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BOOK REVIEW

Quarantine travelogue

R SRIVATSAN

Geoff Manaugh and Nicola Twilley. *Until Proven Safe: The Gripping History of Quarantine, from the Black Death to the Post-Covid Future.* 2021. Hampshire, Pan Macmillan. 418 pgs, Rs 856 (paperback), 280.39 (Kindle), ISBN: 9781760988609.

Until Proven Safe is a pleasurable account of two authors as “quarantine tourists”. This is a term the authors actually use to describe John Howard, an eighteenth-century British prison reform advocate who travelled the breadth of England, Europe (including Russia), up to the city of Constantinople (present day Istanbul) and Greece, visiting prisons (pgs 41-79). The somewhat eccentric millionaire Howard made this journey to study best practices of imprisonment in his time in order to advocate reforms in British prisons. During his travels, he noticed that several European nations maintained a network of *lazarettos* (initially designed as institutions to hold leprosy patients in the fourteenth century) to isolate traders from North Africa and the Middle East who were seen as carriers of disease to Europe. Howard’s severely critical account of quarantine practices remains, on the account of our authors, legendary to this day.

The authors retrace Howard’s path in the twenty-first century through the same towns and cities talking to local experts, archaeologists and historians. This book began its journey perhaps about a decade before the Covid-19 pandemic, and what started as a fun travelogue with an arguably limited readership of “realist thrillers”, was catapulted to bestseller status by this global crisis.

The book traverses a great deal of historical territory — an intriguing chapter being on postmarks on mail (pgs 80-115). Whenever a letter originated in a “suspect” location (a *lazaretto*, or an African country) it was opened, examined, fumigated, perfumed, and stamped before being sent onward to its destination — the collection of such postmarked letters is an arcane hobby today.

The architecture of quarantine institutions is also explored in the book — spanning the medieval *lazarettos* and the contemporary *fangcang* hospitals (temporary isolation hospitals for Covid-19) in Wuhan city and Hubei province (pgs 153-192).

As the book meanders into our contemporary period, the chapter on present-day quarantine against Ebola discusses the extraordinary prejudice exhibited by the police, the neighbours and even elected officials against doctors and nurses who returned to the US after working with these patients in Africa (pgs 116-122). Historical instances of marking off these “suspects” (the use of the term shows an ominous collapse in public thinking equating sickness and criminality), isolating them, discriminating against them, even boycotting them, show that such inhumanity toward those even suspected of having a fatal disease is a persistent trace of shameful human conduct through the centuries.

Intertwined with the history of quarantine is a colonial epistemology which arises in the tension between

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exploitation of labour, wealth, and global trade on the one hand, and the prevention of diseases (and the individuals who putatively carry them) that originate outside Europe, the US and Australia (pgs 123-154). [Stray thoughts: One remembers the frantic fumigation of planes that arrive in Australian cities out of India! [1] One also remembers the decimation of Native Americans by diseases brought by the European settlers after 1492 [2], historically after the legendary *lazaretto* system was put in place].

We should not rest too happily with the notion that Indians are free from a malignant quarantining imagination. We have an ancient history of its practice showing up in the *dalitwad*s that dot every single village, town and city in India, which permits labourers to come in but prevents them from living in or sharing the privilege of dominant caste space. Indeed, as the *Annihilation of Caste* noted, during the Peshwa regime, the untouchable had to hang a pot from his neck so that his spit would not pollute the ground, and a broom tied to his waist so that the pollution of his footsteps was swept away [3]. Further, such examples of cultural filtration and exclusion mark the hate crimes and lynching of Muslim men who marry Hindu women and of Dalit men who marry above their caste.

This term “quarantine tourism” quite precisely describes Manaugh and Twilley’s journey through the history and geography of quarantine. They are aware that this term applies to them, as they use it to describe tourists like themselves who visit the Waste Isolation Pilot Plant’s subterranean tunnels in New Mexico built to quarantine all transuranic radioactive wastes for eternity (pgs 244-269). The authors describe with some awe the incomprehensible and sometimes simply fantastic logic of risk and consequence in the statistical estimation of possible disasters that go into these multimillion-dollar projects. The aim is to ensure that nuclear wastes are never accessible to the public. One such design conundrum is the need for such projects to find ways to warn people off these sites several tens of thousands of years in the future. What would a useful signpost design for such timescales be, given that our knowledge of stone inscription and mythological memory in our histories barely go back 7000 years?

On the other hand, how does one quarantine space travel? One chapter discusses how bringing back alien life forms is as risky as taking earthborn disease to other planets ethically irresponsible (pgs 270-308). There are conversations recorded in the book with the “Director of the Universe” a tongue-in-cheek NASA title given to Catherine Conley who was responsible to ensure outward contamination by earthlings is minimised. This officious title was later downgraded (by NASA) to a slightly less hubristic “Planetary Protection Officer”!

There is a useful chapter that shows how modern quarantining practices are shaped with surgical precision using big data (pgs 309-338). Groundbreaking research uses such data to plot precise travel routes and times to be focused

on, to attenuate the expected spread of disease.

The book is written with a verve and skill that are now markers of a new kind of popular history (and geography) writing that establish the successes of stellar authors like Jared Diamond, William Dalrymple, and Isabel Wilkerson. The prodigious strength of such writing is an attention to detail, quality of narration and the sheer ability to transport us to the presence of the (spatially and temporally) distant scenes being described. It is these strengths that make them bestsellers with books over 400 pages long in our era of trivial Tweets and Instagram inanity.

But there is a downside.

A travelogue, while being a proven genre for bestsellers (I remember Robert Pirsig’s *Zen and the Art of Motorcycle Maintenance* and Bruce Chatwin’s *The Songlines*), is hardly suited to systematic and conceptual elaboration. Of course, Manaugh and Twilley do not have such a study as their goal, so it would be unfair to accuse them of failing to achieve it. And yet, it is a missed opportunity! To be fair, it is also rare that a philosophical or strongly conceptual text could also be a bestseller (*Being and Nothingness* by Jean-Paul Sartre and *Discipline and Punish* by Michel Foucault being two examples).

The authors mention *Discipline and Punish* briefly in the penultimate chapter as making an oracular statement about civilisation’s propensity to establish more and more oppressive, surveillant and totalitarian quarantining procedures. Their superficial take is a pity because Foucault himself shows quarantine to be a historical development from the exclusionary practices that preceded it [4]. His work on medicine also suggests that with the development of modern medicine the requirement of quarantine goes down — but he was writing in the 1970s and died in 1984. With the possibility of more pandemics rearing their ugly heads after his time and indeed the Covid-19 pandemic, medicine’s arrogance has been taken down a notch — as known methods, diagnoses, and treatments failed, it was back to the basics — and quarantines were the first line of defence across the world. What is the structure of this new turn of an age-old practice? The historian Philip Sarasin in “Understanding the Corona Pandemic with Foucault?” goes some way into exploring the consequences of this cohabitation of age-old and modern medical practice [5].

Foucault’s historical thinking went beyond his conceptualisation and exploration of the simple oppressiveness of disciplinary practices by rulers to his study of the emergence of a form of government that is not only oppressive but is also interested in the care and well-being of the ruled. What emerged as a mirror image of this transformation was a population that was somewhat glad to be governed, seeking a measure of security in their unpredictable, precarious lives. Our modern political experience is structured in the force field between these poles of hated oppression and needed protection. In his

Collège de France Lectures *Security, Territory, Population*, Foucault described this double emergence of the power of government and the desire to be governed by the term *governmentality* [6]. This transformation in the mode of political life must be understood in order to map the developmental trajectory of the concept of quarantine in the twenty-first century. The pages of *Until Proven Safe* are peppered with instances of the tension between being oppressed and needing security, and insights regarding the conceptual transformation of quarantine. But a travelogue provides little purchase to bind them together as a conceptualisation of new forms of governmental rationality, medical strategy and healthcare practice. So, a bestselling travelogue it remains, with an epilogue containing homilies about the need for the public to understand the benign and necessary aspects of quarantine.

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BOOK REVIEW

Tuberculosis: Finally, out of the shadows.

SANDHYA SRINIVASAN

Vidya Krishnan. *Phantom Plague: how tuberculosis shaped history*. New York, Public Affairs, Hatchette Book Group, 2022. 320 pages, Rs 1708 (hardcover), ISBN-13: 978-1541768468

Tuberculosis is a hidden disease. It is under-diagnosed, under-counted, stigmatised, largely a poor person's illness, and therefore not of much interest to the media. India has the burden of tuberculosis (TB) cases and deaths in the world with 26% of new cases and 34% of deaths in 2020 [1]. Yet, most of us are more likely to know someone with diabetes, heart disease, or cancer than a friend or acquaintance who has undergone treatment for tuberculosis.

Vidya Krishnan's *Phantom Plague* aims to take tuberculosis out of the shadows, as well as to lay bare the edifice of inequities behind this killer. While the subhead is "how tuberculosis

shaped history", the book is actually about how the history of TB — as is the history of all disease — shaped by structural injustices in society that put some groups at greater risk of disease, and less likely to get treatment. The author writes an impassioned account of how class, caste and race violence and other marginalisation, in society and in medicine, have come together to create this crisis. The book is based on extensive secondary research supported by interviews with researchers, medical professionals, public health practitioners and patient advocates. It is addressed to a general readership.

Krishnan starts in nineteenth century Europe when diseases were ascribed to miasmas and magic, and TB was a "phantom plague". The first few chapters take us through the intersecting lives of the men whose discoveries led to the understanding that certain diseases are caused by germs, and developed the tools to fight them — public health measures to reduce the risk of transmission, and drug therapies.

The next section looks at the conditions that drive the TB epidemic in India. Krishnan starts in Mumbai, with the findings of a study on an outbreak of drug-resistant (DR) TB in a government slum rehabilitation scheme. The city's brutal housing policy, by which the poor are forced into airless, lightless high-rise slums so that land can be freed up for more luxury buildings, has become a recipe for such outbreaks. Caste-based segregation forces Dalits to ghettos within ghettos, increasing already high risks of disease.

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