

**Teaching Global Health in the Time of Covid-19: Key Concepts  
for Social Studies Classrooms**

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**Abstract:**

This article highlights the promise of global health approaches for social studies curricula, especially urgent in the time of the Covid-19 pandemic. Focusing on six facets that inform a global health perspective, the authors offer social studies educators an approach from this applied field of study to support lessons and curriculum on Covid-19 across sociology, geography, and other disciplines within social studies education. The authors provide select digital resources for teachers and students to use in learning and teaching about the Covid-19 pandemic through a global health perspective aligned with the National Council for the Social Studies' Thematic Standards.

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**Introduction**

Social studies educators are faced with a double-edged challenge. On the one hand, there is an urgent need to explain the Covid-19 pandemic to students and to keep them informed of the latest medical, political, and social understandings of the virus, its effects, and the nature of the pandemic. Some would argue that social studies educators have an ethical imperative to teach students about the pandemic in ways that are informed, reasoned, and oriented toward allaying students' fears and promoting protective measures. Such an approach would work toward promoting understandings of the pandemic that are in support of healthy emotional stances against fear, resentment, confusion, and anger (Zembylas, 2015), as well as practical measures informed by public health expertise.

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Teaching about the pandemic can be an opportunity for social studies educators to position their curriculum as a resource that promotes peace, healing, and global citizenship (Davies, 2004). On the other hand, however, there exists the dilemma of which fields of study and sources of knowledge social studies educators can turn to for shaping and informing the curriculum they teach. For the most part, social studies educators have not taken courses in virology, epidemiology, and cellular biology. While such fields of study may be relevant and important for teachers of the natural sciences, we argue that there are more immediate and accessible fields of study that hold promise for social studies educators when broadening their knowledge base about the Covid-19 pandemic. One such field, the field of global health, is well suited for equipping social studies educators with concepts, terminology, and perspectives that complement existing curricula in sociology, geography, economics, and other disciplines of the social studies.

In this article, we present six key concepts, drawing primarily from the fields of global health and sociology. These concepts enable students to learn about global health and to apply students' own "sociological imaginations" (Mills, 2000) to understanding the pandemic. By making the connection between biography and history through understanding how this pandemic affects their lives. By applying ideas from sociology and global health to understand how key concepts may shape the experience and trajectory of the pandemic, students can engage in social scientific thinking while learning about the pandemic within existing social studies education curricula. While there are many additional public health ideas educators may find valuable and important to incorporate into lesson plans such as herd immunity, prevention methods, and stigma, we focus on broad, more structural global health concepts.

We draw on global health studies, the sociology of health, illness, and development, and other social sciences to highlight a global health approach that we encourage social studies educators to use in their lessons and curriculum. Integrating global health within the social studies curriculum can help move students to think about their lives and the pandemic sociologically, integrate global themes and ideas to the social studies curriculum, and have students consider how key axes of difference such as power, inequality, political economy, and more shape experiences and pathways of this pandemic, not just interpersonally but also internationally and globally.

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### **Defining Global Health**

Much like the very idea of social studies itself, global health is encompassing and shared among many disciplines, including but not limited to the social sciences. Global health is a multi-dimensional, somewhat unstructured term. This is partly because different disciplines (e.g., public health, sociology, anthropology) conceptualize global health differently. There appears to be, however, a baseline agreement that global health is the study of health across national borders (Beaglehole & Bonita, 2010); that is, global health as a field of inquiry is focused on health challenges, solutions, and determinants across the planet. It is important to note that this definition is global in scope and should be distinguished from previous fields that focused on “international health” or date even further back to the field of “tropical medicine” with an overtly exoticized focus on diseases “over there” in the Global South (Noy, 2019). In this way, global health recognizes that risk is shared globally, albeit not equally. A global health approach reduces stigma of certain populations and regions, a crucial move for social studies educators to make in light of how some people refer to the novel coronavirus in harmful, racist ways, ranging from the “Wuhan virus and “Chinese virus” to the “Kung flu” (Wang, 2020).

Global health encompasses clinical care of individuals and the medical field, but also the social systems and institutions that organize the provision of care, preventative as well as curative approaches, coordination across countries, and both infectious diseases (such as Covid-19 and other pandemics as well as Ebola and tuberculosis) and non-infectious diseases (such as cancer and heart disease). Furthermore, ideas from global health studies provide opportunities for social studies educators to integrate concepts and ideas to support students’ systems and economic thinking skills. This can be supported in teaching about the global differences and similarities in financing health care, as well as the production, distribution, and consumption of pharmaceuticals and medical equipment. Indeed, the fourth disciplinary component of economics in Dimension 2 of the College, Career, and Civic Life (C3) Framework for Social Studies State Standards focuses on the global economy. In this framework, students are asked to consider how “economic globalization occurs with cross-border movement of goods, services, technology, information, and human, physical, and financial capital” (NCSS, 2013, p. 39). Social studies educators can use global health as a conceptual horizon for designing inquiries when teaching lessons aligned to the disciplinary concept of the global economy. One such inquiry may ask students to analyze the role of comparative advantage in determining how vaccines for Covid-19 are researched, tested, manufactured, and distributed for consumption within countries and across countries globally.

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### **What is a Global Health Perspective?**

Interest in global health and global health education has grown over the last few decades (Kerry et al., 2011). Health care costs have surged in response to advances in medical technologies, ageing populations, and the rise of chronic diseases. At the same time, there is growing concern about equity, equal access, and the centrality of the state in ensuring people's right to healthcare. At the forefront of these challenges are national health systems and the international organizations that provide support and facilitate coordination across borders (such as the World Health Organization and Doctors Without Borders/Médecins Sans Frontières).

In an increasingly connected reality—not only via communication but through trade, travel, and migration—pressing public health challenges extend beyond national and regional boundaries. Covid-19 provides a real-time example of the ways in which governments, individuals, businesses, and other institutions and groups are struggling to address this global health challenge. These contemporary challenges and debates in global health can and should be integrated in social studies classes, especially now, as they can prompt students to think about Covid-19 in comparative, broad perspectives. For these and other reasons, a global health perspective supports geographic and spatial thinking skills. The third disciplinary component of geography in Dimension 2 of the College, Career, and Civic Life (C3) Framework for Social Studies State Standards focuses on human population and spatial patterns and movements. A global health perspective supports this disciplinary concept when teaching about Covid-19. For example, students can map and trace the movement and spread of the novel coronavirus across different regions of the world. This allows analysis of how relationships between humans and environments extended or contracted spatial patterns, thinking about networks and connections of transmission of the virus and how such spatial patterns of transmission are in flux with regards to hot spots and outbreaks of the virus.

At the time of this writing, the United States is grappling with a continued string of outbreaks that proliferate across different regions of the country. Students could use a global health approach to compare and contrast responses to the pandemic in the United States, Brazil, Sweden, and New Zealand, as some examples. A global health perspective could also better enable social studies educators to design instruction that “evaluates the impact of economic activities and political decisions on spatial patterns within and among urban, suburban, and rural regions” (NCSS, 2013, p. 43). Students could think globally about how such regional variation affected early outbreaks of the pandemic in northern Italy, Wuhan, and New York City, respectively.

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**Preliminary Social Scientific Insights During Covid-19**

Covid-19 has required societies across the world to reimagine everyday aspects of their social lives. Physical distancing, masks, hand-washing, and sanitization are fundamentally reshaping social interactions as well as creating tension and disagreement across civic dimensions of public life, from policy debates over economic reopening and forcing the wearing of face coverings to marches and demonstrations across ideological spectrums, from right-wing protests against perceived government overreach to left-wing protests against racial inequities in treatments and government support. All of this happens against the backdrop of our contexts: homes, neighborhoods, schools, as well as national and international contexts. Research shows that Covid-19 is exacerbating already-existing systems of inequality along lines of race and class (Laster Pirtle, 2020). Research also shows that countries have had different levels of success in containing and managing the spread of the virus (Van Bavel et al., 2020). This has to do with a variety of factors, including differences in peoples' willingness to embrace mask-wearing, health systems, resources and readiness, and the rapidity and types of governmental responses. Underlying these factors are whether and how people understand and respect scientific expertise and whether and how they take a social view of health problems—whether they feel their fates are tied to those of their fellow country-people.

The fourth disciplinary component of civics in Dimension 2 of the College, Career, and Civic Life (C3) Framework for Social Studies State Standards focuses on civic processes, rules, and laws. Teachers can use global health perspectives when teaching students to “evaluate multiple procedures for making governmental decisions at the local, state, national, and international levels in terms of the civic purposes achieved” (NCSS, 2013, p. 34). A global health perspective can enable students to consider how different governmental and civic contexts shape and enable different public health outcomes. Teachers can ask students why, for example, the civic and governmental contexts of China and South Korea allow for specific processes and rules to be enacted that support swift surveillance, contact tracing, and quarantine measures that are different from the civic culture of, say, the United States or Sweden, two nations that have had far different national, civic responses to the pandemic.

**Key Concepts from the Social Sciences: Opportunities for Student Learning and Reflection**

We offer the following six key concepts that may be useful to teachers incorporating global health into their social studies curriculum. Following these concepts, we list five selected resources teachers can digitally access to deepen their global health perspective on the pandemic as well

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as five select resources teachers could assign their students to read and access online to deepen their global health engagement related to the pandemic and beyond. We hope the approaches shared in this article will provide a launching pad for social studies educators to integrate global health ideas into existing social studies curricula.

1. **Globalization:** The interconnections across national borders as well as global processes (Martin, Metzger, & Pierre, 2006) in terms of the flow and movement of goods (trade), people (refugees, immigrants, tourists), ideas (ideologies, concepts), technologies (electricity, travel), and communication (internet, phone) are important to understand as they highlight international codependence. A global health approach must consider globalization in order to understand how diseases circulate as well as understanding the spread of ideas and medical technologies, for example.
2. **Neoliberalism:** Neoliberalism is widely debated as an ideology or economic approach that focuses on individual (as compared with structural) factors and espouses a free market (rather than state-based) approach (Noy, 2017). Neoliberalism is important to consider in a global health approach because global health challenges (including in pandemics, for example) require coordinated social approaches and regulation that the market may be ill-equipped to provide, as one example.
3. **Social determinants of health:** Social determinants of health shift the focus from individual behaviors associated with health outcomes and foreground the conditions in our environments. This approach focuses on aspects such as income inequality, racism, neighborhood disparities, and access to health care that lead to health inequalities and require systemic intervention to improve health (Phelan, Link, & Tehranifar, 2010).
4. **International health organizations** (e.g., World Health Organization, World Bank): International organizations can create a forum for coordination between national governments, which is especially important for pandemics, and have important resources in the form of funding and expertise to provide loans and aid to countries. However, these organizations may also create inequalities and are characterized by internal and international political tensions and inequities (Chorev, 2012; Noy, 2017; Shandra, Nobles, London, & Williamson, 2004).
5. **Sustainable Development Goals (SDGs)** and their predecessor, Millennium Development Goals (MDGs): The sustainable development goals (SDGs) were adopted in 2015 by United Nations member states to help “end poverty, protect the planet, and ensure that all

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people enjoy peace and prosperity by 2030” (<http://www.undp.org/content/undp/en/home/sustainable-development-goals.html>). The third goal focuses on health and well-being, and many global health efforts rely on the UN system for coordination.

6. **Comparative Health Systems:** A key part of understanding global health is making sense of differences between countries’ health systems and how privately versus publicly funded systems, the organization of health (e.g., hospitals, clinics), and insurance coverage and schemes, as some examples, are related to health outcomes and policies (Blank, Burau, & Kuhlmann, 2017; Mechanic & Rochefort, 1996; Noy, 2018). A global health approach should consider how these differences affect how health systems may be equipped to deal with pandemics and global health challenges.

#### Select Resources for Teachers

1. The United Nations Development Programme’s case studies of COVID-19 across countries: <https://www.undp.org/content/undp/en/home/Covid-19-pandemic-response/socio-economic-impact-of-Covid-19.html>
2. An article in *Nature: Human Behavior*, “Using Social and Behavioural Science to Support COVID-19 Pandemic Response”: <https://www.nature.com/articles/s41562-020-0884-z>
3. The Council on Foreign Relations’ report comparing six health care systems in a pandemic: <https://www.cfr.org/background/comparing-six-health-care-systems-pandemic>
4. An article from *The Chicago Reporter* explaining the built-in racial inequities of responding to Covid-19: <https://www.chicagoreporter.com/flatten-whose-curve-Covid-19-response-overlooks-built-in-racial-inequities/>
5. The International Sociological Association’s Research Committee on Social Classes and Social Movements panel on changing solidarities and collective action in the time of Covid-19: [https://www.youtube.com/watch?v=1qBieYRFClc&feature=emb\\_title](https://www.youtube.com/watch?v=1qBieYRFClc&feature=emb_title)

#### Select Resources for Students

1. Exploring the Sustainable Development Goals through facts, figures, and short articles
  - a. Data dashboard to explore, monitor, and visualize Sustainable Development Goals data: <http://www.sdgdashboard.org/>

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- b. Goal 3 on good health and well-being: <https://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-3-good-health-and-well-being.html>
2. *The New York Times* Interactive Coronavirus Map: <https://www.nytimes.com/interactive/2020/world/coronavirus-maps.html>
3. An article in *The New York Times* on the global health puzzle of seeing different effects of Covid-19 across different national and regional contexts: <https://www.nytimes.com/2020/05/03/world/asia/coronavirus-spread-where-why.html>
4. An article in *Contexts: Sociology for the Public* discussing structural inequalities and the pandemic: <https://contexts.org/blog/inequality-during-the-coronavirus-pandemic/#vargas>
5. An article in *USA Today* on masks as a social intervention: <https://www.usatoday.com/story/opinion/2020/05/14/require-masks-stop-coronavirus-spread-over-100-health-leaders-column/5182076002/>

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