25 page final paper that analyzes a medical or health care artifact from a rhetorical perspective. This project includes a paper proposal, a draft review of literature, the final paper, and an oral presentation of the final paper to the class, with extensive professor and peer commentary along the way. More specific guidelines will be given later in the term. There will be no final exam for this class. This paper is a substitute. PhD students are encouraged to compose a book review for publication submission of a recent book related to their final paper that they will read in preparation for their final paper.

GRADING

Numerical grades assigned for each of the above will be translated into letter grades as follows:

>93 = A   87–89 = B+   77–79 = C+   67–69 = D+   <60 = F
90–92= A-  83-86 = B   73-76 = C   63–66 = D
80–82 = B-  70–72 = C-   60–62 = D-
# Course Philosophy, Policies, and Classroom Conduct

The university is a place where the free exchange of ideas should flourish. In this class, we will foster an environment of debate and healthy disagreement that nonetheless upholds the values of respect and civility for other persons. Both students and instructors share responsibility for fostering a supportive learning environment. In short, my vision for this course is one in which all of the members of the class work towards the collective goal of better understanding the rhetoric of medicine. I believe that we all have something to learn from other and look forward to fostering an environment in which we can help each another succeed. Just in case you wanted further guidance, the University of Colorado’s policy on proper classroom decorum may be reviewed at [http://www.ucdenver.edu/policies/classbehavior.html](http://www.ucdenver.edu/policies/classbehavior.html). Consideration for others includes arriving on time, turning off pagers and cell-phones, using laptops for note-taking purposes only, and leaving pets at home. This seminar will be conducted in an informal, interesting, and understandable manner. Please do not let the open nature of the class fool you. I still expect high quality work on the day it is assigned. All written work (think pieces, discussion questions, etc.) is due at the beginning of class on the day it is listed on the syllabus. In addition, it must be typed and double-spaced. Assignments should be free of grammar and spelling errors and, when required, contain a list of works cited. Late work will not be accepted except under verifiable extenuating circumstances. Students must complete all work in order to pass the course.

# ADA Statement

Students with disabilities who qualify for academic accommodations must provide a letter from Disability Services and discuss specific needs with the professor preferably within the first two weeks of the term.

# Academic Integrity, Plagiarism, and the Honor Code

Academic integrity violations—cheating, plagiarism, letting someone else use your written work—are absolutely not tolerated and will result in failure of the course. An academic integrity violation may include (but is not limited to) either a) turning in someone else’s work as if it were your own, or b) providing your work to someone else to turn in as if it were their own. Work that is not yours would include, for example, a think piece written by someone else, a paper or other written work composed by someone else or copied from another source, or a final paper lifted from the internet. Please note that your instructor takes plagiarism and cheating very seriously. In other words, do not even think of misrepresenting material copied from an on-line source or another student. Rather than being tempted, please let me know in advance if you are having difficulties with your assignment, and we will work them out together. The CU Honor Code specifies additional violations of academic integrity that will also not be tolerated. You may wish to read the UCD Honor Code every now and again.

# Attendance, Arrivals and Departures

You are expected to come to class having read the assigned material. If you must miss class, it is your responsibility to obtain notes and handouts from your peers. Excessive absences (more than one class for graduate students) will result in a 5 point reduction of your final course grade per absence. Leaving class early and coming when class is in progress shall be counted as absences if they exceed 15 minutes or if they happen routinely. Students who have conflicts between religious observance dates and course requirements should talk to me during the first week of class to make other arrangements for completing assignments. If you are late, it is your responsibility to sign the attendance sheet and obtain missed notes and handouts from your peers.
TENTATIVE COURSE SCHEDULE

With a salient topic such as this one, we will remain somewhat fluid and flexible with our schedule. I may alter some of the readings as we progress depending on learning needs, so check the website for current assignments before you read. In general, I end each class session by reviewing what we have accomplished and previewing our goals for next time, including a preview of the reading assignments. This short exercise will help keep us on the same page. Because this course is a seminar, I will keep the lectures to a minimum, except for the first two sessions and the biopower and risk society sessions.

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic</th>
<th>Reading/Assignment</th>
</tr>
</thead>
</table>
### 1-2 page paper proposals must be uploaded to Blackboard course website by February 17.

#### Feb 22
- Health & the Risk Society

#### March 1
- The Body as Signifier

#### March 8
- Narrative and Metaphor

#### Mar 15
- Book I: Segal
  - ** Chunk 1 of paper inc. literature review must be uploaded to Blackboard by Wednesday March 17 at noon. **

#### Mar 29
- Book I: Segal II
  - Segal II, page 74-the end

#### April 6
- Book II: Wald
  - Priscilla Wald, *Contagious*: Each Student Will read Chapter 1 and The Epilogue and will be assigned one other chapter to report on to the class.

#### April 12
- Visit from Dr. Therese Jones, Director of the Center for Arts & Humanities in Health Care, UCD and Editor, *Journal of Medical Humanities*
  - ** READING TBD BY DR. THERENSE JONES **
    - The Second Half of Class will be a Paper Workshop; Details TBD

#### April 19
- Death and Dying
  - The Five Wishes Document

#### April 26
- Class Choice
  - Readings determined by class preference; We may conduct a case study of Obama Health Care Rhetoric.

#### May 3
- Paper Presentations
  - ** Oral Paper Presentations and Final Papers Due in Hardcopy in class **

---

**NOTES:**

**May 10 Class Celebration TBD.**