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Francisco Javier Martinez

Mediterranean quarantines, 1750–1914

Space, identity and power

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John Chircop and Francisco Javier Martínez

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Epidemics, quarantine and state control in Portugal, 1750–1805

Laurinda Abreu

Introduction

On 15 May 1756, some two months after reports had arrived of an outbreak of plague in Algiers and just a few days after his own appointment as Secretary of State for Home Affairs, the most important government post in Portugal, Sebastião José de Carvalho e Melo, the future Marquis of Pombal, ordered Dom João de Lencastre, Colonel of the Naval Regiment, to proceed immediately to the fort of Paço d'Arcos (on the northern shore of the mouth of the Tagus, west of Lisbon) and there to adopt all necessary measures to prevent the plague from spreading to Portugal (Figure 9.1). All ships arriving from 'infected lands' were to be subjected to 'strict quarantine' and their cargoes transferred to the lazaretto at Trafaria (on the opposite shore of the Tagus) for inspection. That day saw a flurry of other missives on the same subject rushed off from the Royal Palace. The letter to the *Provedoria Mor da Saúde* (Health Authority) – a body answerable to the Lisbon City Council – ordered the chief health officer (who was appointed from the city aldermen) to join Dom João de Lencastre and place himself at his service. Six letters were sent out to the *estribeiro-mor* (chief equerry) of King José I (1750–77) with instructions to place the army on high alert and to provide troops to man the 'towers, forts and other naval locations'. The military authorities in the country's ports received orders to put in place the protection measures laid down in the *Regimento da Saúde* (Health Statute). The crown-appointed representatives of the central government in the port

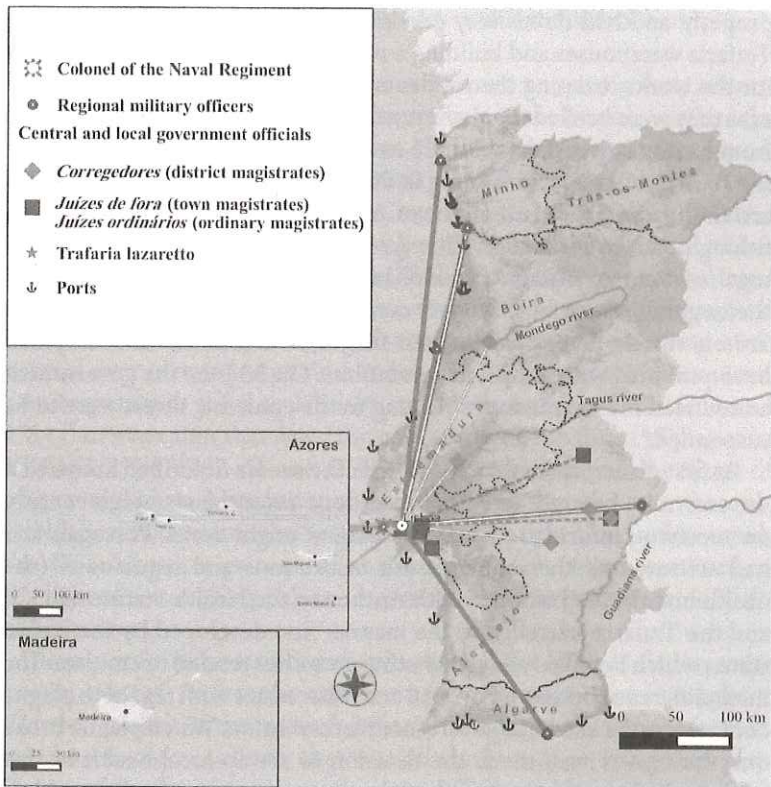


Figure 9.1 Plague in 1756 (path of communications).

towns – *corregedores* (district magistrates), *provedores* (administrators) and *juizes de fora* (town magistrates) – and the local town councils were told to cooperate with the army and to aid in implementing the control, prevention and isolation measures. It was only in the Atlantic archipelagos of the Azores and Madeira that vigilance was left entirely to the local authorities.

The following week, Carvalho e Melo and Dom Luís da Cunha Manuel, who had replaced him as Secretary of State for Foreign Affairs and War,¹ wrote to the Lisbon City Council again. In a dozen or so letters they criticised the chief health officer for not doing his job

properly and laid down very precise instructions about repairing the Trafaria warehouses and building a new infirmary; recruiting labourers for the works; evicting the residents of houses around the lazaretto in case they were needed for quarantine purposes; preventing sick inmates from having any contact with the outside world; stopping vessels from the Barbary Coast from landing in Portugal; and quarantining all boats arriving 'from the Mediterranean or other ports in Italy', including fishing boats and warships.² The governors added that consuls in Portugal of France, Britain and Holland had already been informed of the ongoing operations, the fort commanders had been authorised to fire on vessels that dared to flout the royal decisions,³ and they had been provided with additional munitions. On 30 June the government announced that all measures relating to the epidemic threat were to be suspended.⁴

At first glance, it would appear from the events described above that the crown had merely acted as it had done since the sixteenth century on receiving information that the plague might reach Portugal, and had activated all the public health institutions and regulations (the health boards, the Lisbon Health Authority, the Health Statute of 1526 and the Trafaria lazaretto) in the manner first developed by the Italian states, which Portugal and many other countries tended to emulate. The main difference between Portugal and other states with regard to plague control was the extent of government intervention. When plague broke out, the crown itself made the decision to set up local health boards (only in Lisbon was the health authority a permanent body) and laid down the measures that local communities were required to implement. This approach was part of the wider political project that saw public health as a matter of governance during the development of the Early Modern state. The project had begun in 1498 with the creation of the Lisbon *Misericórdia* – a crown-sponsored lay confraternity that had developed a standard model for dealing with poverty and hospital administration, which was soon copied throughout the country – and was strengthened in 1568 with the establishment of a kind of healthcare safety net designed to provide the poor with free medical assistance.⁵ In this interpretation, there was nothing new in the way Carvalho e Melo pushed through the measures described above – known as the *Providências por ocasião do receio de peste em 1756* (Measures occasioned by the fear of plague in 1756)⁶ – were it not for the political climate in Lisbon in the spring of 1756.

Epidemics used as tool for political survival

Sebastião José de Carvalho e Melo had been a not particularly notorious minister in King José's government before the terrible earthquake that struck Lisbon on 1 November 1755. He then seized the opportunity offered by the disaster to impose his authority and reform the state, sparing neither the Catholic Church nor the upper nobility in the process. So great were the changes he introduced that José Subtil has termed them a 'political earthquake'.⁷ Public health, however, as pointed out elsewhere, was not one of his main areas of intervention, and he confined himself to protecting the *misericórdias* and securing state control over certain hospitals. He did not display any special concern about epidemics prior to 1756 (they had occurred in 1752, 1753 and 1754)⁸ or even after that date (the country faced the threat of plague in 1758–61, 1764, 1767–68 and 1770)⁹. Yet, however serious the threat of plague might have been just months after the earthquake, and whatever public health concerns the Secretary of State might have had in mind, the 1756 Measures gain a whole new significance when examined in the light of the ongoing palace coup designed to strip Carvalho e Melo of his powers.

Seen purely in terms of epidemic control, the 1756 Measures were not innovative. As was the case in many other port cities throughout Europe, the line of defensive fortifications along the Portuguese coast acted as a *cordon sanitaire* that was relatively easy to bring into play. Protected by the early sixteenth-century Tower of Belém, the port of Belém near Lisbon and its westward extension in Paço d'Arcos, together with the lazaretto across the estuary in Trafaria, formed the physical space that materialised the Lisbon City Council's authority over public health matters. With every plague alarm, the crown ordered the chief health officer out to Paço d'Arcos to coordinate the country's protection measures. It should be noted that the administrative situation in Lisbon was very different from that in other towns in Portugal, which generally enjoyed considerable freedom. Since 1572, the chairman of the Lisbon City Council, a member of the country's aristocracy, and the aldermen had been appointed directly by the king¹⁰ and were entitled to an annual stipend. As a result, the chief health officer ultimately was answerable to the monarch. Nevertheless, over time, the council had sought to assert its own authority and on many occasions entered into direct confrontation with the crown.

Although the substantial pay rise awarded on 23 March 1754¹¹ might seem to suggest otherwise, the absolutist process of centralising political power after the earthquake led the government to launch a number of attacks on the Lisbon City Council's financial privileges and client relations, particularly those associated with and/or dependent on the public health and hygiene portfolios.¹² Even before the 1756 Measures, the decree ordering the council to draw up a new statute for the pest-house and its staff¹³ and the decision to take the lazaretto out of the council's hands so it could be used by the *Casa da Índia* (except during epidemics)¹⁴ as a staging post for goods and prisoners bound for the East¹⁵ accentuated the trend of forcing the city government to become institutionally dependent on the central government. The innovative aspect of the Measures lay in the governor's choice of the navy and not the chief health officer to organise ship quarantines: with a stroke of the pen, Carvalho e Melo flaunted his control over both the armed forces and the upper nobility as represented on the city council. The council's subordination was soon rewarded on 11 June with the reappointment of the chairman and aldermen,¹⁶ followed by an order for special remuneration whenever the chief health officer moved out to Paço d'Arcos.¹⁷ At the same time, the architects of the palace conspiracy were severely punished.¹⁸

It seems quite likely that two events – the publication in May 1756 of a tract by an anonymous writer entitled *Relação verdadeira da implacavel peste, que padece a cidade de Marrocos, Argel, e outras Africanas* [...] (True account of the implacable plague affecting the city of Marrakesh, Algiers and other African cities [...]), relating the horrors caused by the epidemic in the lands affected, and the presence of the royal family at a military exercise carried out by João de Lencastre's regiment as part of the 'convenient preventions to preserve this kingdom from contagion',²⁰ in the words of the *Gazeta de Lisboa* on 27 May that year²¹ – may have been engineered by Carvalho e Melo to justify and legitimise his actions. The manner in which the crown dealt with epidemics reveals the importance of policies on poor relief and public health to the Early Modern state in Portugal, in that they helped the monarchy to strengthen its power over the towns and their elites.²² Towards the end of this process, in 1756, in the midst of the chaos and disorder that followed the earthquake,²³ the news that the plague was spreading in the Mediterranean seems to have been used to ensure

Carvalho e Melo's political survival and to advance the reformist project he had begun the previous year. The symbolic, if not the physical, target of the disproportionate military strength deployed along the coast, especially in Lisbon itself, were certain members of the nobility who had always dominated politics at court and whom the governor was now preparing to subject to the royal yoke.

The epidemics of 1800: the first *cordons sanitaires*

Events at the dawn of the next century again suggest that epidemics were being managed politically for purposes that lay outside the field of public health *per se*. In the threats of plague and yellow fever that circulated between 1800 and 1804, the sea was still considered the main source of contagion, yet most of the measures taken related to the land border. On this occasion the leading role was played by one of Pombal's creations, the Intendancy-General of Police. In early 1780, only two decades after it was founded on 25 June 1760, the Intendancy-General of Police under its new intendant, Diogo Inácio de Pina Manique, began to take an active interest in the field of poor relief and public health, thereby coming to resemble other European police forces in its social aims. In Pina Manique's mercantilist plans for a populous, prosperous and educated country, which were heavily influenced by the values of the medical police as embraced by the German doctor Johann Peter Frank, it was the state's duty to care for the people's health and, therefore, to steer the actions of local government and healthcare professionals to this end. Of the many aspects of public health that the police addressed after 1780, epidemics (both on home soil and coming from abroad) were among those that had the greatest social and political impact. They were also the area in which the intendant soon met with most resistance – in this particular case from the towns and cities, which were reluctant to contribute financially to the proposed measures, and from medical practitioners, who were hardly enthusiastic about the requirement to provide the poor with free healthcare.

To combat 'epidemics of putrid fevers among the destitute'²⁴ – diseases usually resulting from the deplorable sanitary conditions in which the majority of the population lived – the Intendancy-General of Police reacted immediately to news of an outbreak by sending a small group of doctors and/or surgeons to the affected areas to provide care and

to work with the local authorities in investigating the source of the outbreak and seeking the best way to resolve it. Where disease might be brought in by sea or by travellers crossing the border from Spain, situations that came under the Lisbon City Council's jurisdiction, as mentioned above, the role of the police was transformed during Pina Manique's term of office (1780–1805). At first it merely gathered and passed on information on the movement of diseases and their carriers – as was the case in 1783 when the plague hit Cadiz, Constantinople, Crimea, Bohemia, Poland, Danzig, Prussia and Pomerania, or in 1787 during the plague in Algiers.²⁵ By 1799,²⁶ however, when Morocco was considered 'plague-ridden' (*empestado*),²⁷ the intendant had become the crown's main advisor on such matters: not only was it his idea to send one cavalry detachment to Paço d'Arcos and another to Trafaria to strengthen the surveillance of people and vessels,²⁸ but the police were also increasingly involved in the inspection of vessels putting in to Tavira, Faro²⁹ and Lagos before being sent on to the lazaretto in Trafaria, the only place where quarantine measures were implemented.

It was also the intendant who on 19 September 1800 notified Dom Rodrigo de Sousa Coutinho, Secretary of State for the Navy and Overseas Territories, that Cadiz was in the grip of a yellow fever epidemic. His informant, the merchant Jacob Dahorman, had warned that the disease was highly contagious, and in fact it had caused the death of 2,616 people in two weeks (24 August–8 September).³⁰ Armed with a list of the ships then anchored in Cadiz harbour, Pina Manique stressed that although only one of them had Portugal as its stated destination the others could easily change course and put the country at risk. Seeing Cadiz in dire straits with the loss of between 7,400 and 8,500 inhabitants³¹ (13–15% of its population) in less than five months, the government entrusted the organisation and implementation of epidemic control measures to the Intendancy-General of Police. At first it focused on the seaports and on setting up temporary lazarettos, but soon it turned its attention to establishing a land-based *cordon sanitaire*. Regular troops were stationed in Trás-os-Montes district in the north of the country to form the cordon there, whereas in the south the task fell to local, unpaid militias (*Ordenanças*).

With the authority to issue 'the most severe orders to prevent any kind of communication allowing such a disease to spread to the towns and villages of this kingdom', Pina Manique was given powers over the

royal magistrates, the chief health officer and the military governors of the country's ports. He was also to liaise with the military governor of Alentejo to prepare quarantine for 'everything that might come from Andalusia and even from Spain'.³² There is little in the archives that reveals what happened between late September and November 1800, while these inland cordons were being organised. It seems, however, that they merely consisted of men deployed along the Spanish border. The Health Statute provided for the use of troops during epidemics, but only in the port of Lisbon; vigilance elsewhere in the country remained in the hands of the health officers, although since 1695 they had had permission to bear arms.³³ No evidence has yet been found that troops had ever been used to protect the land frontier against epidemics prior to 1800.

As Gunther E. Rothenberg has pointed out,³⁴ quarantine measures were generally much more difficult to implement on land than at sea, and Portugal proved not to have any experience in the matter. Added to that was the state of friction between the intendant and the royal ministers, most of whom he accused of being negligent, irresponsible, lazy and corrupt. By the end of 1800 he was also criticising the head of the postal service³⁵ and the chief health officer,³⁶ making extremely damning remarks about the latter. Relations were likewise strained between the Intendancy-General of Police and the military hierarchy, which refused to supply the troops that the public health officers needed to enforce the maritime quarantine measures, as reported by the *juíz de fora* for Setúbal;³⁷ nor was it particularly happy about the intendant's increasing prominence.

On the ground, there were problems in abundance. The military governor of Trás-os-Montes, Manuel Jorge Gomes de Sepúlveda, expressed his perplexity at the contradictory instructions sent to him from Lisbon regarding the real purpose of the cordon. In the south, relations between the civil and military authorities were difficult³⁸ – the militia cordon was under the command of Field Marshal José Joaquim de Melo Lacerda assisted by the *corregedor* of Beja – and recruits were poorly trained. On 31 October, the *corregedor* of Elvas complained that 'a cordon without regular troops is always to be feared because it is susceptible to laxity [of manners]',³⁹ and the men who formed the cordon along the border of Alentejo were rough, illiterate (any written document presented to them as a health passport was accepted as such)

and easily corruptible. Moreover, the family ties linking people on both sides of the border made it practically impossible to enforce the ban on communication between Portugal and Spain, as the *provedor* of Beja was at pains to point out (Figure 9.2).

Without underestimating the impact that fear of yellow fever, which was rife on the other side of the border, may have had on the

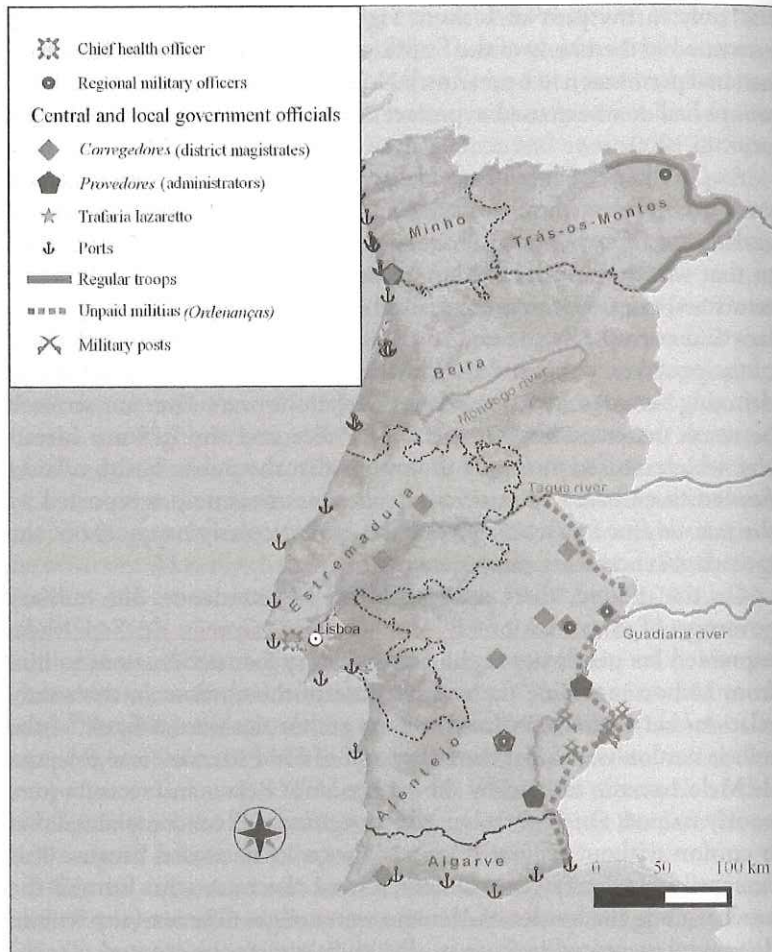


Figure 9.2 *Cordon sanitaire*, 1800.

government's decisions in 1800, it is difficult to avoid harking back to the political situation in the country. Only politics can help explain why, for example, the militia-manned *cordon sanitaire* was apparently lifted in November that year, even though across the border in Spain epidemics continued claiming victims until December 1801. Such a view is supported by the government's decision to waive quarantine for the British warships blockading Cadiz and by the letter sent by the *corregedor* and *provedor* of Porto district on 11 October 1800 informing the government that when monitoring the ports he had paid particular attention to ships from 'enemy and suspect nations, coming from said port of Cadiz or from those in Africa, or from North America'.⁴⁰ The fact is that Napoleon Bonaparte's return to France in October 1799 had once again raised tensions in Portugal in the context of the Continental Blockade. With war looming, Portugal sought military assistance from Lieutenant-General Ralph Abercromby, who was stationed in Gibraltar at the time; between 8 and 14 November 1800, Abercromby sent 2,222 British soldiers to Lisbon (out of the 12,000 requested). The country began to prepare for Spanish invasion and war, which eventually happened in May-June 1801.

In this situation, it appears from ongoing studies that the Portuguese authorities were dealing jointly with the dual threats of yellow fever and war. The difficulty in recruiting soldiers for the army and retaining them was well known. In 1796, with conflict on the horizon, the government had entrusted the police and its intendant with the task of extraordinary recruitment, thereby, in the view of Fernando Dores Costa, acknowledging the failure of the recruitment system based on the network of militias.⁴¹ The task proved to be Herculean, despite the various tactics used by Pina Manique to overcome the people's resistance and circumvent the devices they used to avoid enlistment. The greatest opposition was encountered precisely in Alentejo, in contrast to the north, where the number of volunteers even earned an accolade from Pina Manique. These different attitudes may have underlain the decision to man the cordon in Alentejo with militias, perhaps playing on the fear of yellow fever to persuade men to join up. Once they had enlisted, the *cordon sanitaire* was probably transformed into a military cordon.⁴²

This idea is supported by the geography of the cordon: if the epidemic was confined to Andalusia with its main focus in Cadiz, why emphasise the land border to the detriment of the seaports, where no special measures appear to have been taken apart from a tightening of

ship inspections in the Algarve and Porto? And why extend the land cordon only as far north as the Tagus, leaving the whole border from the Tagus to the Douro open, and then deploy troops in Trás-os-Montes? The answer is to be found in Spain, which had been moving troops to the border area since 1797 and in 1800 was preparing for war, setting up field hospitals and supply depots in Galicia, Extremadura and Andalusia. It was precisely along the border with the last two regions that the Portuguese had ranged their *cordon sanitaire* of militias. Even so, and despite the many weaknesses exposed by the Portuguese army and made plain in its defeat in what came to be known as the War of the Oranges (1801),⁴³ the fact is that the country entered the new century having avoided the epidemics.

The role played by the press in this process should not be underestimated. It was used politically to keep the population alert by teaching it how to recognise signs of disease and what steps to take to avoid it. Equally important were the publishing houses, likewise encouraged by the government, which sponsored a number of translations of works publicising successful experiments in epidemic control in Smyrna,⁴⁴ Ragusa and Dalmatia.⁴⁵ A book published in Lisbon in 1800 describing how Marseille, Toulon and Moscow had defeated the plague became a best-seller, with nine editions appearing the following year.⁴⁶ A short pamphlet on lazarettos extracted from John Howard's well-known book *An Account of the Principal Lazarettos in Europe* [...] ⁴⁷ was published at government expense in November 1800. The purpose in this case was to justify the request of Prince Regent João (future King João VI) for a public loan of 40 million *réis*⁴⁸ in order to build a new lazaretto, which was announced in the same month and was promptly subscribed to by thirteen Lisbon merchants.⁴⁹

Making the most of the favourable winds blowing from the Royal Palace, which had issued a statement praising his 'zeal and incomparable activity', Pina Manique attempted to ensure that the extraordinary powers he had been given on account of the epidemic⁵⁰ should be taken as a 'rule for the future' (a request that does not seem to have been granted, as will be seen below),⁵¹ while also trying to persuade the crown to regulate the relationship between the police and the armed forces ('so that the police authority can act in agreement with the military').⁵² In 1804, he was again chosen to lead the fight against the new threats of epidemics.

The 1804 yellow fever outbreak and the frontier cordon

The alarm sounded again in Portugal in the summer of 1804. There had been yellow fever in Cadiz and Malaga⁵³ for some years, but now it was spreading throughout Andalusia and coming perilously close to the Portuguese border. Portugal was in a particularly difficult economic situation, and the prince regent once again called on the Intendancy-General of Police to deal with the impending epidemic. Since 1802, the country had been trying to maintain its policy of neutrality in the Franco-British conflict, which enabled it to import goods from Britain and re-export them to France and Spain. The government was determined to defend the port of Lisbon, which acted as an 'economic lung for the warring countries',⁵⁴ and Pina Manique was ordered to implement immediately the measures 'that in previous years were put in place to the great benefit and security of public health'.⁵⁵ The intendant was vested with a wide range of policing powers and the authority to coordinate the royal magistrates,⁵⁶ which, together with his experience of enlisting troops⁵⁷ and organising the *cordon sanitaire* in 1800, placed him in a unique position to be able to address the imminent crisis. Having received his orders from the Royal Palace on 27 August, Pina Manique set to work on the very same day.

The first measures taken by the Intendancy-General of Police included organising temporary lazarettos in all seaports⁵⁸ so as to ease the concentration of quarantined vessels in Trafaria that the Health Statute required, and introducing stricter controls over fishermen, whom he described as 'ambitious' people who were all too eager to take the small rewards offered by vessels to tranship passengers.⁵⁹ The provincial governors of Alentejo and Algarve were sent instructions to 're-form the cordon of militias'⁶⁰ and the town councils were told to pay for the running of the lazarettos and to set up 'medical boards' that would assess travellers' state of health⁶¹ and then, depending on the outcome, either issue them with health certificates⁶² or quarantine them. In a letter to the royal ministers, Pina Manique stressed that the news from Malaga was still 'most disastrous and worthy of the greatest precautions for the sake of preserving public health'.⁶³ He placed the blame for the scale of the outbreak squarely on their Spanish counterparts for not having taken action promptly enough,⁶⁴ and put pressure on the government's representatives around the country to carry out

his orders by threatening to have them arrested if they prevaricated. He appealed to the prince regent to allow him greater freedom of movement to ensure the success of his operations by granting him the same extraordinary powers that he had enjoyed in 1800.

The correspondence exchanged between the government and the Intendancy in the first weeks of October 1804 portrays particularly anxious times and reveals a veritable obsession with controlling people's movements regardless of social status⁶⁵ or country of origin,⁶⁶ and with inspecting premises that gave lodging to foreigners.⁶⁷ There was also concern for the sanitary conditions in which people lived, as they were advised to avoid domestic waste dumps, protect their goods and be wary of markets and slaughterhouses.⁶⁸ It proved difficult to organise the various different bodies and jurisdictions involved, not least because the orders issued sometimes conflicted with the legislation in force, particularly with regard to the quarantining of vessels.⁶⁹ As a result, everybody was seeking 'to arrogantly ascribe to himself the authority to order others about, overstepping the limits laid down by law', as the chief health officer complained on 24 October, referring to the dispute between the health officers of Portimão and Faro, their respective ministers of justice and the military governors.⁷⁰

On 21 October 1804, the crown responded by setting up the *Junta de Inspeção sobre as Providencias para a Peste* (Plague Measures Inspection Board), primarily to deal with opposition within the armed forces.⁷¹ The Board was to 'adopt all necessary measures using the means available to prevent the spread of the said plague to the kingdom', and was given the power to 'issue orders and [ensure] that they are obeyed by all institutions and persons in the kingdom'⁷² and to mete out punishment if they were not. This was essentially a crisis cabinet made up of the chairman of the Lisbon City Council, the general of the infantry, the admiral and vice-admiral of the fleet and the Intendancy-General of Police. Everything suggests that this *Junta de Inspeção* was the embryo of what in 1813 became the *Junta da Saúde Pública* (Public Health Board). Apart from the intendant, none of the Board's members had apparently been informed that it was being established.⁷³ The same seems to have been true of the government's ministers, who on the same day were told of the purpose of the Board and that the monarch required each of them to collaborate with it insofar as it affected them 'without delay or hindrance.'⁷⁴ The Lisbon Council chairman was also told to place the senate assembly hall at the new institution's disposal,⁷⁵

pay for its expenses⁷⁶ and chair its meetings.⁷⁷ Copies of all documentation exchanged between the office of the Secretary of State for Affairs of the Kingdom and the Intendancy-General of Police and between the latter and the magistrates⁷⁸ were forwarded to the Board so it would have 'intelligence of its content in order to take account of the measures adopted'.⁷⁹

By including the chief health officer and the heads of the army and navy on the Board, the prince regent aimed to remove the obstacles that the Intendancy-General had encountered in making the quarantine and *cordon sanitaire* system work.⁸⁰ This decision had an immediate impact on the chief health officer's performance. He swiftly produced a long and markedly self-justificatory description of all the work that had recently been carried out, which he presented on 26 October.⁸¹ He subsequently updated this information at the end of every week,⁸² with the addition of 'a true report [...] of the state of health of the city [Lisbon]' compiled from public health and epidemiological information from a number of sources.⁸³

Pina Manique had ordered that the militia cordon⁸⁴ be re-formed, but the plans that Colonel José Carconte Lobo, the main architect of the *cordon sanitaire*, drew up and forwarded to all the division commanders on 11 October 1804 suggest that the intendant's words were not to be taken too literally. Although the experience gained in 1800 had been valuable, the 1804 cordon was, if not completely innovative, then certainly much more complete than the previous one. The model on which it was based is not known, but it is likely to have resulted from a combination of the expertise brought by the Prussian generals who were reorganising the Portuguese army⁸⁵ and the procedures followed in the *Cordão de Cautella Nova* (Cordon of New Precaution) organised by Madrid, to which the Lisbon Government had access.⁸⁶ According to the document entitled 'Recapitulation of the total force necessary for the organisation of a Cordon of Troops on the frontier from the Tagus beginning in Montalvão, to the Guadiana',⁸⁷ the cordon would require a total of 3,151 cavalry and infantry (including twelve different ranks) in eight military divisions, tasked with controlling the 'points of sale of tobacco' and the movement of people and correspondence, as well as protecting hospitals, lazarettos and boats on the River Guadiana.

The 'Instruction for the commanders of the divisions that form the frontier cordon'⁸⁸ laid down not only the places where the troops should

be stationed but also the *misericórdia* hospitals that would take care of sick soldiers and the lazarettos to which infected travellers should be sent. It also provided specific information on how to set up and run a lazaretto and even on what treatment should be given. Particular attention was devoted to the relations between the troops and the local communities and officers of justice (Figure 9.3).

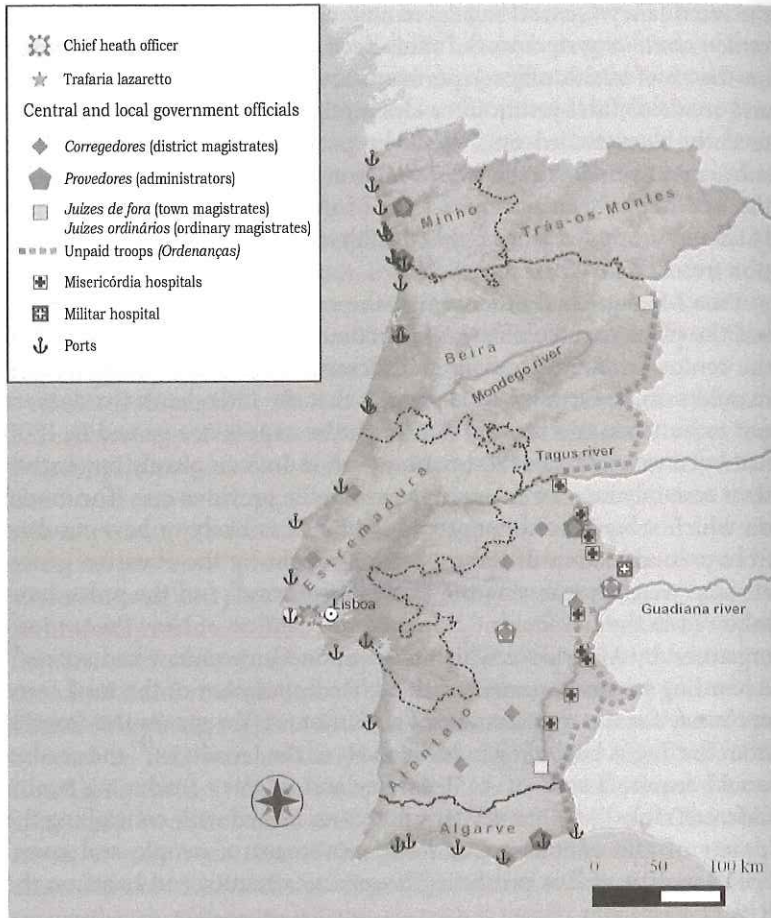


Figure 9.3 Cordon sanitaire, 1804.

Mapping this information reveals that the *cordon sanitaire* comprised three lines of protection: the first comprised the soldiers stationed along the border; a series of lazarettos some distance behind them formed the second; and the third was made up of the *misericórdia* hospitals at a much greater distance from the front line.

This time there was practically no connection between the *cordon sanitaire* and the line of fortifications, as there had been in 1800 (Figure 9.4). The troops now surrounded villages and blocked roads – from highways to rural lanes and byways – not to mention almost 200 small ports. The distances kept between units and the care taken in identifying the outermost limits of the towns and villages to be patrolled show that international criteria on the spacing of guard posts were being followed. In addition, cavalry detachments were sent to patrol the border constantly, and division commanders were required to perform random checks on their troops, who were relieved every 48 hours. On 22 November, the prince acknowledged everyone's efforts and gave thanks that the country had remained free of contagion;⁸⁹ two days later he ordered that the cordon be lifted. However, further outbreaks in Spain in December would delay the process, and it was only on 20 January 1805 that the Board ordered most of the troops back to barracks, transferring control of the military cordon to the district magistrates. It had not been possible to test whether the chief health officer had been right when, on 26 October 1804, he had criticised the flimsiness of the cordon, which, he claimed, would only 'be of service if the contagion does not come.'⁹⁰

Conclusion

Public health and poor relief were areas in which the Portuguese crown asserted and demonstrated its power during the construction of the Early Modern state. Having been subject to government intervention since the late fifteenth century, hospital management, disease control, the regulation of the 'medical' professions and the distribution of poor relief and healthcare assistance came to reflect all the vicissitudes that influenced the exercise of political power. A study focusing on the late sixteenth century showed, purely with regard to epidemics, that populations were better protected under a strong government that was able to impose itself on the towns and force them to implement

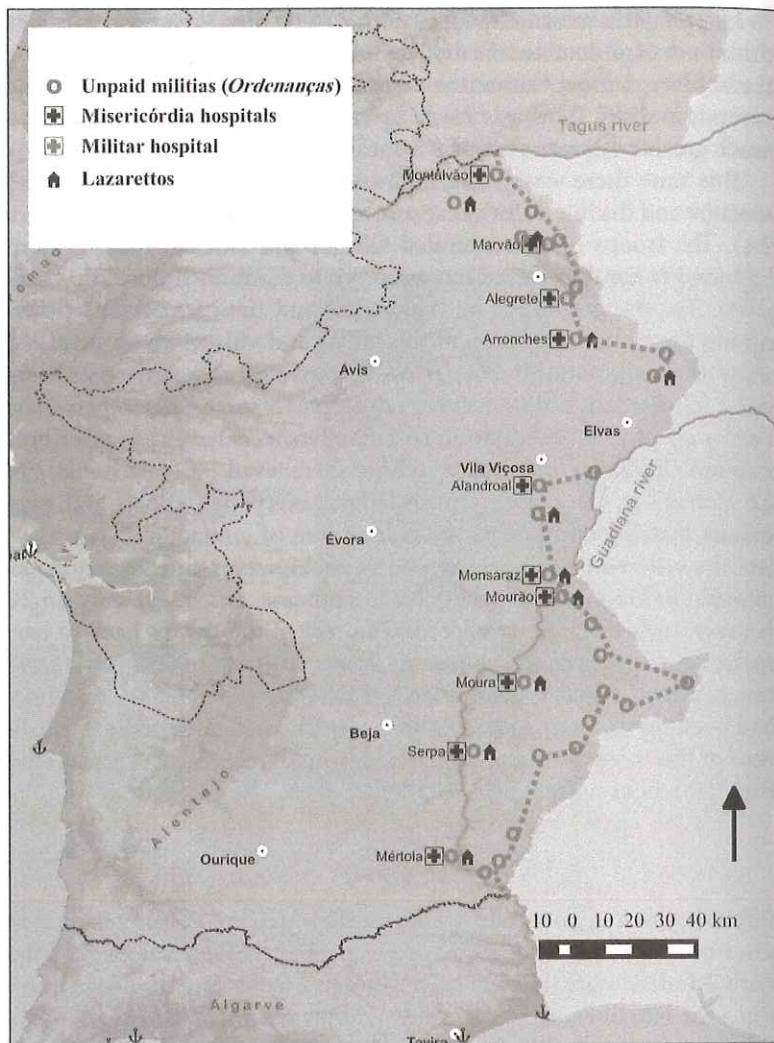


Figure 9.4 Cordon sanitaire, Alentejo 1804.

the crown's orders and sanitary measures. Conversely, whenever royal power appeared weaker, as it often did, the plague tended to spread uncontrolled while the towns waited for instructions or were forced to implement counterproductive measures. This pattern, which may also be examined as a barometer of the relations between central government and local communities, continued without major changes until the latter half of the eighteenth century, when new factors were added to the equation.

The possibility that the fear of epidemics and the introduction of public safety measures may have been exploited for purely political gain can be seen first in May 1756 and again in late 1800. In the first case, Sebastião José de Carvalho e Melo used a remote threat of plague – reported two months before in Algiers – to ensure his political survival. By controlling the navy and army, which he deployed along the Atlantic coast supposedly to protect the country from a peril that by then was threatening Naples, Carvalho e Melo displayed the extent of his power to those who were manoeuvring to oust him but ended up being banished from court themselves. In 1800, the situation was rather different, in that this time the government as a whole presented its actions as being a response to the yellow fever epidemic in Cadiz, when in fact the country's military defence was also at stake.

The notion that this first military *cordon sanitaire* to be established in Portugal had been planned more to police the border with Spain than to control the spread of the epidemic is supported by its geography. Even though the Mediterranean was the main source of contagion, the government decided to deploy troops along the country's northern border and to man the cordon in the south with militias. In both cases, men were deployed on the Portuguese side of the frontier to shadow the movements of the Spanish army, which was massing near the border in preparation for an invasion. A significant point in this interpretation is that the task of organising the cordon of militias was entrusted to Pina Manique, who was also responsible for recruiting soldiers for the army. This proved extremely difficult in Alentejo, where there was little appetite for enlisting in the army voluntarily. Everything suggests that this short-lived *cordon sanitaire*, which has left little trace, was immediately prepared for war.

The last case analysed in this chapter is from 1804. Although the political scene was still highly unstable – after the Portuguese defeat in the War of the Oranges the country feared French reprisals for refusing to close its ports to Britain, a choice that ultimately led to the Napoleonic invasions of 1807–11 – there is no sign that any political capital was made out of the genuine danger posed by the yellow fever epidemic that had spread throughout Andalusia and was threatening Portugal. The cordon established this time was significant in that it was a genuine *cordon sanitaire* (in contrast to the cordon of 1800, which had not gone beyond the stage of troop deployment) and marked the beginning of a new phase in the way the country dealt with epidemics. Ongoing research has revealed that it drew on the experience of recruitment gained in 1800 and closely followed the prevailing ideas in Europe⁹¹ regarding the arrangement of military guard posts, the inspections to be performed by the municipal medical boards, and the roles planned for local hospitals and temporary lazarettos. Many of the difficulties encountered by the authorities in setting up the 1804 *cordon sanitaire* have now been elucidated, but one fact unarguable: the country escaped again the scourge of yellow fever, whereas, for example, the epidemic killed 36% of Malaga's population in that year.

Notes

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- 1 Joaquim Joaquim Veríssimo Serrão, *História de Portugal [1750–1807]*, Lisboa, Verbo, 1982, 37.
- 2 This applied immediately to *Navio de Guerra La Gloria*, a British warship sailing from Algiers, Arquivo Nacional da Torre do Tombo (ANTT), *Ministério do Reino*, book 415, fl.11v.
- 3 ANTT, *Ministério do Reino*, book 415, fl. 5.
- 4 ANTT, *Ministério do Reino*, book 415, fls 13–15.
- 5 See L. Abreu, 'Assistance et santé publique dans la construction de l'État moderne: l'expérience portugaise', *Revue d'histoire moderne et contemporaine* 3, 2014, 67–97. 'A General Overview on the Poor Relief and Health Care "System"', in L. Abreu, *The Political and Social Dynamics of Poverty*,

- Poor Relief and Health Care in Early-Modern Portugal*, Oxford and New York, Routledge, 2016.
- 6 ANTT, *Ministério do Reino*, book 415, fl.1v.
 - 7 J. Subtil, *O Terramoto Político (1755–1759) – Memória e Poder*, Lisboa, UAL, 2007.
 - 8 Respectively, Eduardo Freire de Oliveira, *Elementos para a História do Município de Lisboa*, Lisboa, Typografia Universal, tome X, 1885–191, 326–327; Arquivo Municipal de Lisboa (AML) – Arquivo Histórico (AH), *Health Provision, Register of the chief health officer's rulings on the plague*, fls 11v–12v; de Oliveira, *Elementos para a História do Município de Lisboa*, 35–36.
 - 9 The vast majority were from the Mediterranean: AML-AH, *Provisões régias*, 345–346; fls 14–21v.
 - 10 Except for the city and guild attorneys, who joined the council in 1591.
 - 11 de Oliveira, *Elementos para a História do Município de Lisboa*, tome XV, 500–522.
 - 12 For example, by abolishing a number of posts created by the chief health officer.
 - 13 de Oliveira, *Elementos para a História do Município de Lisboa*, tome XVI, 35.
 - 14 de Oliveira, *Elementos para a História do Município de Lisboa*, tome XV, 188 and 213.
 - 15 de Oliveira, *Elementos para a História do Município de Lisboa*, tome XVI, 294–295.
 - 16 *Ibid.*, 250.
 - 17 *Ibid.*: payment was authorised in August 1756.
 - 18 Serrão, *História de Portugal*, 35–36.
 - 19 *Relação verdadeira da implacável peste, que padece a cidade de Marrocos, Argel, e outras Africanas, e da grande trovoada, que a 15. de Março do presente anno de 1756. experimentou a Berberia, Lisboa, 1756.*
 - 20 'prevenções convenientes para preservar este reino de contágio'.
 - 21 *Gazeta de Lisboa* no. 21, 1756–05–27, 177–178.
 - 22 See L. Abreu, 'The city in times of plague: preventive and eradication measures against epidemic outbreaks in Évora between 1579 and 1637' *Popolazione Popolazione e Storia* 2, 2006, 109–125.
 - 23 Subtil, *O Terramoto Político*, 112–113.
 - 24 'epidemias de febres podres em gentes miseráveis'.
 - 25 AML-AH, *Provisões Régias*, fls 19v–21v; fls 23–28; fls 29–30; fls 33–34v; fl. 36v; fls 39–43v; AML-AH, *Chancelaria Régia, Livro 1º de avisos de D. Maria I*, fls 111–112v.

- 26 Arquivo Histórico Ultramarino (AHU), *Reino*, box 417, bundle 9; box 177, bundles 2, 3 and 5.
- 27 AHU, *Reino*, box 177, bundle 2; AHU, *Reino*, box 177, bundle 3.
- 28 AHU, *Reino*, box 177, bundle 5.
- 29 AHU, *Reino*, box 417, bundle 29; box 31, bundle 29.
- 30 ANTT, *Intendência Geral da Polícia*, book 161, fls 278v–279.
- 31 J. Fellowes, *Reports of the pestilential disorder of Andalusia, which appeared at Cadiz in the years 1800, 1804, 1810, and 1813: with a detailed account of that fatal epidemic as it prevailed at Gibraltar, during the autumnal months of 1804: also observations on the remitting and intermitting fever, made in the military hospitals at Colchester, after the return of the troops from the expedition to Zealand in 1809*, London, Printed for Longman, Hurst, Rees, Orme, and Brown, Paternoster-Row, 1815, 50.
- 32 AHU-Reino, box 31, bundle 30.
- 33 J.R.C. Sousa, *Systema, ou Collecção dos Regimentos Reaes*, Lisboa, Oficina de Simão Thaddeo Ferreira, 1785, IV volume, 349–350.
- 34 G.E. Rothenberg, 'The Austrian sanitary cordon and the control of the bubonic plague: 1710–1871', *Journal of the History of Medicine and Allied Sciences* 28, 1, 1983, 15–23.
- 35 The intendant accused him of only starting to purify correspondence after he had been severely reprimanded. ANTT, *Intendência Geral da Polícia*, book 6, fls 97–97v.
- 36 ANTT, *Intendência Geral da Polícia*, book 200, fls 215v–217.
- 37 AHU, *Reino*, box 238, bundle 4.
- 38 AHU, *Reino*, box 156, bundle 15.
- 39 'o cordão sem tropa de linha sempre é temível por susceptível à relaxação'.
- 40 'nação inimiga e suspeitosa, vinda do dito porto de Cádiz, ou dos de África, ou da América Setentrional'. AHU, *Reino*, box 31, bundle 31.
- 41 F.D. Costa, 'O bom uso das paixões: caminhos militares na mudança do modo de governar', *Análise Social* XXXIII, 5, 1998, 969–1017.
- 42 This has long been common practice in many countries. Several examples can be found in K. Friedrich *Brandenburg-Prussia, 1466–1806: The Rise of a Composite State. Studies in European History Series*, Houndmills, Palgrave Macmillan, 2012.
- 43 R. Bebianio, 'Organização e papel do exército', in L. Torgal and J. Roque, João (coord.). *História de Portugal*, vol. V. Lisboa, Círculo dos Leitores, 1993, 252–263.
- 44 *Exposição de hum novo remedio curativo e preservativo da peste, presentemente usado com feliz successo no hospital de Santo Antonio de Esmyrna (...)* Lisboa, 1797.

- 45 *Methodo com que se Governa o Estado de Ragusa e Dalmacia, quando nos confins se percebe algum ataque de peste ou outro mal contagioso (...)* Lisboa, 1800.
- 46 *Advertencias dos meios que os particulares podem usar para preservar-se da peste, conforme o que tem ensinado a experiencia principalmente na Peste de Marsalha em 1720, de Toulon em 1721 e de Moscou em 1771 (...)*, Lisboa, 1801.
- 47 *Historia dos principaes lazaretos da Europa (...)*, Lisboa, 1800.
- 48 A.D. da Silva, *Collecção de Legislação Portuguesa desde a última Compilação das Ordenações, 1791–1801*, Lisboa, Typografia Maigrense, 1828, 654–655. F.D. Costa, 'Capitalistas e serviços: empréstimos, contratos e mercês no final do século XVIII', *Análise Social XXVII*, 2–3, 1992, 441–460.
- 49 da Silva, *Collecção de Legislação Portuguesa*, 657.
- 50 Or that the intendant had taken upon himself, as when he authorised innkeepers to arrest any strangers who appeared on their premises.
- 51 'regra para o futuro'. ANTT, *Intendência Geral da Polícia*, book 6, fls 97v–98.
- 52 'para a autoridade da polícia poder ir de acordo com o poder militar'. ANTT, *Intendência Geral da Polícia*, book 6, fls 99v–100v.
- 53 Málaga had lost some 7,000 inhabitants between August and December 1803.
- 54 J.H. Saraiva, *História de Portugal*, Lisboa, Alfa, 1993, 297.
- 55 '... que nos anos passados se puseram em observância com tanto proveito e segurança da saúde pública'. ANTT, *Ministério do Reino*, book 415, fl. 18.
- 56 For example, he was given direct access to the Lisbon Customs House, although he had been removed from its governing board the previous year.
- 57 F.D. Costa, 'O bom uso das paixões'.
- 58 ANTT, *Intendência Geral da Polícia*, Contas para as Secretarias, book 8, fl.16v.
- 59 ANTT, *Intendência Geral da Polícia*, book 162, fls 155–155v.
- 60 AHU, *Reino*, box 179, bundle 31.
- 61 ANTT, *Ministério do Reino*, book 415, fl. 18v.
- 62 ANTT, *Ministério do Reino*, book, 415, fls 19v–20.
- 63 '... a ser as mais desastrosas e dignas das maiores cautelas em favor da preservação da saúde pública'. ANTT, *Ministério do Reino*, book 415, fl. 18.
- 64 ANTT, *Intendência Geral da Polícia*, book 162, fls 172v–173v.
- 65 ANTT, *Ministério do Reino*, book 415, fls 18v–19; fls 20–20v.
- 66 Which included Ireland, Germany and Spain.

- 67 For example, the Prior General of the Carmelites was strongly censured for taking in an Irish friar.
- 68 ANTT, *Intendência Geral da Polícia*, book 162, fls 171v–172v.
- 69 As happened in Tavira, for instance.
- 70 ‘... com prepotência, arrogar cada um a si a autoridade de mandar aos outros, saindo fora dos limites descritos pela lei’. AML-AH, *Provimento da Saúde*, cód. no. 29, fls 14–17v.
- 71 ANTT, *Ministério do Reino*, book 415, fl. 21v.
- 72 ‘... tomar todas providências necessárias, usando os meios disponíveis de modo a evitar a propagação da dita peste para o reino [...] promover ordens e de que estas sejam respeitadas por todas as instituições e pessoas do reino.’
- 73 ANTT, *Ministério do Reino*, book 415, fls 24–24v.
- 74 ‘sem demora nem embaraços’. ANTT, *Ministério do Reino*, book 415, fls 23v–24.
- 75 ANTT, *Ministério do Reino*, book 415, fl. 24v.
- 76 ANTT, *Ministério do Reino*, book 415, fl. 25.
- 77 AML-AH, *Provimento da Saúde*, bundle no. 3, fls 29–32v
- 78 ANTT, *Ministério do Reino*, book 415, fl. 22v.
- 79 ‘... inteligência do seu conteúdo para dar conta das providências tomadas’. ANTT, *Ministério do Reino*, book 415, fl. 22v.
- 80 It was at the Board’s request that the prince regent ordered the Secretary of State for Foreign Affairs and War to supply the troops engaged in the cordon with tow in addition to their daily ration of bread, at the Royal Exchequer’s expense.
- 81 In this he stressed the criticism he had had to face from the commanders of foreign vessels.
- 82 For the measures mentioned here that were taken in November 1804 alone: AML-AH, *Provimento da Saúde*, cód. no. 28, fls 1–8v.; fl. 29; fls 78–95v.; fls 98–101v.; fls 104–109v.; fls 112–113v.; fls 116–117v.; fls 136–163v.; no. 29, fls 76–77v.; fls 96–97v.; fls 102–103v.; fls 124–133v.
- 83 ‘uma verídica notícia (...) do estado da saúde da cidade (de Lisboa)’. He enclosed fifteen copies of the measures he had taken and stated that ‘other highly extraordinary’ measures had also been adopted.
- 84 For the Barcelos section: AML-AH, *Provimento da Saúde*, file no. 10 of the papers for the province of Minho e Porto, fls 4–7v.
- 85 Probably based on the guidelines set out in the *Pest Contumaz Pate*, 1785.
- 86 ANTT, *Ministério do Reino*, book 415, fl. 26.
- 87 ‘Recapitulação da força total necessária para a organização de um Cordão de Tropas na fronteira desde o Tejo principiando em Montalvão, até ao Guadiana.’

- 88 'Instrução para os senhores comandantes das divisões que formam o cordão da raia.'
- 89 ANTT, *Ministério do Reino*, book 415, fl. 27.
- 90 '... serviria caso o contágio não chegue.'
- 91 On this topic, see A. Cliff and M. Smallman-Raynor, *Oxford Textbook of Infectious Disease Control: A Geographical Analysis from Medieval Quarantine to Global Eradication*, Oxford University Press, Oxford, 2013, 1–13.