



„RECALL: A Study of Central European Places of Memory for Collective Remembrance”

2023-1-HU01-KA220-HED-000154286

Module Title: Pandemics - Pandemics in Central Europe (*Topic 12*)

Target Duration: 32 minutes (video) + 15-20 minutes (e-learning tasks)

Target Audience: University students, researchers, and history enthusiasts

This module examines how epidemic diseases influenced Central Europe from the Middle Ages to the twentieth century. It connects population, economy, faith, and culture. It explains pre-modern concepts such as humoral pathology, miasma, and divine punishment, along with the treatment approaches that followed, including purging, bloodletting, quarantine, pilgrimage, and the cult of healing saints. Learners will differentiate between epidemic waves and endemic risks and see how illness affected daily life, language, and collective memory.

The module then explores the bacteriological revolution and the growth of public health at state and local levels. It covers quarantine rules, sanitation laws, reporting practices, isolation procedures, school closures, water protection, and vaccination efforts. Case studies from the Czech lands, specifically Silesia and Moravia, reveal the social aspects of disease in fast-growing towns, the management of cholera outbreaks, and the cultural memory of fear seen in literature. The module also compares official university medicine with unofficial healers and looks at issues of cost, access, and trust.

A focus on Hungary highlights women's involvement in medicine and nursing, from Vilma Hugonnai and early graduates to training reforms in the twentieth century. It links these developments to modern scientific advancements and the ethics of prevention. The module concludes by discussing smallpox eradication, the expansion of healthcare after the war, and today's civilizational risks in relation to COVID-19. It asks how historical experiences can enhance communication, fairness, and civic responsibility. Overall, it treats belief, policy, and science as interconnected forces that shaped how Central Europeans understood, resisted, and remembered disease.

Primary Goals of the Module:

- **Situate** epidemics within Central Europe's social, cultural, and religious history.
- **Trace** the shift from humoral medicine to bacteriology and organized public health.
- **Examine** state, municipal, and ecclesiastical responses to contagion (laws, hygiene, quarantine, vaccination).
- **Explore** how literature, art, and cults of saints encoded experiences of disease and fear.
- **Highlight** gender, access, and profession—women's entry into medicine and the evolution of nursing.
- **Connect** historical debates on prevention and vaccination to contemporary public-health communication.





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EU Key Competences Addressed in This Module:

- **Cultural awareness and expression** – Illness, pilgrimage, saints, and literature as cultural memory.
- **Critical thinking and digital literacy** – Evaluating sources, images, and public-health messaging (incl. misinformation).
- **Social and civic competence** – Recognizing the relationship between historical memory, democratic values, and active citizenship.

Learning Outcomes:

By the end of the session, learners will be able to:

- Define epidemic, endemic, and pandemic in historical contexts and distinguish their demographic and social effects.
- Explain pre-modern models of disease (humoral theory, miasma, divine punishment) and their therapeutic logic (purging, bloodletting, warming, quarantine).
- Trace the transition to germ theory and summarize how microbiology reoriented prevention and treatment in Central Europe.
- Compare official university medicine with “unofficial” healing (herbalists, folk healers, barber-surgeons) in terms of access, cost, and perceived legitimacy.
- Describe municipal/provincial public-health measures (sanitation by-laws, reporting, isolation, school quarantines, water protection) and assess their effectiveness.
- Analyze literary and cultural sources (e.g., depictions of cholera barracks; tuberculosis and syphilis in fiction) as evidence of fear, stigma, and social memory.
- Evaluate social responses to vaccination (acceptance, indifference, resistance) and relate past debates to present-day misinformation and public-trust challenges.
- Discuss the role of churches, pilgrimage, and patron saints (e.g., Mary, Roch, Sebastian, Vitus) in coping with disease and interpret their meanings for communities.
- Examine the Czech case (Silesia/Moravia): links between industrialization, poverty, and disease; administrative frameworks; and evolving prophylaxis.
- Explain the Hungarian trajectory of women in medicine and nursing (Hugonnai, Steinberger; training reforms) and connect it to modern achievements (e.g., mRNA vaccine research).
- Assess how improvements in living conditions and healthcare access after WWII reduced epidemic threats while identifying new “civilizational” health risks.

Understanding pandemics involves more than just counting outbreaks or naming pathogens. It requires recognizing how Central Europeans, including patients, doctors, nurses, priests, families, writers, and officials, turned fear into care, belief into resilience, and scientific discovery into shared protections. In this module, learners engage with the people, practices, and memories that changed quarantine, sanitation, and vaccination from emergency measures to a civic ethic.





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