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DEATH IN THE TROPICS

Mosquito Empires: Ecology and War in the Greater Caribbean, 1620-1914. J.R. MCNEILL. New York: Cambridge University Press, 2010. xvi + 371 pp. (Paper US$ 24.99)

Medicine in an Age of Commerce and Empire: Britain and its Tropical Colonies 1660-1830. MARK HARRISON. Oxford: Oxford University Press, 2010. x + 353 pp. (Cloth £65.00)

Death in the New World: Cross-Cultural Encounters, 1492-1800. ERIK R. SEEMAN. Philadelphia: University of Pennsylvania Press, 2010. xii + 372 pp. (Cloth US$ 45.00)

In the late seventeenth century, revolutionary change occurred in political economic thought. The powerful director of the East India Company, the Tory Sir Josiah Child, argued that property was natural, not created by human endeavor, and was hence necessarily finite. The Tories believed in a version of political economy in which property was a natural creation (land), in which agrarianism was paramount, and which posited a zero-sum world of commercial exchange. The Whigs, by contrast, opposed this agrarian understanding of political economy. They believed that property was the result of human endeavor, that it resided in people and the efforts of human labor. Moreover, they thought that property was potentially finite. They supported the demise of the Royal African Company and the rapid expansion of the slave trade and plantation commerce. British Americans were Whigs. Blessed with abundant land, not just in North America but in the frontier West Indies, British Americans around 1700 focused most of their efforts on trying to extract as much labor as they could from people whom, in the case of Africans, they thought of as commodities rather than as sentient beings. The more people one could have, or could control, the more power one would have. It is for this reason that Britons were obsessed with demography and very concerned that natural population growth and British migration was slow in British North America and going into reverse in the British West

Indies. Whigs believed that human labor created property, and that therefore it was possible to generate infinite economic growth (Pincus 2009).

The Whigs won; the Tories lost. They did so in part because the people who were especially receptive to the Whig perspective were London merchants involved in the burgeoning West Indian Atlantic trade. The arguments they advanced were enthusiastically embraced in Britain and British North America where, after 1700, population advanced rapidly. Debates over population became more prevalent in the eighteenth century because it was becoming clear that the more people a place or nation had, the more its prosperity was ensured. Moreover, an increasing population was also taken as a clear sign of moral superiority. A virtuous people was a fruitful people who married early, produced lots of children, and improved land. The links were made clear by Benjamin Franklin in a famous pamphlet in which he celebrated the fecundity of the white population of British North America, comparing their demographic success pointedly with the less vital colonies of the Caribbean. In the early nineteenth century Thomas Malthus, a Scottish clergyman with land in the West Indies, added a pessimistic tinge to Franklin's sunny optimism, but for most of the eighteenth century it was axiomatic that a healthy and, more importantly, a good society was a society in which the population was growing rapidly.

Such views made the British West Indies problematic. No part of the world was more prosperous, more modern, or fuller of useful knowledge and useful commodities that were improving British life. Yet, as the books under review (as well as recent and heralded books by Vincent Brown [2008] and Stephanie Smallwood [2007]) show, the distinguishing feature of life in the islands was its transitory nature. Lots of people, white and especially black, went there. Most of them died well before their time. The demographic facts were chilling, especially for the greatest plantation societies in the Greater Antilles. In Jamaica, sizeable annual migration of whites was insufficient to keep a population battered by malaria and yellow fever (African diseases that may be seen as Africans taking revenge on their oppressors) and weakened by venereal disease from growing more than minimally over the eighteenth century. In Saint Domingue, the importation of 800,000 Africans between 1680 and 1777 resulted in a population of only 290,000 enslaved people. The consequences of this demographic disaster were vast. That the Americas are not demographically dominated in 2010 by the descendants of Africans is testimony to how much death stalked the tropics and evidence of the destructiveness of slavery. A brief indulgence in an obvious counterfactual – populations flourishing rather than declining in the Caribbean – makes us realize how different the world would be if the population of, say, Jamaica had been 600,000 with 100,000 whites at the American Revolution rather than 200,000 of whom just 15,000 were whites. Of course, an even more obvious counterfactual – that the catastrophic decline of Native American populations in

Hispaniola and elsewhere that occurred in the wake of Columbus's arrival had not happened – might also be considered. We can only speculate about how the Caribbean, and the world, would have been different if the indigenes of the Americas had retained or increased population levels after 1492.

Counterfactuals come immediately to mind when reading John McNeill's thought-provoking and persuasive argument that places the humble mosquito at the heart of Caribbean and Atlantic history between 1600 and 1900. McNeill is fond of counterfactual history. Geopolitics also comes to mind. McNeill's paradigm-shifting book is even more of a challenge to traditional geopolitical understandings of the early modern Caribbean than a support for environmental explanations of historical change in the region. For once, the encomiums on the back cover are justified. McNeill does indeed challenge readers' assumptions about the limits of human agency in shaping great events. It will be interesting to see, for example, if historians of the American Revolution pick up on his assertion that American success at Yorktown in 1781 did not result from superior strategy or from the genius of George Washington but occurred because the British army was devastated by yellow fever. What McNeill makes us understand is that environmental matters profoundly shaped the history of the Caribbean. Moreover, he shows how long-term ecological change transforming landscapes combined with short-term epidemiological events such as the repeated virulent outbreaks of yellow fever that afflicted European populations in the West Indies from 1690 to 1820 to produce profound geopolitical consequences.

McNeill advances two important propositions. First, he shows that outbreaks of yellow fever among non-immune European migrants compromised entirely all ambitious schemes for European settlement in the British and French West Indies. The disasters of the Scots at Darien in 1698-1699 and the French at Kourou in 1763-1764 showed, conclusively, that Europeans could not settle in hot climates, at least while yellow fever and malaria raged. New England or New France could not be replicated in the Caribbean. Colonies in this region necessarily had to be colonies of exploitation rather than colonies of settlement. Death overwhelmed life. Second, he shows that virulent disease made Spanish America, once established, invulnerable to attack. The Spanish were extremely worried that after the British took Havana in 1762 they would use Cuba as a base by which to attack and capture Cartagena and then march to Mexico City itself. They need not have worried. The easiest way to destroy a European army was to send it to the Caribbean. Non-immune soldiers and sailors perished from yellow fever in extraordinary numbers and in rapid time. If a force was to achieve military success, as at Havana, it had to be willing to accept huge losses of men, had to employ ambitious amphibious military methods, had to get in fast, win easily, and then withdraw. If a place was well-defended, as most Spanish American places were, and was able to hold out for more than a few days from attack,

then disease would work for it. There was no possibility that British forces could have sustained themselves for long enough in the Caribbean to ever entertain attacking Mexico. Such observations are both true and profoundly important for understanding imperial interactions in the region.

McNeill is aware of the limits and novelty of his argument. He does tend, however, to stretch his evidence. His argument is sufficiently compelling for some of his more extreme statements to be unnecessary. The Caribbean was not quite as impregnable as McNeill imagines. Islands and forts could be overcome, as in Guadeloupe and Martinique during the Seven Years' War, in Pensacola in the American Revolutionary War, and in Havana in 1762. For McNeill, the latter event was entirely the exception to the rule. He engages in some special pleading as to why it should be considered as exceptional and as a pyrrhic victory for the British. Possibly McNeill is right in thinking that yellow fever was so inexorable that it could always be employed as a defensive weapon and that Caribbean populations should have been more confident that they could repel any attack. But that was not how it appeared at the time. Jamaicans, for example, were so convinced that any opposition they showed to Britain during the American Revolution would result in British troops invading that they begged off joining the thirteen colonies in revolution. McNeill tends to think that West Indians were as aware of how disease protected them as he is. But that is not clear. Certainly, he overstretches when arguing for Toussaint as a military genius in the Haitian Revolution who used guerrilla methods because he knew that they were the best way of advancing biological warfare. It is true that Jacques Dessalines thought that "our avenging climate" was one reason for ex-slaves' victory over the French, and he is also correct that Toussaint explicitly mentioned that his strategy was to wait till the rainy season before attacking the French, expecting disease to be his friend during such attacks. But Dessalines made his comment in 1804 as a post-facto explanation for Haitian success and Toussaint, as McNeill notes, never followed through with his strategy, negotiating with the French (unsuccessfully) in May 1802 rather than keeping the French engaged until the rains came in late summer. It is a leap to get from this to a statement that Toussaint knew better than anyone that yellow fever was the weapon of the weak and that he transformed his wars into biological exchanges (p. 262).

What McNeill's book does show is not only that death was omnipresent in the Caribbean but that historians need to look at that omnipresence not just as a set of numbers detailing mortality rates and differential racial resistance to disease but as a fundamental cultural fact. Vincent Brown has been especially influential in trying to trace cultures of death in the British West Indies. In particular, he has attempted to overturn an older paradigm advanced by Orlando Patterson in which death was so constant and so negative a presence in enslaved persons' lives that their whole experience was defined by death. For Patterson (1982), slaves experienced "social death" when enslaved, a

condition he conceptualized as one where there were no meaningful links to the past or connections with other people. It is a bleak historical vision, where disorganization, instability, chaos, and constant violence made it close to impossible for slaves to gain any meaning from life and even harder for them to find solace in death. Brown resists such an interpretation, arguing that "death and life are not only opposites but also mutually constitutive states of being made meaningful by the practices that define them." He continues: "Death was not only an end; it spurred regeneration, thereby helping to constitute life." He wants to see "the social and cultural activity surrounding death less as a pathological distortion of recognizably healthy life than as a natural state of affairs under conditions of creative destruction," nodding to Joseph Schumpeter's famous definition of capitalism in his last two words. For Brown, the creativity shown was political, as it is also for Richard Price, who argues for the importance of understanding death and deathways in the Caribbean as a means of "unravel[ing] the tightly woven threads that bind destruction and invention, death and creation, in the wake of the Columbian moment" (Brown 2009, Price 2005).

Erik Seeman wants to further such ambitions in his accounts of deathways in the Caribbean. Seeman is not a Caribbeanist but an historian of Native America and his well-researched book is only partly about the West Indies; even when treating the West Indies it is mostly concerned with Africans and occasionally Jews rather than with all sections of the population. Consequently, it is not as sophisticated as Brown's work, in which white understandings of death are treated as sympathetically as are those of blacks. Nor is it as theoretically adept as Smallwood's work which explicitly engages with and rejects Patterson's nihilistic vision of what slavery meant for the enslaved. The main value of Seeman's account is the mass of detail, historical and archaeological, that he presents about how enslaved people were buried. He shows that there is a lot more evidence available about African-American deathways in the eighteenth century than we might imagine. For Seeman, this evidence all points one way. Africans were not dislocated entirely from Africa on arrival in the Americas – mortuary practices were largely African inspired. They suffered no "social death" either. Their funeral practices were rich and, as far as can be ascertained, meaningful. They also became increasingly African-American, incorporating in particular Christian rituals. Seeman claims that as African memories faded a spiritual vacuum emerged that Christianity eventually filled. Why Africans had a spiritual vacuum is not really explained – as Seeman notes, Jews never experienced religious change as they became Jewish Americans and Native Americans were much more resistant to Christian ritual than were Africans. That enslaved people became Christian is undeniable. But at least in the Caribbean the transition to Christianity was very late, occurring at the earliest over a century after the development of the large integrated plantation. It seems to me that Seeman,

for all the great evidence he has accumulated, has missed a trick. The adoption of Christianity by enslaved people eventually seems less significant to me than the fact that they resisted Christ's siren call so long and that even when they became Christians they transformed Afro-Caribbean Christianity to become a syncretic and fluid religious practice.

Mark Harrison doesn't mention creolization in his impressive, and expensively priced, treatise on how British medical practitioners in the West and East Indies came to colonize the subject of tropical medicine. He also barely mentions enslaved people and their contribution to the development of tropical medicine, ignoring the claims made for Afro-Caribbean contributions to medical practice in the eighteenth century (see Schiebinger 2004). He comes to this topic from a different direction – the history of medicine and the history of intellectual thought in the Enlightenment. Thus his concerns are not those that usually concern Caribbean historians. But his work is very much a contribution to creolization debates.

It is also a landmark in the history of ideas as they pertain to the British West Indies. He shows that colonial doctors created "a medicine of place: an epitome of knowledge distilled from a variety of learned traditions, folklore and scientific investigations" (p. 4). From their experience of living in warm climates, they developed, in "an Empire of Experiment," techniques and theories informed by practice that showed that the colonies were more than just places where people made money, where slaves lived miserable lives, and where death rendered individual and collective lives meaningless. If anyone made anything out of the grim demographies of tropical environments, it was the thousands of medical practitioners catering to the ill and dying. Amidst a culture in which death was constant and in which the common fear was of putrefaction, an inevitable tendency toward decay and degeneration, emerged a group of intellectuals, or quasi-intellectuals, who were able to contribute something of great importance from their experience in the tropics to metropolitan culture besides sugar and silks. To echo Price's words: out of destruction came invention; out of death came creation. As experts on tropical medicine, with their expertise based not on theory but on an empirical and experimental approach to medicine that foreshadowed the development of more scientific approaches such as pathological observation in British medicine, colonial doctors, Harrison argues, profoundly altered the nature of British medicine. By placing great emphasis on observation and practical experience, these doctors encouraged readers of their many treatises to reject British book-learning, to look askance at traditional sources of professional authority, and to look on the colonies as the source of wisdom for a growing and recognizable branch of medical literature, living (and dying) in warm climates.

Harrison's work is a major contribution to the history of medicine. It shows that we have to look to the empire and to the interplay between commercial and military expansion in the tropics and the often malign effects

such expansion had on European constitutions in order to understand a significant part of medical development from the late seventeenth century to the early nineteenth. He wants to show that in the movement from doctors' understanding of diseases as imbalances in the humors to their recognition that they could be traced through organs, tissues, and especially the nervous system, was not just developed in 1790s Parisian hospitals, as is traditionally thought. Rather, he argues, it was a more cumulative process of change involving experimentation in naval and military medicine conducted in the colonial tropics, mainly in order to understand how fevers worked and how their progress could be stopped.

India is probably more important than the Caribbean as a location for transformative change in medicine. But Harrison pays a lot of attention to the West Indies in his sometimes dense but always persuasive argument. His work is thus also a contribution to an evolving discourse among scholars in which the relationship between culture, race, climate, and environment is being profoundly reworked. The Caribbean was a laboratory where new intellectual ideas exploring the interaction between all these things occurred and where these relationships were transformed over the eighteenth century. Central to investigations was the conundrum that great wealth in the Indies was accompanied by enormous mortality, most of which came from fevers that were, as McNeill notes, new diseases, at least for Europeans.

Initially, doctors drew on established geohumoral notions of the transit of disease in which it was understood that bodies were inherently mutable, able to change under the influence of air or climate. It was places, not people, which were the sources of disease and bodily corruption. What had to be done was to work on how people could be acclimatized, or "seasoned" to tropical climates. The problem was that as doctors developed more sophisticated ways to render unhealthy environments healthy and as they showed that the climate in the tropics was not necessarily malign, Europeans there kept on dying. Indeed, as McNeill shows, soldiers' deaths from fever in expeditions to Saint Domingue in the 1790s and 1800s were enormous. If the place was not necessarily unhealthy, then the fault must lie in the type of people going to the Caribbean and, more importantly, in the kinds of behaviors they exhibited there. The medical advances that colonial doctors made in understanding the causes of fevers coincided, Harrison argues, with a growing tendency to think in racist terms. The increased currency of racial ideas was part of a greater cultural transformation in which fluid notions of self evolved into more fixed categories of identity, grounded in immutable biological differences (Wahrman 2004). By the early 1800s, susceptibility to disease was seen as an important marker of racial difference. Ironically, what doctors' investigations of fever revealed, as opinion slowly changed from geohumoral understandings of the transmission of disease to understandings of causation influenced by pathological observation, was that it was not the place, but rather the peo-

ple, that was unhealthy. As in political economy, it was through understanding individual behavior rather than the peculiarities of specific "warm" locales in which advancement of knowledge could be achieved.

Do these books highlighting the importance of death as a theme of importance in the history of the early modern Caribbean provide us with any larger theme than recognition that demographic disaster stunted growth in the Caribbean and cast a deadly pall over West Indian cultural formation, as hinted at in Patterson's concept of social death? How do we extract meaning from societies where death was constant, flux permanent, memory limited, and experience morbid? What unites all three books, and other works on the culture of death in the Caribbean is the quest for meaning, for a demonstration that something useful came out of the putrefaction and despair that early modern peoples felt was emblematic of living in countries where bodily survival was especially insecure. The meaning is in knowledge production. The colonization of the Caribbean was a knowledge-intensive enterprise and in the contours of death a great amount was learned by military men, religious figures, and doctors of all races and creeds. By learning about how death worked in the tropics, and conveying that information throughout Atlantic circuits and migration and movement, residents and itinerants in the Caribbean created new knowledge and new ways of knowing.

It was in this process of creating and communicating knowledge that we can see death the way Brown and Price wish us to see it, as constituting something more than just destruction but entailing creation and invention. In dealing with death and with the cultural and geopolitical changes wrought by the pervasiveness of death as a Caribbean motif, each of the authors treated above suggest, West Indian peoples gave a Caribbean dimension to the production of knowledge in the early modern Atlantic (see also Crawford *et al*. 2010). I'm not sure this is enough – the numbers of people dying seem still more important to me than the meaning that people gained from the ubiquity of death in the region. Moreover, we still have lots to learn about how many people went to the Caribbean, how many died there, and how many people were able to leave descendants. In short, we may be moving ahead too rapidly, evaluating what death meant before we know exactly how death worked in the Caribbean. But these books, and a growing body of scholarship, suggest that historians are learning from anthropologists that we can understand a great deal about society by appreciating how they incorporated death into their matrix of cultural practices.

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