Distance Learning for
World History (11th Grade) - M
Week #9, June 1 - 5

Essential Question:
How do the plagues of the 14th century compare to the plagues of the 21st century?

Instructions:
1. (Packet users) Using the reading packet given to you (articles) answer the following questions on your own paper. Hold your written answers until time to return all your work.
2. (Google Classroom users) Read the information from the articles that are given to you. Answer each question listed below. When you are finished you can submit your work on Google Classroom.
3. If you are using a packet, please put your completed work in a safe place where you can easily find it when the time comes to collect the work.
4. The question should be answered using complete sentences in PARAGRAPH form.

Assignment:
Read the articles attached and answer the following question using PARAGRAPHS and complete sentences. You should end up with several well organized paragraphs that answer the question. To help you, important information or facts in the articles have been highlighted that you can use in your paragraphs and to help organize your thoughts.

When a highly contagious disease/virus begins to infect people, there is always concern. When this highly contagious disease begins to spread throughout countries and continents, it becomes problematic pandemic. Throughout history, pandemics have been documented and studied so as to be better prepared for the next. After looking at the Bubonic Plague (Black Death), there are several commonalities and blaring differences between it and the Covid 19 pandemic.

After reading the following articles that are attached, complete the chart by listing 5 facts you would use to compare and/or contrast the Bubonic Plague to the Covid 19 Pandemic. Each one should have 5 facts/examples. An example has been given to you.

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<thead>
<tr>
<th>Bubonic Plague</th>
<th>Covid 19 Pandemic</th>
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<tr>
<td>Origins (species)</td>
<td>Origins (species)</td>
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<td>Once the plague transferred to animals that were in</td>
<td>Covid spread from animals to Humans and then spread</td>
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<td>close contact with humans and to humans themselves,</td>
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<td>it began to spread along established trade routes.</td>
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<td>Origins (Place)</td>
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(A.) Bubonic Plague

The plague, named the Black Death by later historians, had a devastating effect on the European population in the fourteenth century.

Overview

- The diffusion of crops and pathogens, including epidemic diseases like the bubonic plague, often occur along trade routes.
- The bubonic plague - named the Black Death by later historians - was caused by the *yersinia pestis* bacteria, which lived in rodent populations and was spread by fleas that had bitten infected animals.
- Once the plague transferred to animals that were in close contact with humans and to humans themselves, it began to spread along established trade routes.
- It is difficult to measure the exact human cost of the plague due to limited records from the time period.
- Most historians think that the plague killed somewhere between 30% and 60% of Europe’s population between 1347 and 1351.

Trade and disease

- Historians and epidemiologists are confident that the Black Death originated in east-central Asia, which raises the question: How did the plague make it to Europe?
- To understand how the plague spread, we need to understand how the disease was transmitted, along with the broader economic and political contexts that made its spread possible.
Origins of the plague outbreak

- The point of origin for the Black Death was most likely a population of marmots—small, prairie-dog like rodents—in Central Asia.
- Marmots generally avoid contact with humans, but rats will readily come in contact with both marmot and human populations. Rats also carry fleas, making them an ideal vehicle—from the perspective of the plague, at least—for spreading the bubonic plague.
- The plague caused an epidemic in China in the 1330s, and again in the 1350s, causing tens of millions of deaths. The 1330s outbreak also spread west across Central Asia via traders using the Silk Road.

The plague spreads

- In 1346, the plague reached the Mongol soldiers who were besieging the city of Kaffa (Ukraine). Stories from the period tell us that the plague devastated the Mongol army, forcing it to give up the siege. Some of these stories also include a more gruesome detail: the Mongols catapulted the dead bodies of the soldiers who died of the plague into the city.
- The plague continued to travel through Asia, eventually hitting major cities such as Baghdad and Constantinople. From there, it traveled to Alexandria in Egypt, Damascus in Syria, and down the Red Sea to Mecca. From there it almost certainly entered the Indian Ocean trade networks. The plague also traveled with Genoese merchants back to Italy, first to the port of Messina in 1347, and then north through Europe over the next several years.

Effects of the plague

- Although the lack of clear records makes it hard to be precise, historians generally estimate the Black Death killed between 30% and 60% of Europe's population between 1347 and 1351. However, death rates varied from place to place. Some areas saw mortality of 80% or higher, while other places remained almost untouched by the disease.
- Serfdom began to disappear as peasants had better opportunities to sell their labor.
- High labor costs caused landowners to look for more efficient and profitable ways to use their land and resources, such as increasing livestock production and payments of rent in money, rather than labor.
- High labor costs also caused governments to impose price controls on wages, but these efforts were often unsuccessful and sometimes met with rebellion.
- The fear and confusion caused by the plague sometimes led to violence, in part because of a lack of medical knowledge regarding how the plague spread. Jews, Romani, lepers, and other religious and cultural minorities were sometimes blamed for causing or spreading the plague and became targets of attacks. It should be noted that the plague did not cause these social tensions, but rather created a context that made these tensions stronger and more likely to lead to violence.

(B.) How the Black Death Worked

BY MOLLY EDMONDS

How Did the Black Death Spread?

Because Europe was trading with the East, some medieval Europeans were aware of a mysterious disease sweeping through Asia in the 1330s. From Central Asia, the disease moved along an established trade route, passing through Turkestan and the Black Sea Region (Crimea and the Byzantine Empire).

In 1347, Kaffa, a town in modern-day Ukraine that was a Genoese trading post, came under attack by a Tartar army. When the Tartars were killed by the plague, the Genoese at first rejoiced: God had answered their prayers and punished their enemy. But that celebration ended when the Tartars began launching the corpses of plague victims over the walls of the city, hoping that the smell of rot would kill everyone in town. The smell didn't kill the Genoese, of course, but the disease did. The panicked Genoese threw the corpses back or submerged them in water. But it was no use; they were already exposed. As the dying Tartars retreated, the Genoese fled by ship to Sicily, taking the deadly disease with them to Europe.

Kaffa wasn't the only eastern trading port on the Black Death's path, but Genoa's ships took the blame for bringing the pestilence. Once it hit Europe, the Black Death moved fast, traveling at an average speed of 2.5 miles per day (4 kilometers per day) [source: Duncan, Scott]. From the Mediterranean ports, the disease took two paths; one through France that eventually made its way to England and Ireland, and one through Italy that went to Austria and Germany.
Written accounts state that the disease was frightfully contagious, and that death occurred only a few days after symptoms appeared. Other than this, people seemed to have no idea what was happening. Many felt that God's wrath was ravaging the earth and that the end of the world was near. Some theorized that Jews were contaminating the water supply. Both of these ideas spurred extreme responses that we'll explore in the next section.

When people began dying in France, King Philip VI turned to the Paris College of Physicians, the most highly-regarded medical authorities of the time, to learn the cause. The physicians produced a report that blamed the mass deaths on an event that occurred at 1 p.m. on March 20, 1345 -- the triple conjunction of the planets Saturn, Jupiter and Mars in Aquarius. The report explained that Jupiter, a wet and hot planet, soaked up evil vapors from Earth. And Mars, a dry planet, ignited the vapors and spread them through the air, which is how Europe got enveloped in a fog of death. Interesting -- a fog of death. So, how do you cure a fog of death? And how do you protect yourself from catching it? In the next section, we'll learn how people dealt with the ugly spread of the Black Death.

(C.) Virus Mutations Reveal How COVID-19 Really Spread

Globe-trotting humans were the culprits
By Mark Fischetti, Martin Krzywinski on May 4, 2020

The world struggled to understand how COVID-19 spread during the pandemic's first four months, but genetic sequences of the coronavirus reported by laboratories tell the real story—when the virus arrived in each place and where it came from. The sequences, which advance from left to right in the graphic, show that the virus jumped from an animal to humans in China, humans transmitted it to one another within China, then people traveling from there spread it globally person to person. The virus had not mutated significantly as of March 31, 2020; human contact created the pandemic, not a wildly evolving pathogen. Mapping the spread also substantiates actions that could have best mitigated it: faster, wider testing in China; earlier, stricter global travel bans and isolation of infected people; and more immediate social distancing worldwide.
The Economic, Geopolitical and Health Consequences of COVID-19
It is important to contain and prepare to mitigate further outbreaks, particularly in countries with struggling or under-resourced health systems. We should work collectively to support these countries with new drugs and vaccines and we should not leave anyone behind. Why? Because of enlightened self-interest in preventing and controlling ongoing infection and spread, but also to take an equitable approach to world health.

**Economic consequences**

The 2003 SARS outbreak, which infected about 8,000 people and killed 774, cost the global economy an estimated US$50 billion. The 2015 MERS outbreak in South Korea, meanwhile, infected 200 people and killed 38, but led to estimated costs of US$8.5 billion.

Already the coronavirus epidemic has had a greater economic effect than either of these predecessors. Wall Street has joined a global sell-off; the S&P 500 index of US companies fell by 11.5% the week commencing on February 24, the worst week since the 2008 crisis. China has effectively been in economic lockdown for a month since Chinese New Year, and the knock-on effect for global manufacturing has already been felt. While sensible precautions to avoid the spread make sense, it’s all too easy for business and politicians to go into panic mode. The supply chain consequences are real, however, and affect some sectors and assets more than others, from commodities such as oil to supply chains vulnerable to such interruptions as those that cause problems for just-in-time auto manufacturing.

The fragility of the global economy, which has high levels of indebtedness and asset bubbles, is a legacy of the way in which the 2008 global credit crisis was managed rather than solved. As pointed out in the World Economic Forum's Global Risks Report 2020, there are a number of tipping points in the economic system and the economic consequence of a shock to the global system is likely to be a correction.

**Geopolitics**

While the health challenges and economic consequences are potentially devastating, the political consequences are harder to foresee - but might be the most long-lasting. In Japan, the handling of a COVID-19 outbreak on a cruise liner led to transmission of the virus into the Japanese population and has resulted in the cancellation of the Tokyo Olympics. In other countries such as in Iran, a lax response by the country's healthcare system led to a loss of containment of the epidemic, which is now spreading to the rest of the Middle East. The lockdown of towns in Northern Italy is likely too late, with the spread of the virus from Italy already underway across Europe. **Voters may not be kind to politicians who fail in their basic duty to protect citizens.**

We need to be honest about the scale of the challenges ahead. If all goes well we may have the first testing of a vaccine in people in the coming weeks, but that is a very optimistic timescale. Manufactured vaccines that are safe and effective are many months and years away - 2021 and beyond. There is a need for an integrated response, meaning a public health response that includes drugs and therapeutics, not just the development of vaccines - advice that was echoed by Richard Hatchett from the Coalition for Epidemic Preparedness (CEPI) in a prescient 2019 article.

As of the end of February, in China the genetic makeup of the virus has not changed, which is a good sign for the chances of creating an effective vaccine that could be available within a year. In the meantime, we must be vigilant and prepared to control the spread. COVID-19 has the potential to spread widely, but it can be at least contained as the current situation in China suggests. In Africa the WHO has helped get 40 labs in 35 countries set up to do testing (from zero before the outbreak) and this will help early detection and early control.