1.9 The Black Death, 1348-49: Causes, Spread and Contemporary Responses: 30-minute Pack

EDEXCEL 1HI0 · about 30 minutes

Total Marks

Name: _____ Date: ____ / ____ / _____

Answer ALL questions. You are advised to spend about 30 minutes on this pack.

1 Explain why the Black Death prompted changes in public health practices in some towns and ports after 1348-49.

You may use the following in your answer:
- the scale of death and disruption caused by the epidemic
- problems controlling movement of people and goods into towns

You must also use information of your own.

(Total for Question 1 is 12 marks)

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2 'The Black Death had only harmful effects on medieval medicine.' How far do you agree? Explain your answer.

You may use the following in your answer:
- the effect on confidence in learned physicians and humoural treatments
- the appearance of new public health practices such as isolation

You must also use information of your own.

(Total for Question 2 is 20 marks)

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Mark scheme · 1.9 The Black Death, 1348-49: Causes, Spread and Contemporary Responses: 30-minute Pack

Question 1

Level 1 Provides simple, generalised reasons why public health practices changed, with little supporting detail. **1-3**

Level 2 Identifies and begins to explain one or two reasons, supported by some accurate detail and link to consequences. **4-6**

Level 3 Explains several reasons clearly, supported by accurate and relevant detail, showing how each reason led to particular public health responses. **7-9**

Level 4 Gives a well-developed, analytical explanation of why public health practices changed, with precise supporting detail and clear links between causes and responses across different towns and ports. **10-12**

Indicative content:

- The enormous scale of mortality and social disruption caused by the Black Death made it obvious that ordinary community coping methods were inadequate, prompting towns to seek practical measures to limit future outbreaks.
- High death rates among householders and port workers created fear of infection from arrivals and from contaminated goods, encouraging towns to introduce measures such as keeping ships at anchor, inspecting cargoes and restricting entry for the sick.
- Disruption of labour and trade priorities led civic authorities to try to protect remaining workers and merchants, introducing controls that had economic as well as health aims, such as isolating suspected cases to keep workshops and markets functioning.
- Experience of rapid local spread showed civic leaders that controlling movement could work to delay disease, so some towns developed ordinances to isolate the sick, regulate burial practices and restrict entry, early precursors of later quarantine law.
- Religious and communal responses also influenced public policy: fear and desire for order encouraged civic authorities to arrest or disperse flagellant processions, regulate pilgrimage and public gatherings, and to fund measures such as town fumigations or clearing of refuse.

Question 2

Level 1 Shows limited understanding of the effects of the Black Death on medieval medicine, and offers only a simple, unsupported judgement. **1-4**

Level 2 Shows some relevant knowledge and begins to weigh positive and negative effects, but the argument is not consistently supported or developed. **5-8**

Level 3 Shows good knowledge and offers a balanced evaluation of both harmful and beneficial effects, supporting points with relevant detail and beginning to reach a judgement. **9-12**

Level 4 Shows precise, well-selected knowledge and offers a sustained, balanced evaluation of the extent of harm and benefit, reaching a clear and well-supported judgement on how far the statement is true. **13-16**

Indicative content:

- Arguments supporting the statement, showing harm: the Black Death undermined confidence in traditional learned medicine and humoural theory because so many who followed physicians advice still died; prominent physicians and universities could not stop the epidemic, reducing the authority of medical elites.
- Harmful effects continued as many treatments, such as bloodletting, sometimes weakened patients further, and the scale of mortality created shortages of trained practitioners, with inexperienced or unlicensed healers filling gaps.
- Arguments against the statement, showing beneficial or impulse-driven changes: the scale of the crisis encouraged practical public health responses, such as isolation of the sick, restrictions on movement in ports and towns, and some local ordinances on burial and refuse, which anticipated later public health development.
- The epidemic also stimulated empirical observation by some practitioners: attempts to record symptoms and experiment with herbal remedies, and the spread of practical measures such as fumigation, reflect adaptive practice rather than complete collapse.
- A balanced judgement might argue that while the Black Death exposed the limits of traditional medical theory and caused immediate harm to the reputation and manpower of learned medicine, it also accelerated practical, community-level responses and small-scale changes in medical practice that had long-term influence.

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