

Lesson Resource Kit: Healthy Living in Ontario

Grade 8: Creating Canada, 1850-1890 Canada, 1890-1914: A Changing Society



Children being washed by a nurse at school, ca. 1905
Public Health Nursing Branch
Reference Code: RG 10-30-2
Archives of Ontario, I0005195

Introduction

Designed to fit into teachers' practice, this resource kit provides links, activity suggestions, primary source handouts and worksheets to assist you and your students in applying, inquiring, and understanding Canada between 1850 and 1914.

Topic

The development of Ontario's public health system

Source

Promotion of Healthy Living in Ontario online exhibit (click here to access online exhibit)

Use the Archives of Ontario's online exhibit on the promotion of healthy living in Ontario:

- As a learning resource for yourself
- As a site to direct your students for inquiry projects
- As a place to find and use primary sources related to the curriculum



Themes that can be addressed

- Use of primary sources
- The development of urban centres
- Technological advances
- Social reform movements

Curriculum Links

Strand A. Creating Canada, 1850-1890

Overall Expectations	Historical Thinking Concepts	Specific Expectations
A1. Application: the New Nation and its Peoples	Cause and Consequence, Historical Perspective	A1.3
A2. Inquiry: Perspectives in the New Nation	Historical Perspective, Historical Significance	A2.1, A2.2, A2.4, A2.5, A2.6
A3. Understanding Historical Context: Events and Their Consequences Historical Significance, Cause and Consequence		A3.1, A3.2, A3.3, A3.4, A3.5

Strand B. Canada, 1890-1914: A Changing Society

Overall Expectations	Historical Thinking Concepts	Specific Expectations
B1. Application: Changes and Challenges	Continuity and Change; Historical Perspective	B1.1, B1.2, B1.3
B2. Inquiry: Perspectives in British North Americans	Historical Perspective; Historical Significance	B2.1, B2.2, B2.4, B2.5, B2.6
B3. Understanding Historical Context: Events and Their Consequence	Historical Significance; Cause and Consequence	B3.1, B3.2, B3.3, B3.4



Assignment & Activity Ideas

Inquiring into Healthy Living

- The historical inquiry process involves five steps:
 - → Formulating a question
 - → Gathering and organizing information or evidence
 - → Interpreting and analysing information or evidence
 - → Evaluating information or evidence and drawing conclusions
 - → Communicating findings
- The curriculum highlights that these steps do not have to be completed sequentially nor together. You may wish to explore specific steps based on your students' readiness and prior knowledge or your own resources and time. See pages 22-24 in the 2013 revised Ontario Social Studies and History curriculum for more details. (click here for the revised curriculum)
- Using a primary source handout from this kit, introduce your students to the topic
 of the life at the turn of the century. Ask students to ask questions of the primary
 source provided. Use these questions as a jumping off point to explore these
 historical issues of life in rural communities during this time period in more depth.
- Use The Promotion of Healthy Living in Ontario online exhibit as a source to
 point your students for their own inquiry project. Here, they can view primary
 sources and secondary information to gather and organize historical evidence to
 interpret, evaluate, and communicate. (click here to access the online exhibit)

One Source, Many Questions

- Using one of the primary source handouts found in this teaching kit, ask students to identify the 5Ws (who, what, where, when, and why). The *Identifying My Primary Source* worksheet in this kit can help in this task.
- Ask students to zoom in on one of the aspects of the source they found strange, familiar, or interesting and identify them to the class. Write these things on the board and group them according to theme.
- Use one or more of these themes as an introduction to an inquiry-based assignment. Have students work in collaborative groups, individually, or as a class on short or long term project(s) researching the historical context of the primary source.



Health and Life: Urbanization and industrialization

- Starting with the *Caricature of Charles Hastings* primary source found in this kit, discuss with your students themes related to industrialization and the 'cleaning up' of urban centres during the turn of the century. Also discuss the conditions of life for many urban poor in Ontario during this time.
- Use the other primary sources to go further into a discussion of actions taken by various groups and/or individuals in Canada to improve their health and lives during this period. This can invite a discussion of cause and consequence of growth, urban development, and health promotion

A Changing Canada: Health Promotion

- Using primary sources found in this kit as well as the online exhibit *The Promotion of Healthy Living in Ontario*, have students create a brochure warning someone about the health dangers of urban centres at the turn of the century.
 (click here to access the online exhibit)
- Encourage students to use a blend of images, text, fact and fiction to create a product they can present in a fictionalized 19th century "Health Fair"

Treating Illness: Similarities and differences

- Using the primary sources provided, have a discussion about similarities or differences between health care today and in the early 1900s.
- Ask students if they think if something like the flu would have been treated the same or different now. Gathering options can be done actively using a Four Corners approach, by secret ballot to be revealed following the unit, or by a tally on the board
- Using the Influenza Poster primary source, found in this kit ask students to fill out the corresponding worksheet Treating the Flu in the 1900s and Today: Similarities and differences.
- Ask students to vote on whether the evidence shows that the flu would have been treated the same or different now as in the past. Compare this vote to the vote at the beginning of the lesson.
- Have a discussion about expectations of the past: Do we think of the past as "backward"? Why do we think this? Is it always true? Are there lessons from the past we use today?
- Extension: Continue the activity with a different illness or health concern that may not be as prominent today.



Handouts & Worksheets

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Introduction to Primary Sources



A **primary source** is a document or object from the past created by people who lived during that time. Primary sources provide a view into an event or experience that only people living during that time could have experienced.

Archives collect and preserve primary sources so that students can learn history from the experiences of people who were there. In an archive, primary sources are called records. In a museum, primary sources are called artifacts.

Primary Sources	Secondary Sources	
Original material from the past	Material people today write about the past	
Example:	Example:	
Letters	Textbooks	
Diaries	Reference books	
Photographs	Websites such as Wikipedia	
Paintings and other art work	Current news articles	
Graphs	Documentaries and films	
Maps		

What are some other examples of primary and secondary sources?

Can sources be both primary and secondary?



Identifying My Primary Source

Name of primary source:		
What type of primary source is it?		
What is happening in this primary source?		
Who created it?		
Why was it created?		
When was it created?		
Where was it created?		
What when you look at this source, do you find anything strange about it?		
When you look at this source, do you find anything familiar about it?		
What do you want to know about this primary source?		



What do you want to know about the people in the primary source?		
What is the most interesting thing about this primary source?		



The Sale of 'Unsanitary' Ice Cream (1905)



The sale of 'unsanitary' ice cream, ca. 1905 Public Health Nursing Branch Reference Code: RG 10-30-2, 3.02.5 Archives of Ontario, I0005187

Questions to think about:

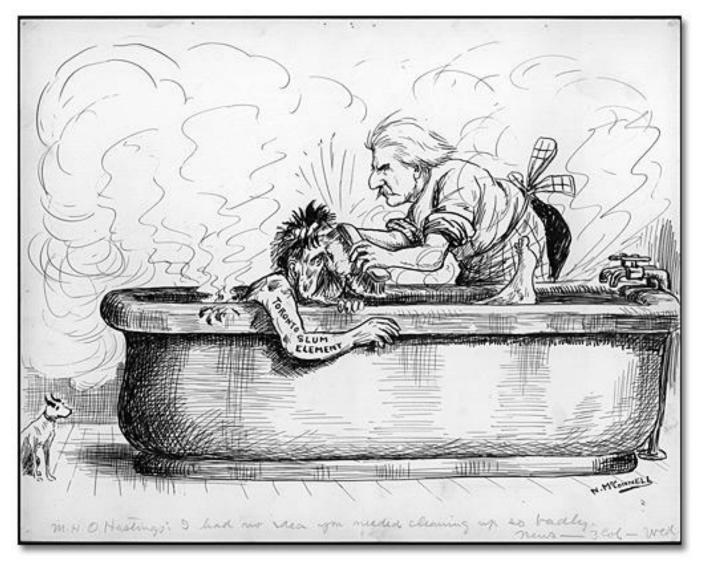
What does "unsanitary" mean?

What would make ice cream "unsanitary"?

Do you think the children buying the ice cream think there is anything wrong with it?



A Caricature of Charles Hastings (1910)



"M. H. O Hastings: I had no idea you needed cleaning up so badly".

A caricature of Charles Hastings, Toronto's Medical Health Officer, and commentary on his attempts to make Toronto cleaner and healthier, ca. 1910-14

Newton McConnell fonds

Reference Code: 301, 61

Archives of Ontario, I0006074



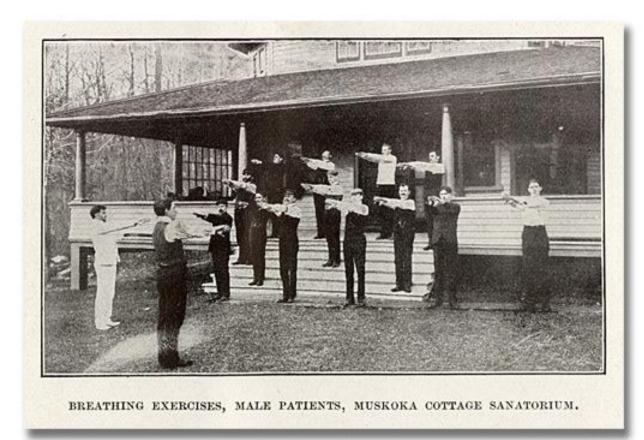
Children Being Measured at the School Clinic (1905)



Children being measured at the school clinic, ca. 1905
Public Health Nursing Branch
Reference Code: RG 10-30-2, 3.03.2
Archives of Ontario, I0005191



Breathing Exercises, Male Patients, Muskoka Cottage Sanatorium



Breathing Exercises, Male Patients, Muskoka Cottage Sanatorium Reference Code: F 1369-1-0-1 Archives of Ontario



Disinfecting railway cars for foot and mouth disease, 1908



Disinfecting railway cars for foot and mouth disease, 1908

John Boyd fonds

Reference Code: C 7-3-1672

Archives of Ontario, I0003363



Influenza Poster, 1918

PROVINCIAL SECRETARY'S DEPARTMENT

12 001. 1918



ONTARIO
PROVINCIAL BOARD OF HEALTH

INFLUENZA

PRECAUTIONS

Warning to Health Authorities

"'Health authorities have the power under Section 56, ss. 2, of the Public Health Act to close schools, churches, theatres and other places of assemblage if it is deemed advisable to do so.' Asked what the Board advises regarding this measure, we have said: 'The weight of public health authority is against closing such places, except perhaps in country districts, for the following reasons, viz.: In cities and towns it is impossible to prevent children commingling in the streets and playgrounds where they are without the supervision found in the schools. Hence closing schools is more effective in country districts. Closing schools is economically wasteful, and usually has no influence on the course of an outbreak of disease like influenza. Children are less likely to infect one another in the class-room than in the home or on the playground.'

"As a rule better results will be achieved by a daily inspection of school children, such as for example is maintained in cities like Toronto.

"There is no great danger of spreading the disease in churches, theatres and other assemblages, if these places are well ventilated. In any case, the good derived from closing places of assemblage is more than counterbalanced by the conditions in crowded street cars, railway cars, in large shops and in restaurants where food and dishes may be handled by persons having the disease. It would be just as rational and much more effective to stop all travel on street cars and trains and to stop people from entering shops, eating places, etc., as to close schools, churches, theatres, etc.

"Health officers should do nothing consistent with the welfare of the public, likely to dislocate business or the ordinary affairs of life. They should not be moved from their duty by public clamor, to adopt fussy and ill-advised measures, which only serve to irritate the public and accomplish no useful purpose. If, however, the health officer of any municipality deems it his duty to utilize the section of the Act referred to the Provincial Board will not interfere with him, but the Board does not, for the reasons given, propose to ask its enforcement."

Ontario is confronted by an epidemic of influenza which will in all probability affect more than half of our pulation. There is a shortage of physicians, nurses, and hospital accommodation. The health and efficiency of the civilian population must be maintained. It is the patriotic duty of every citizen to avoid influenza and keep in good health. To avoid influenza:

Avoid contact with other people so far as possible. Especially avoid crowds indoors, in street cars, theatres, motion-picture houses, and other places of public assemblage.

Avoid persons suffering from "colds," sore throats and coughs.

Avoid chilling of the body or living in rooms of temperature below 65 deg. or above 72 deg. F.

Sleep and work in clean, fresh air.

Keep your hands clean, and keep them out of your mouth. Avoid expectorating in public places, and see that others do likewise.

Avoid visiting the sick.

Eat plain, nourishing food and avoid alcoholic stimulants.

Cover your nose with your handkerchief when you sneeze, your mouth when you cough. Change handkerchiefs uently. Promptly disinfect solled handkerchiefs by boiling or washing with soap and water.

Don't worry, keep your feet warm. Wet feet demand prompt attention. Wet clothes are dangerous and must be removed as soon as possible

What to do for Influenza and Colds

Oftentimes it is impossible to tell a cold from mild influenza. Therefore: If you get a cold go to bed in a well ventilated room. Keep warm.

Keep away from other people. Do not kiss anyone. Use individual basins, and knives, forks, spoons, towels, handkerchiefs, soap, wash plates and cups.

Every case of influenza should go to bed at once under the care of a physician. The patient should stay in bed at least three days after fever has disappeared and until convalescence is well established.

The patient must not cough or sneeze except when a mask or handkerchief is held before the face. He should be in a warm, well ventilated room.

There is no specific for the disease. Symptoms should be met as they arise.

The great danger is from pneumonia. Avoid it by staying in bed while actually ill and until convalescence is

The after effects of influenza are worse than the disease. Take care of yourself.

Influenza poster, 1918 Secretary of the Board of Health and Chief Medical Officer of Health subject files Reference Code: RG 62-4-9-450a.1 Archives of Ontario



Treating the Flu in the 1900s and Today: Similarities and Differences

Looking at the primary source *Influenza Poster* published in 1918. List each piece of advice in the columns provided.

Similarities	Differences

Looking at the evidence,

do you think treating the flu has changed much since the 1900s?