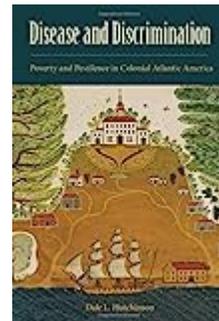


**Dale L. Hutchinson.** *Disease and Discrimination: Poverty and Pestilence in Colonial Atlantic America.* Gainesville: University Press of Florida, 2016. 304 pp. \$84.95 (cloth), ISBN 978-0-8130-6269-3.



**Reviewed by** Erica Charters (University of Oxford)

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**Commissioned by** David T. Benac (Western Michigan University)

Scholars and the general public have long been interested in the role of disease in early America. Influential works, such as Alfred Crosby's *The Columbian Exchange: Biological and Cultural Consequences of 1492* (1972) and Jared Diamond's *Guns, Germs, and Steel: The Fates of Human Societies* (1997), long ago laid out the crucial part disease played in shaping colonialism, and particularly European colonialism in America. In *Disease and Discrimination: Poverty and Pestilence in Colonial Atlantic America*, Dale L. Hutchinson dismantles narratives of disease that portray early America as a place in which all were equally susceptible to pathogens. He argues instead for the importance of context—social, political, economic, and ecological—in properly understanding the nature of disease. Building on recent scholarship (especially studies of indigenous societies) that challenges claims about the universality of pathological processes, Hutchinson aims to demonstrate that diseases are processes, not things, and they exist within an ecological and social context (p. xviii).

Hutchinson's narrative takes the reader through a selective overview of disease in coastal American colonies, ranging from the period of first contact between Europeans and native peoples through nineteenth-century urban environments that struggled with typhoid and

cholera. The organization is roughly thematic, rather than chronological, although the two often overlap. Part 1 provides general grounding on the interactions between behavior, ecology, and disease, noting for example how disease interacted with the evolution of sedentary, agriculture-based cities in ancient times, and explaining why models of so-called virgin populations—for such diseases as syphilis and tuberculosis—are flawed and simplistic. Part 2 focuses on the early colonial period, from the sixteenth through the eighteenth centuries. It examines the role of commercial and merchant networks, colonial warfare, and population displacement in modifying colonial environments; Hutchinson identifies how these environmental changes facilitated the transmission of smallpox, Lyme disease, and other health challenges. The final two sections provide selective overviews of the ways in which developments in plantation and urban life interacted with pathogens and health, reiterating Hutchinson's argument for contextual understandings of disease.

The claim that diseases are processes and not things, and thus that historical epidemiology is a complicated undertaking, is widely accepted among academic readers. This means that the book does not reveal much that will surprise informed readers. Within the scholarly com-

munity, few still advance mono-causal frameworks, or disregard ecological, social, economic, or cultural factors when examining public health. Although nineteenth-century developments in germ theory encouraged a view of universal rates of disease transmission, scholarship in both the sciences and the humanities has come to recognize the role of broad context (whether socioeconomic or ecological) since the mid-twentieth century. As Charles E. Rosenberg, one of the formative historians of medicine in America wrote more than fifty years ago in *The Cholera Years: The United States in 1832, 1849, and 1866*, "a disease is no absolute physical entity but a complex intellectual construct, an amalgam of biological state and social definition."<sup>[1]</sup> As a result, the strength of Hutchinson's book lies in its dismantling of simplified interpretations of disease. Hutchinson not only makes use of historical examples but also highlights the limitations of biomedical explanations—for example, of early twentieth-century interpretations of tuberculosis that linked its high incidence on Indian reservations to so-called virgin-soil vulnerability, rather than to socioeconomic conditions.

Likewise, Hutchinson's broad premise, that disease is shaped by multiple factors and thus best interpreted through multiple types of evidence, will be welcomed by all scholars of all disciplinary approaches. Hutchinson notes that it is his training as an anthropologist that encourages him to "see people's lives and the web of relationships in which they are situated from multiple perspectives, and those multiple perspectives require multiple sources of information" (p. 11). Yet this seems a missed opportunity to pin down how an anthropological approach differs from those of other disciplines, particularly history. For example, Hutchinson's ecological contextualization is much stronger than his sense of historical context, and historians will likely quibble with what can be awkward summaries of the complexities

and dynamism of early colonial society. Even the notion of "poverty," listed in the subtitle as a major factor, is not explored as a shifting historical concept. Likewise, schemas of pathogen transmission and timelines of epidemics will strike historians as treating disease as an event rather than a process. Different disciplines make use of disease and read its evidence in different ways, and more methodological awareness of such differences would have strengthened the book's claims.

In part, this can be explained by the book's intended readership. It appears to be aimed at US undergraduates, those who, Hutchinson notes, are "stunned" to learn about the 1918 influenza pandemic occurring even "here in America" (p. 182). Hutchinson's various snapshots of disease complexity are readable and instructive, and his schemas showing a pathogen transmission chain with numerous intervention points at which pathogens, vectors, and environmental factors may or may not interact certainly demonstrate the intricate nature of disease to undergraduate students. Yet given that Hutchinson provides snapshots, his overview is best used as a companion to those narratives he dissects and criticizes, rather than as a textbook that can replace them. The book's value to specialists is thus in pointing to a deep divide between popular and academic scholarship. Since scholars are well aware that disease is a process, but students still need to be taught why unsophisticated biology-centered models of disease are misleading, Hutchinson's book might serve as a clarion call for scholars to translate their academic work into readable and compelling popular narratives.

#### Note

[1]. Charles E. Rosenberg, *The Cholera Years: The United States in 1832, 1849, and 1866* (Chicago: University of Chicago Press, 1962), 5.

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