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The COVID-19 pandemic has forced all of us to think anew about the power of disease and public health in our lives. The pandemic has influenced the world of politics and government, and reshaped regional built environments to accommodate the threat of disease. Historians of medicine are familiar with how the response to disease reveals a particular society’s values and preferences—who it values and who can be disposed of. Achille Mbembe has called this “biopower”: who are considered worthy of protection and whose lives are considered expendable. Mbembe’s theory of “necropolitics” illuminates how certain groups are deemed unworthy of protection or subject to sanctioned violence and elimination from society. Protection includes access to pharmacies and health-care services, information, resources, people, and goods that can shape one’s life or lead to one’s death. This framing of biopower can help us understand how some people are expected to die for the good and convenience of others.

Disease is also, as environmental historian J R McNeill has written, about the power of non-human actors to shape our world, influencing wars, enslavement, and imperialism on a global scale. Although some historians argue McNeill’s claims of yellow fever being the third actor in the Haitian Revolution (1791–1804) are overstated, armies have always had to fight both human enemies and the animals that transmit disease.

Enter the Aedes aegypti mosquito, the insect vector that causes yellow fever and is the behind the scenes protagonist of Kathryn Olivarís’s book, Necropolis: Disease, Power, and Capitalism in the Cotton Kingdom. This book is prescient for the questions it provokes about our experiences of COVID-19. As Olivarís points out: “Two centuries ago, humans took advantage of epidemics in ways that caused misery, enriched the few, and increased inequality. Today, we have sadly seen many similar patterns unfold.”

Yellow Jack, as yellow fever was called, was intimately tied to the economic and political importance of cotton production in the American South and the rise of New Orleans as one of the most influential cities in the world by the 19th century. Yellow fever was known throughout the Atlantic World, with recurring outbreaks in Charleston, Philadelphia, and other US port cities. Pinpointing the mosquito as the culprit of yellow fever did not occur until the late 19th century. Before this discovery, yellow fever was thought to stem from contagion of an unknown origin or miasma emanating from degraded spaces. The 1793 yellow fever epidemic in Philadelphia was thought by some, including physician and signer of the US Declaration of Independence, Benjamin Rush, to originate from rotten coffee grounds left in the port. Olivarís describes how understanding the cause of yellow fever was a contested process in this period. She also explores the impacts of the unique response to yellow fever in New Orleans: “Elites in New Orleans insisted that this disease, like hurricanes or floods, was a problem with no solution. Profoundly uninterested in public health, politicians maintained that most tax revenue spent on quarantines, hospitals, garbage removal and sanitation was wasted...Instead, it was the individual’s personal duty to get acclimated.”

What separated New Orleans from other cities was the view that “acclimation” to yellow fever was necessary to become part of the ruling elite of the city—what Olivarís describes as “immunocapital”. Immunocapital is the “story of why so many unacclimated strangers died in nineteenth century New Orleans and how their collective deaths exacerbated inequality in an already violent and unequal slave society”, she writes.

Long known as the “stranger’s disease” due to misguided perceptions that only visitors and outsiders harboured yellow fever and brought it to New Orleans and other places, Olivarís takes a different approach in arguing that only the so-called acclimated were bestowed with vestiges of power in the form of local capital, networking opportunities, recognition from local credit houses and businesses, and status. In 19th-century New Orleans, only the acclimated were accepted by the power structure. To become acceptable, one had to stay in the city during the height of yellow fever season, become acclimated to prove your worth, or die trying.

Yet, as Olivarís argues, the story created of the acclimated and unacclimated reified pre-existing ideas of biological difference and slavery that were foundational to an unequal slave society. Acclimated white people, particularly the ruling elite and those striving for power, argued their biological superiority over enslaved Black people, free people of colour, and poor white people. Leaning on the work of scholars of race and slavery, Olivarís describes how the enslaved and free Black people were considered immune to yellow fever—a racialised
political argument specifically used to justify the continuation of slavery and subjugation of Black people. “Black people could possess immunity, but not immunocapital”, she writes. This view bolstered the inherent power structure of New Orleans that worked to keep Black slaves and free Black people in a position of perpetual forced labour and economic servitude. Olivarius highlights how Black people died from yellow fever yet the “system, simply, was already too entrenched to bend to the terrifying epidemiological reality”.

Each chapter begins with a short vignette of a person confronted with the threat of yellow fever. Olivarius’s style is novel-like in her ability to situate the reader along the notoriously stifling low-lying streets and damp levees precariously surrounding the city. The book takes you into the poor houses, hospitals, boarding houses, and homes of the elite and less privileged inhabitants as people stricken with yellow fever vomit, experience convulsions, and watch as their eyes and skin turn yellow. Others bled from the mouth and eyes, cursed out loud, and called out for help to ensure that the non-acclimated, free people of colour’s fearsome disease could spread across borders. Olivarius could have done more to examine these events to explore a yellow fever diaspora emanating from New Orleans. Understandably, however, she keeps her focus close to New Orleans, and in doing so offers insights about disease capitalism.

Necropolis shows how elite white people exploited disease in this uniquely unhealthy space for their own personal gain. The actions of New Orleans elites, and particularly their refusal to install quarantine protocols and formalise clean-up campaigns, had ramifications along the Mississippi River, and by consequence of their inaction, the broader Atlantic World through commerce. As people and goods moved in and out of New Orleans to other ports, the public health politics of allowing yellow fever to proliferate unchecked meant the disease could spread across borders. Olivarius has written a book that is a unique, stark, and powerful reminder of how the actions of New Orleans elites, and particularly their own personal gain. The actions of New Orleans elites, and particularly their refusal to install quarantine protocols and formalise clean-up campaigns, had ramifications along the Mississippi River, and by consequence of their inaction, the broader Atlantic World through commerce. As people and goods moved in and out of New Orleans to other ports, the public health politics of allowing yellow fever to proliferate unchecked meant the disease could spread across borders. Olivarius has written a book that is a unique, stark, and powerful reminder of how the actions of New Orleans elites, and particularly their own personal gain.

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There has been much instructive scholarship about the history of yellow fever recently, notably Rana A Hogarth’s Medicalizing Blackness: Making Racial Difference in the Atlantic World, 1780–1840 and Urmi Willoughby’s Yellow Fever, Race, and Ecology in Nineteenth Century New Orleans. Hogarth describes how supposed ideas of innate immunity among Black people during yellow fever epidemics of the 18th and 19th centuries circulated in print throughout the Atlantic World and used a purported biological proof to further buttress slavery. Willoughby’s work takes an environmental and ecological approach to yellow fever and the geographical place of New Orleans as a uniquely vulnerable landscape in the Atlantic World. Olivarius’s new perspectives on yellow fever, immunocapitalism, and the politics of acclimation are a powerful addition to this important body of scholarship that will influence a generation of scholars to come on the intersections of racism, slavery, and public health.

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Further reading
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