

## Book Review Forum

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**A Pest in the Land: New World Epidemics in a Global Perspective.** By Suzanne Alchon. (Albuquerque: University of New Mexico Press, 2003. ix + 214 pp., introduction, maps, figures, tables, appendix, epilogue, notes, bibliography, index. \$45.00 cloth, \$22.95 paper.)

Martha Few, *University of Arizona*

Suzanne Alchon's *A Pest in the Land* is an important work that pulls together key features of the literature on epidemics and their effects on native American population decline in the post-1492 New World. Taking a synthetic and analytic approach, Alchon wades into the long-standing historiographical debates over the demographics of, and explanations for, the horrific morbidity and mortality rates for native American peoples in the aftermath of European conquest. Alchon critiques the idea of "New World exceptionalism" regarding epidemic disease, the idea that smallpox, measles, and the bubonic plague had a more catastrophic effect on native American than Old World populations. The question that drives her analysis is why the outcome of the introduction of these diseases was so different.

To answer this question Alchon takes an interdisciplinary approach, placing post-1492 New World epidemics within the global history of epidemic disease. She argues that it was "the phenomenon of European colonialism as conceived and implemented by the four nations with the most extensive New World colonies, Spain, Portugal, France and England, that explains the delayed or failed recovery of indigenous American populations" (3).

The work is short, clearly written and organized, and would work well in undergraduate classes. I want to bring up two key points of her analysis to discuss further here. The first is her assertion of biological and cultural universality for responses to epidemic disease (8). While I agree with her

argument for biological universality in response to epidemics in terms of morbidity and mortality rates across populations and time periods, I find her arguments about cultural uniformity less persuasive. Scholars have long debated the demographics of epidemic disease in the Americas (detailed by Alchon in the appendix), and now future research needs to be undertaken to understand indigenous conceptions of health and illness and practices of healing in general, particularly in response to epidemic disease, both before and after 1492. It would also be important to consider how these conceptions and practices changed over time and interacted with European, African, and emerging colonial Latin American frameworks.

In addition, Alchon wishes to explain in particular why native American populations did not have the same demographic recovery patterns as Old World populations did from virgin soil epidemics. She makes the point that post-1492 native American populations did not experience one virgin soil epidemic at a time. Instead, the three key epidemics of smallpox, measles, and bubonic plague arrived simultaneously and continued to hit in waves, often two at a time, in the process slowing or preventing demographic recovery. Alchon argues, however, that in order to understand the recovery patterns of native American populations, scholars need to reconsider the role of violence as practiced by European colonial powers in the Americas, especially of warfare, slavery and other abusive labor practices, and forced and voluntary migrations.

This is an interesting argument, nicely outlined through the comparative framework that underpins the work. However, I am not sure if the two explanations for one effect—the lack of native American demographic recovery—can be separated out. In addition, more work needs to be done to concretely identify what was different about European colonialism as practiced in the fifteenth- and sixteenth-century Americas compared with previous colonial projects in other time periods and culture areas. A major strength of *A Pest in the Land* is that this work takes the debate surrounding epidemic disease out of the Americas and puts it into a global context. Future work might consider Alchon's argument in terms of what was new about the economic systems that underpinned European colonial expansion in the Americas, which took place within the context of incipient capitalism, a developing global market economy, and changing labor and production demands that this global market required.

W. George Lovell, *Queen's University, Canada*

Suzanne Austin Alchon's *A Pest in the Land* is a welcome addition to the now considerable literature on the epidemiological and demographic impact of the Old World on the New. One cannot help but admire Alchon's

resourcefulness in pulling together such an array of sources and distilling their contents. Her book will not only be read and appreciated by undergraduate students new to the subject, the targeted audience of the *Diálogos* Series of the University of New Mexico Press, but also consulted and referenced by researchers steeped in the complexities of a dynamic field of scholarship. While the former can expect to be guided through ongoing debates and controversies by a knowledgeable hand, the latter may wish to challenge the claim on the book's back cover that Alchon's "timely study effectively overturns the notion of New World exceptionalism." What is it that Alchon is saying that warrants such an assertion? Does she bring a unique point of view to a discussion of critical issues?

In the context of the inquiry at hand, Alchon's argument pertains to a need for measured consideration of Thomas Kuhn's celebrated notion of "paradigm shift." She states that "rather than European violence"—the thesis of the infamous Black Legend—"virgin soil epidemics of virulent diseases introduced from the Old World" have been singled out "during the past three decades" to account for "the rapid die-off of native Americans and the subsequent success of European colonialism" (5). Alchon contends that "because the role of epidemic disease was ignored for so long, during the past thirty years the pendulum has swung too far in that direction and scholars now overemphasize the long-term impact of disease and minimize the impact of other aspects of Europeans colonialism" (5). While some scholars may stress the disease factor to the near exclusion of other key elements, many do not. Decidedly nonepidemiological factors—levels of native cultural development, differing imperial ideologies and institutions, policies of displacement and resettlement, systems of forced labor—continue to be addressed by a host of noted specialists, among them Linda A. Newson, Noble David Cook, and Massimo Livi Bacci, to name but three. Alchon's point is well intended, and in certain cases valid, but overstated.

So, too, is her insistence that "the indigenous populations of the Americas suffered mortality rates similar to those experienced by Old World populations" and that they "responded to the challenges posed by epidemic disease in a similar fashion" (123). Establishing global common ground is all very well, but the crux of the matter, as Alchon herself recognizes, is that depopulation rates in the New World must have been uncommonly precipitous because native peoples, especially in the sixteenth century, were not exposed to single, sporadic outbreaks but rather to successive, often compound or multiple, epidemic waves. Again the claim on the back cover that "native Americans were not uniquely affected by European diseases" is excessive and in truth does no justice to Alchon's much more nuanced presentations.

Questions of emphasis aside, Alchon's survey is impressively executed,

particularly her discussion of Amerindians and disease before 1492 (chapter 2), her unified treatment of colonialism and disease in Brazil and North America (chapter 4), and her synthesis of the demographic debate, a very useful appendix that assembles and comments on the varying estimates of native American population size at contact. A score or so each of well-chosen illustrations and tables complement Alchon's text. An artistic if harrowing cover, which features John White's "Indian Charnel House" (1585), is the work of Melissa Tandysh, whose design for the book is an elegant model other university presses could emulate. Author and publisher—if not the flighty publicist or marketing guru responsible for the back cover sales pitch—are to be congratulated on producing a book that will reach, and be engaged by, a diverse readership.

David Sowell, *Juniata College*

*A Pest in the Land* "challenges the widely held notion of New World exceptionalism, [that is] the belief that the experiences of native Americans with newly introduced diseases were more disastrous than those of Old World populations" (2). Alchon asserts that "mortality owing to virgin soil epidemics . . . was no higher in the Americas than it had been in Europe, Asia, and Africa" (3). The demographic recovery in the Americas, however, was uniquely compromised by the structures of European colonialism, so that both the Black Legend and virgin soil epidemics must be considered in explaining the early demographic history of the Americas (5). Alchon structures her argument in five chapters and offers an appendix on the demographic debate in the Americas. A survey of virgin soil epidemics in the Old World precedes three chapters on epidemic disease in the Americas both before and after conquest. The fifth chapter links colonialism and epidemic disease.

The author makes a convincing argument that virgin soil epidemics in the Old World could result in population losses of up to 90 percent, though more frequently between 25 and 50 percent, of a population. One might, however, question the reliability of the widely varied sources used in illustrating the mortality of these epidemics, or the assertion that not until the fifteenth century did pathogenic contact create a "unified disease environment" in this region. Her own argument seemingly supports the case for a largely shared pathogenic environment throughout the Old World at least one thousand years earlier.

Alchon surveys the well-known disease environment of the Americas before and after conquest. In identifying pre-conquest disease patterns, she correctly observes that the region was hardly disease free, noting that

the “most significant” difference between the Old and New Worlds was the “absence of three specific crowd-type diseases: smallpox, measles, and bubonic plague” (39). Her arguments that “typhus and influenza may have been universal among agricultural populations” (59) are not persuasive and, when combined with the absence of other epidemic diseases, imply that contact opened the Americas to an unparalleled pathogenic onslaught. The author’s rapid overview of the epidemics that swept the region after the 1510s concludes that despite several similarities, the greatest difference between Old and New World virgin soil epidemics was the demographic impact of “repeated outbreaks” of several pathogens on indigenous peoples. This is hardly a new assertion and is the prime explanation for the demographic catastrophe of the sixteenth century.

The potential innovation of Alchon’s argument—that the nature of colonialism in the Americas exacerbated the impact of epidemic disease—is undermined by the failure to link specific epidemic outbreaks to specific colonial practices so that demographic decline can be traced in juxtaposition to pathogenic and colonial process. She seeks to examine a fascinating relationship but fails to offer the close analysis that might convince the reader that something akin to the Black Legend merits reconsideration. For now, William McNeill’s *Plagues and Peoples*, Alfred Crosby’s *The Columbian Exchange*, and J. N. Hays’s *The Burdens of Disease* remain the preferred global perspectives on New World epidemics.