

On Slavery, Medicine, Speculation, and the Archive

In 1777, word spread along the Amazonian coast that the “cruel contagion of smallpox” was circulating in the Portuguese frontier captaincies of Grão-Pará and Maranhão.¹ Rumor often announced the arrival of smallpox before authorities.² The rumors wound their way along the roads and waterways of Belém, the capital of Grão-Pará, to the ears of thirty-three enslaved Africans, all of them property of Chief Physician Bento Viera Gomes. They were terrified of the ongoing outbreak—and of their enslaver. They knew of Gomes’s attempts to prevent the spread of smallpox by inoculating a group of soldiers stationed nearby. The soldiers refused the inoculations, fearing the disease and the procedure.³ To prove the procedure was safe and effective, Gomes conscripted the thirty-three to serve in an inoculation demonstration for the soldiers. As Gomes remarked, the enslaved people “(although equally

*Department of History, Princeton University, 114 Dickinson Hall, Princeton, NJ, 08544, elise.mitchell@princeton.edu

1. João Pereira Caldas to Martinho de Melo e Castro, February 11, 1778, Arquivo Histórico Ultramarino (hereafter AHU) ACL CU 13 CX. 79 D. 6536.

2. Renán Silva, *Las epidemias de viruela de 1782 y 1802 en el virreinato de Nueva Granada* (Medellín: La Carreta Editores E.U., 2007), 23.

3. By the late eighteenth century, smallpox inoculation involved taking pus from one person’s smallpox pustule and inserting it in an incision in another’s arm or leg, enabling practitioners to control when and how the disease spread. Those who survived the procedure (which most did) would have lifelong immunity to smallpox. “Copia do parecer que dirigio a este Governo o Ex Fizico Mor Bento Veiria Gomes, sobre a Inoculação das Bexigas,” 15 February 1803, in Francisco de Sousa Coutinho to D. João Rodrigues de Sá e Melo, March 4, 1803, AHU ACL CU 13 Cx 124 D 9561. See also: Magali Romero Sá, “A “peste branca” nos navios negreiros: epidemias de variola na Amazônia colonial e os primeiros esforços de imunização,” *Revista Latinoamericana de psicopatologia fundamental* 11, no. 4 (December 2008): 821–22.

Historical Studies in the Natural Sciences, Vol. 53, Number 1, pps. 82–85. ISSN 1939-1811, electronic ISSN 1939-182X. © 2023 by the Regents of the University of California. All rights reserved. Please direct all requests for permission to photocopy or reproduce article content through the University of California Press’s Reprints and Permissions web page, <https://www.ucpress.edu/journals/reprints-permissions>. DOI: <https://doi.org/10.1525/hsns.2023.53.1.82>.

fearful) . . . had no choice but to obey.”⁴ Each of them, between the ages of three and twenty-five, underwent the procedure. All survived. Nevertheless, this brief chapter in the history of inoculation brings questions of survival, quality of life, and archival objectivity to the fore.

The slave trade and slavery established power relations that shaped the terms of scientific and medical knowledge production and practice. European imperial and medical archives naturalize these power relations. It is the historian’s task to unsettle and expose them. The intellectual foundations that presuppose inoculation as an inherent good because it saved lives (and it certainly did) do not prioritize Black people’s healing and well-being. To do so requires affective labor that begins with archival critique and proceeds with speculation.

We find this inoculation story buried in a flurry of accounts from medical practitioners around the Portuguese-American colonies discussing plans for the implementation of the Jennerian cowpox vaccine.⁵ As a show of expertise to the Crown, physicians like Gomes highlighted their prior experiences using inoculation and demonstrated their knowledge of the literature, citing works such as Thomas Dimsdale’s recently translated inoculation manual.⁶ Vague allusions to inoculations performed in the British colonies, the primary competition for Amazonian industries, also pepper the pages. Perhaps Gomes read the *Letters and Essays* published by the notorious physician John Quier who experimented with smallpox inoculation on young, pregnant, and elderly enslaved Africans in Jamaica.⁷

Too often, the history of inoculation serves as a prelude to triumphalist narratives of the resounding success of the Jennerian vaccine. Yet in the archival record, undercurrents of exploitation are plain: “they had no choice but to obey.” Enslaved people were the ideal candidates for inoculation demonstrations because colonists and slaveowners viewed them as replaceable

4. “Cópia do parecer que dirigio a este Governo o Ex Fízico Mor Bento Veiria Gomes, sobre a Inoculação das Bexigas,” 15 February 1803, in Francisco de Sousa Coutinho to D. João Rodrigues de Sá e Melo, March 4, 1803, AHU ACL CU 13 Cx 124 D 9561.

5. Francisco de Sousa Coutinho to D. João Rodrigues de Sá e Melo, March 4, 1803, AHU ACL CU 13 Cx 124 D 9561.

6. Thomas Dimsdale, *The Present Method of Inoculating for the Small-Pox. To Which are Added Some Experiments, Instituted with a View to Discover the Effects of Similar Treatment in the Natural Small-Pox* (London: 1768); Thomas Dimsdale, *Método actual de inocular as bexigas*, trans. Manuel Joaquim de Sousa Ferraz (Porto: Oficina de Antonio Álvares Ribiero, 1793). Fundo Geral Monografias, S.A. 30312 P. Biblioteca Nacional de Portugal.

7. John Quier, *Letters and Essays on the Small-Pox and Inoculation, the Measles, the Dry Belly-Ache, the Yellow, and Remitting, and Intermittent Fevers* (London, 1778).

commodities, chattels, and units of labor.⁸ They were expendable, yet essential to the imperial project.⁹ In Grão-Pará, inoculation would enable the imperial project to proceed despite its health consequences. Most enslaved people survived smallpox outbreaks or inoculation only to die of other causes. Even lifesaving technical and medical advancements can work to maintain the social, environmental, and existential order. Rather than sustaining life, smallpox inoculation reproduced and maintained the intertwined systems of imperialism and slavery, with their violence, pernicious inequity, morbidity, and needless death.

Perhaps we might imagine beyond the thirty-three enslaved Africans' fears and their enslavers' reputed successes, through wonder, speculation, and questions.¹⁰ How much care and tenderness persisted amid the violence? Did parents or siblings hold the three-year-old as they prepared to receive an inoculation? Were mothers forced to hand over their children to strangers in the process? Did they smell the infected, who braced themselves to have smallpox pus removed? Did the infected person look at the recipient reassuringly? Did they exchange words, prayers, hopes, or ask questions about the procedure? Perhaps the twenty-five-year-old assisted, hoisting the small children into their lap and calming them before the incision. Which women (because it was usually women) tended the children until they recovered? Who hovered, feeding them vegetables and broth while their fevers broke, administering treatments, and applying balms and oils to their skin, ensuring they did not scratch and infect their pustules, or worse, disrupt the incision? Even

8. On slaveowners' views of the enslaved, see, for example, Jennifer L. Morgan, *Reckoning With Slavery: Gender, Kinship, and Capitalism in the Early Black Atlantic* (Durham, NC: Duke University Press, 2021).

9. "Supplica a Vuestra Eximo Proveedor da Junta da Administração da Companhia geral do Grão Pará e Maranhão," June 18, 1777, AHU ACL CU 013, Cx 77, D 6407; João Pereira Caldas to Martinho de Melo e Castro, June 18, 1777, AHU ACL CU 013, Cx 77, D 6407; Caldas to Martinho, June 18, 1777, AHU ACL CU 013, Cx 77, D 6407. Daniel Domingues da Silva, "The Atlantic Slave Trade to Maranhão, 1680-1846: Volume, Routes and Organisation," *Slavery and Abolition* 29.4 (December 2008): 477-501; Walter Hawthorne, *From Africa to Brazil: Culture, Identity, and the Atlantic Slave Trade, 1600-1830* (New York: Cambridge University Press, 2010).

10. For their methodological innovations, I am indebted to Saidiya Hartman, "Venus in Two Acts, A Speculative School of Revolutionary Politics," *Small Axe: A Caribbean Journal of Criticism* 26 (June 2008): 1-14; Sasha Turner, "The Nameless and the Forgotten: Maternal Grief, Sacred Protection, and the Archive of Slavery," *Slavery and Abolition* 38, no. 2 (2017): 232-50; Sara E. Johnson, "He Was a Lion, and He Would Destroy Much": A Speculative School of Revolutionary Politics, (2019): 195-207; and Ada Ferrer, "Slavery, Freedom, and the Work of Speculation," *Small Axe: A Caribbean Journal of Criticism* 23, no. 1 (2019): 220-28.

without answers, these questions and errant speculations trouble the foundational liberal narratives of inoculation as progress.

Speculation offers a way to divest from autopoiesis in slavery's afterlife.¹¹ What if we pursued and imagined thriving, not just preserving life? We could then confront our current ontologies of health and healing, and include anti-racist, feminist, environmentalist, and abolitionist collectivist politics that far exceed the neoliberal health care offered by a practitioner–patient dyad. If we want healing to account for Black life and thriving, we will have to reckon with history. We must examine the suffering and death European medical intervention rendered permissible and sustainable for their imperial projects—as well as their enduring legacies in medicine, public health, and science.

11. On “autopoiesis,” see Katherine McKittrick, *Dear Science and Other Stories* (Durham, NC: Duke University Press, 2021), 133. On “slavery's afterlife,” see Saidiya Hartman, *Lose Your Mother: A Journey along the Atlantic Slave Route* (New York: Farrar, Straus and Giroux, 2007), 6.