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LANDSCAPES OF HEALING AND SUPERBODIES OF KNOWLEDGE: RACE, MEDICINE AND STOLEN CURES IN THE COLONIAL WEST INDIES

Carson Eckhard

In 1673, a young English physician named Thomas Trapham Jr. boarded a ship named *The Portland* and made the grueling journey from Britain to Jamaica, intent on securing his fortune as a planter.¹ The son of a noted British surgeon, Trapham quickly gained a reputation as a skilled physician, renowned across the island as “one who understood the country’s diseases.”² Trapham’s supposed expertise in this area garnered him a considerable level of social status, and he served the British gentility, including Jamaica’s governor, Lord Vaughn, with “tropical remedies” throughout the late 17th century.³ The actual success of Trapham’s practice in Jamaica was mediocre at best; in 1688, Trapham was even briefly held under suspicion that his negligence had caused the death of the colonial governor, and he “made no great discoveries” throughout his career in England Jamaica.⁴ Nevertheless, the physician published the first British book on tropical medicine, entitled, “*Discourse of the State of Health in the Island of Jamaica*” in 1679.⁵ Trapham’s treatise was widely read by physicians in the West Indies and in Europe, who were eager to learn about the Caribbean world and its “peculiar” climate.

In addition to being the first British book on tropical medicine, *Discourse of the State of Health* also holds the dubious distinction of being the first published work to detail both race-based determinants of health in the Atlantic world and Indigenous and African cures. The publication of Trapham’s work thus represented a new era in healing and

medical practice: the simultaneous development of medicinal biocolonialism in the New World, and the rise of “scientific” observations about biological racial difference and their implications on health.⁶ This paper examines the apparent juxtaposition between white physicians’ reliance on African and Indigenous cures and the concurrent development of a white supremacist sociopolitical structure that rendered non-white social, religious and scientific practices inferior to those of European colonizers, tracing the relationship between the appropriation of healing techniques and European hegemony in the British West Indies between 1670 and 1820. Moreover, dismantling the practice of medicinal biocolonialism in the slave societies of the US South and Caribbean demands the re-centering of Black voices within the global narrative of medical modernity and reassessing the history of medical “progress” in the Americas accordingly. Consequently, this paper sets Black and Indigenous people at the epicenter of “healing landscapes” within Atlantic and Antebellum societies while assessing the rise of what historian Deidre Cooper Owens terms the “medical superbody,” which refers to the way in which white physicians viewed enslaved and Irish-immigrant women as simultaneously inherently inferior to white women but superior in their ability to undergo medical procedures and experiments.⁷ Throughout, I argue that the notion of the “medical superbody” can be applied not only to the Black body, but also to Black medical ontologies.

The field of Atlantic medical history has grown considerably in the last decade as scholars have sought to complicate Eurocentric conceptions of medical history. Increasingly, historians have begun to examine the healing practices of Black and Indigenous people throughout the New World, departing from earlier works in the field that largely presented African medicine as both secondary and insular to European medical practices. While 20th century historians such as Richard Sheridan (*Doctors and Slaves*, 1985)

generally focused on the rise and transmission of specific pathologies and the subsequent responses or experiments at the hands of white physicians, scholars in recent years have sought to complicate the notion that Afro-Indigenous and European cures and practices existed in a cultural binary, with European medicine prevailing over African and indigenous practices. Most notably, Pablo F. Gomez's *The Experimental Caribbean* (2017) and Londa Schiebinger's *Secret Cures of Slaves* (2017) have sought to highlight the healing practices of free and enslaved Caribbean people while examining the exchange of culture and ideas that occurred in the years after European powers began colonizing the Americas.

However, at this time, few works have focused on the juxtaposition between the appropriation of Black medical techniques and the construction of racial difference and race-based medical experimentation. Like Gomez's work, Rana A. Hogarth's 2017 book, *Medicalizing Blackness*, which assesses medicine as a key factor in the formation of race in the Atlantic world, provides a groundbreaking framework through which to consider the simultaneous development of race and modern medicine.⁸ Similarly, Deirdre Cooper Owens' *Medical Bondage* examines the creation of the "medical superbody," while analyzing the ways in which enslaved nurses and midwives contributed to the medicinal climate of 19th century Alabama.⁹ These works present the formation of race and medical practices as irrevocably intertwined within the landscape of the Atlantic World; building upon this framework, this paper examines the ways in which free and enslaved Black people used healing practices as forms of power and resistance.

The onset of colonization represented a collision of theories and practices of healing. Writes Londa Schiebinger, "Multidirectional trade in people, disease, plants and knowledges between Europe, Africa and the Americas sped along these interconnected nexuses to create the Atlantic world

medical complex.”¹⁰ Prior to the rise of the trans-Atlantic slave trade in the early 17th century, Europeans and Africans had developed distinct ontologies of medicine and healing. For European physicians, medical science was an emerging field that traced its general tenets to Hippocrates and, to a lesser extent, Aristotle.¹¹ By the time Trapham had published *Discourse*, medicine in Europe was considered a scientific and largely professional field, and medical practices were generally entirely dissociated from religious or ritual practices.¹² Contrarily, healing practices in West Africa were tied closely to ritual and spiritual practices, and ceremony. Spirituality and cures were practically and socially intertwined within the healing landscape, described by one colonial physician as an “intimate union of medicine and magic.”¹³ Where Europeans sought to define medicine as a means of exerting control over naturally-occurring pathologies, ritual practitioners in Africa practiced healing techniques as a key aspect of communing with the natural and spiritual worlds.

As colonizers found themselves in an unfamiliar and often hostile climate, they often relied on the medical traditions of Indigenous people and enslaved Africans to acquire cures to the tropical diseases of the Caribbean. Despite this phenomenon, the archival record of the “Atlantic world medical complex,” is, unsurprisingly, dominated by enslavers and physicians whose social and economic successes were predicated upon the creation and maintenance of a rigid white supremacist racial hierarchy. In the Caribbean, ideas about race-based determinants of health gained prominence as colonizers sought both to adjust to the tropical climes and develop, and later preserve, a system of chattel slavery.¹⁴ Doing so required colonizers to protect and heal themselves from tropical diseases while nevertheless creating a hierarchy of knowledge production that rendered nascent European empiricism superior to other modes of knowledge production and practice.

By the mid-18th century, European planters and physicians had begun to shape the healing landscape of the Caribbean to reinforce Euro-normative standards of medicine. Perhaps most notably, the publication of local medical journals and treatises, such as Trapham's book and the *Jamaica Physical Journal* sought to portray the production of scientific knowledge in the Caribbean as identical to that of Europe in process and in presentation, while colonial physicians routinely submitted papers to British medical journals, often presenting traditional Afro-indigenous healing practices as "new" cures for tropical maladies. Even as white physicians relied on the knowledge of Black people for cures, the routine erasure of Black people and their voices from accounts that described the effectiveness of their healing practices allowed colonizers to simultaneously appropriate these practices while aligning them with European scientific frameworks.

While European physicians occasionally referenced Black populations with the use of certain remedies, very rarely did white doctors credit Black healers with the origination of the cures that originated in their communities and kept the tropical diseases at bay. In their publications, some authors cited God as the source of their cures, preferring to root their medical successes in Christianity rather than cite Indigenous healers. Thomas Trapham said of the cure for "dropsie" that the cure could be found in nature thanks to the "overflowing bounty of the great healer of us all, who hath given a balm for every Sore."¹⁵ In fact, Trapham's cure comprised an ointment of a plant native to the tropics, which he referred to as "juicy Cane... generally called the dumb Cane."¹⁶ While Trapham's contemporary, Sir Hans Sloane, a fellow physician in Jamaica who also treated the Governor, noted that the plant was regularly used by Indigenous people, Trapham himself made no mention of this, instead describing the cure within the confines of European medical language and suggesting that he arrived at his medical breakthrough as a result of divine

favor.¹⁷ Trapham's subtle incorporation of Christianity into his description of cures thus implied that the "dropsie" antidote was the result of God's own desire for the English to overcome the maladies that challenged their domination of the West Indies.

By the late seventeenth century, British hegemony was indisputably established in the West Indies, and the medicine firmly established as a scientific field, rendering references to Christianity in reference to healing practices all but obsolete.¹⁸ Medical literature from the British Indies shifted. Physicians rarely alluded to cures as conquests or manifestations of God's will, instead framing healing as a matter of plantation management and publishing extensively on scientific theories of racial difference to uphold the legitimacy of the colonial slave society. When publishing in journals, English physicians sometimes noted that a practice was common among enslaved or indigenous people before describing their own use of the specific cure, as James Maxwell, a prominent Jamaican physician did in his May 1835 article on the "Accidental Poisoning of Three Negroes by Catharides," first published in the *Jamaica Physical Journal*.¹⁹ Describing how he cured three enslaved men of an accidental poisoning, Maxwell briefly mentions that the antidote, which he terms *feuiella cordifolia*, was "a favorite among negroes for all such accidents... [it] acted as a power emetic."²⁰ However, Maxwell provides no additional information on the origin of the cure, or how he came to learn of its effectiveness.

Maxwell's *feuiella cordifolia* was most likely a plant commonly called javillo, indigenous to South and Central America; indigenous people throughout the region had long used it for its laxative properties to treat poisonings and parasites.²¹ In the same article, Maxwell proceeds to describe how he gave his patients a copious "mucilaginous infusion of ochro," or okra, to protect their stomach lining from the corrosive effects of the poison; this appears to be a technique

likely appropriated from enslaved Africans, as okra was, and continues to be, used in trado-medicinal practices in West Africa.²² Despite his engagement with Afro-indigenous medicinal techniques, Maxwell does not expressly explain where he learned such practices. His presentation of the cure is “westernized,” the cure stripped entirely of any ritualistic or spiritual connotations and practices. By publishing his use of these practices in a Jamaica-based journal that adhered to the European conventions of medicine, Maxwell appropriates the uses of javillo and okra by presenting the cures in a way that conforms to the European medical establishment. In this way, Maxwell simultaneously relies on the knowledge of Afro-Indigenous people while erasing them and their system of ritual-based medicine, thus resulting in the dispossession of their traditional healing practices.

In contrast to his sparse acknowledgement of “negro medicine,” Maxwell devotes a substantial portion of his piece to discussing the criminal events which led to the accidental poisoning. According to the physician, three enslaved men stole liquor from the overseer’s house on the Fort Stewart Estate. Unbeknownst to them, the liquor had been infused with cantharides to “apply to the ring-bone of the horse.” Maxwell describes in great detail the theft of the bottle and the gathering that took place as the three men consumed the alcohol. Maxwell’s emphasis on the theft illustrates the extent to which physicians shaped perceptions of race and character within the local and global scientific communities by foregrounding Black criminality within the scientific context of the *Jamaica Physical Journal*. Maxwell’s focus on the character of his Black patients demonstrates the ways in which physicians concurrently relied on Black medical practices while negatively characterizing Black people, even as they knowingly appropriated their knowledge.

Maxwell’s concurrent praise of African healing practices and criticism of Black people’s character fits into a larg-

er tradition of biocolonialism in the West Indies. More than 150 years prior to Maxwell's publications in the *Jamaica Physical Journal*, Thomas Trapham praised African healing practices while attempting to characterize Africans in Jamaica as drunkards: writing "as for the Negroes, though their lodgings be neer the ground, they force off the moisture of the Earth by their constant fires, and thereby become healthy, moreover I cannot but mention a necessary restraint on the profuse drinking of the Rum..."²³ Trapham continues to encourage slaveholders to heavily monitor drinking on the plantation, and later in the work, he declares, "hence the Black may well become naturally slaves."²⁴ Yet, even as Trapham reinforces white supremacy by suggesting a "natural" racial hierarchy that justifies the enslavement of Black people, he proceeds to provide a cure for Yaws that relies on African healing plants and techniques:²⁵

Hence the Black may well become naturally Slaves, and the vast Territories of the Indians be easily invaded and kept in subjection by inconsiderable force of the Spanish Tyranny. And even those Conquerours through mixture with these animal People, reap their infirmity of Body and Mind, and now lay them open to a newer and more hopeful conquest; of which it's no place for me to treat saving lightly to point at Natures disposition thereto and to warn the intending Conquerours to escape the same degenerating Pit of naturally necessary destruction. But forasmuch as it is too late for our present afflicted to prevent an incumbent evil, I must needs administer some relief to the Yaws ere we proceed further: and here to be more regular I advise the cleansing of the first ways as to Stomach, Guts, &c. by a Vomit either of infusion... our Physick Nuts from five to nine, the next day six ordinary Pills of our native Aloes, to carry off the remainder (if any) of the Vomit or moved humours.

By closely connecting the notion of a natural and biological racial hierarchy with tropical diseases and their cures, Trapham engages in the creation of "black medical superbodies" of knowledge as he simultaneously describes and westernizes a traditionally Black cure while labeling the people who cre-

ated the knowledge on which he relies as naturally inferior. In doing so, Trapham defined the burgeoning, white supremacist racial climate of colonial Jamaica while appropriating the healing practices of the island's subjugated populations. Through this appropriation, Trapham and his fellow colonial physicians effectively diminished the social and intellectual currency of African and Amerindian healers and medicinal practitioners within the healing landscape. Limiting the social and scientific currency of non-Western healing practices when not propagated or enacted by European physicians proved to be a key tactic in solidifying the often-ambiguous power structures of the early West Indies. More than a century after Trapham's publication, Dr. James Thomson similarly discredited Black healing practices while nevertheless noting their effectiveness. In his book, *A Treatise on the Diseases of the Negroes*, Thomson noted that African healing techniques "exert the most serious influence in our success in relieving their disorders," but debased the practice, declaring that "(enslaved Africans) involve their proceedings in a cloud of mystery, which never fails to bring with it the worship of the vulgar.... so completely has the idea of witchcraft gained a supremacy ill their minds, that he, who would attempt to destroy it by reasoning with them, would idly misapply the purpose of that noble faculty."²⁶ Given that "the final currency of these spaces was experimentally evident power over nature and bodies," the publication of Afro-Indigenous cures alongside theories of biologically-based racial difference and Black inferiority considerably impacted the dispossession of African and indigenous cures within the increasingly Eurocentric global public sphere.

By regularly omitting the actions and voices of Afro-indigenous people from records that examined their cures, European physicians benefitted from their healing processes while limiting the possibility that non-Western cures could be

interpreted as superior to European medicine and empiricism. This juxtaposition between the dependence of colonizers on Afro-indigenous cures for survival in the sugar colonies and their ardent efforts to westernize these techniques speaks to the pivotal role that the appropriation of healing played in the erasure of Black and Brown people as agents of medical and scientific progress in colonial slave societies. The few exceptions to this erasure within the archive provide a glimpse of the immensely important roles that Black and indigenous people played in shaping and creating healing knowledge and producing experimental cures. These “exceptions,” wherein white physicians acknowledged the importance of Black or indigenous healers, were typically private, admissions of a cure’s true source were often included in personal documents, letters or diaries, not medical journals. An April 21, 1773 letter from a planter in Grenada, A.J. Alexander, to Joseph Black, a professor at Edinburgh, detailed how a “Negro Dr.” had proved his technique superior to Alexander’s European approach to healing yaws.²⁷ In his letter, Alexander described how, after he returned to his plantation to find 32 enslaved people infected with yaws, he “sought out a Negro who understood the Method of treatment in his own country,” and agreed to “let him have his Way” with two of the afflicted.²⁸ Interested in observing how the unnamed enslaved doctor’s native cure fared in relation to the European “scientific cure,” Alexander had his white surgeon treat four infected people with a commonly-used European cure. The Black doctor “sweated his patients powerfully,” gave them “two decoctions of woods that Alexander identified as bois royale and bois fer,” and “applied an ointment of rust and lime juice” to their infections.²⁹ The enslaved doctor’s experiment proved far more successful than that of the European surgeon: the “Negro Dr.’s” patients were cured within two weeks, and the physician’s patients were not. Schiebinger notes that Alexan-

der responded to the Black doctor's success by "putting him in charge of all yaws patients in his plantation hospital."³⁰ Alexander's explicit acknowledgement of the enslaved doctor's superior "Negro Materia Medica" is rare, yet, despite the doctor's superior results, Alexander did not publicize the experiment and its outcomes outside of his letter to Professor Black. Although the doctor who successfully cured yaws on Alexander's plantation remains nameless, the experiment illustrates the considerable degree to which Black healers functioned as vital sources of healing within the plantation landscape, and provides an important example of the ways in which white doctors and planters relied upon Black healing practices and knowledge to preserve the health of their plantations.³¹

However, recorded instances in which enslaved doctors and indigenous healers provided treatment where European doctors proved ineffective are rare, and usually predicated on European control over the healers in question. Just as A.J Alexander was able to obtain a cure for yaws through his ownership of a "Negro Dr.," other instances in which colonizers explain that a cure was directly derived from a specific healer generally coincide with conditions of enslavement and European subjugation. Several authors, describing the West Indies, detailed how colonizers occasionally used torture to gain knowledge of Amerindian cures. In his 1774 work, *The History of Jamaica: Or, General Survey of the Antient and Modern State of That Island: with Reflections On Its Situations, Settlements, Inhabitants, Climate, Products, Commerce, Laws, and Government*, Edward Long describes how the British learned of arrowroot's healing powers through the abuse of an Indigenous healer:³²

An Indian, being taken prisoner after he had wounded an European with a poisoned arrow, was put to the torture till he promised to cure him, and performed it effectually with (arrowroot), applying it bruised in form of a poultice, and giving the juice inwardly.

Although Long provides an exact origin of the cure in question, he does so within a context of white supremacy and European domination. While he grants credit to the Indigenous person who provides the colonizers with proof of arrowroot's benefits, he proudly describes how the British colonizers had first captured and tortured the man in order to obtain the cure. The focal point of Long's story thus shifts the reader's attention away from the ingenuity of the captive healer and towards the colonizer, rendering medical knowledge the spoils of war. By publishing this account in his book, Long both provides information on a cure that may be useful to his readers and regales them with a story of white supremacist victory over Indigenous people, presenting the cure in a Western context, citing the cure's source only to illustrate British triumph over both the foreign poison and the Indigenous people of Jamaica. In this way, Long simultaneously appropriates the cure and reinforces anti-Indigenous attitudes, even as he cites the cure's specific origin.

Accounts such as Long's and Alexander's raise important questions about the history of medicine within a global context. Likewise, the overwhelming archival silence on the identities, lives, and ritual practices of Black and indigenous healers demands further examination, as their cures persisted even as they themselves were enslaved, slaughtered, and largely erased from the records of medical history and progress. As European colonizers struggled to survive in their newfound colonies, they regularly depended on the knowledge and practices of indigenous and enslaved people for the cures necessary for their survival. However, even as they appropriated the trado-medicinal practices of African slaves and indigenous people, they sought to promote white supremacy, often predicated on notions of biological racial difference. The publications of doctors from the West Indies during this time period constitutes the creation of a "medical superbod-

of knowledge,” wherein white doctors appropriated traditional African and Amerindian cures while concurrently erasing these healers and their traditions from the historical and medical record, “westernizing” their cures while constructing a white supremacist sociopolitical framework. As we consider medical history in the Atlantic world, it is essential that we look beyond the archive, and strive to see those whose voices are largely absent from the record, even as their cures underscore the basis of “modern” tropical medicine that first developed in the British Caribbean during the colonial era.

Notes

¹ “Lieutenant Governor Thomas Lynch to Dr. Benj. Woisley,” August 12, 1673 Calendar of State Papers, Colonial Series, American and the West Indies, 1669-1674, art 1130. https://archive.org/stream/calendarofstatep-1674grea/calendarofstatep1674grea_djvu.txt

² “Sloane, H, Accessed via Ashcroft, M. T. “Tercentenary Of The First English Book On Tropical Medicine, By Thomas Trapham Of Jamaica.” *The British Medical Journal* 2, no. 6188 (1979): 475-77. Accessed April 24, 2020. www.jstor.org/stable/25433681

³ Ashcroft, p. 476.

⁴ *Ibid*, 476-477.

⁵ Trapham, Thomas, *A Discourse of the State of Health In the Island of Jamaica: With a Provision Therefore Calculated From the Air, the Place, and the Water, the Customs and Manner of Living &c..* London: Printed for R. Boulter. 1679. Full text accessed via <https://quod.lib.umich.edu/e/eebo2/B30836.0001.001/1:5?rgn=div1;view=fulltext>.

⁶ “Biocolonialism extends the reach of the colonial process into the biomes and knowledge systems of Indigenous peoples in the search for marketable genetic resources and traditional knowledge,” see Harry, Debra. 2011. “Biocolonialism and Indigenous Knowledge in United Nations Discourse.”

⁷ Originally outlined in Owen’s paper “Creating Health on the Superbody: Enslaved and Irish-Immigrant Women and Antebellum-Era Modern American Gynecology” (2009).

⁸ Hogarth, Rana A. “Introduction,” *Medicalizing Blackness: Making Racial Difference In the Atlantic World, 1780-1840*.

⁹ Owens, Deirdre Cooper. *Medical Bondage: Race, Gender, and the Origins of American Gynecology*. University of Georgia Press, 2018. See also: Owens, Deidre Cooper. “Creating Health on the Superbody: Enslaved and Irish-Immigrant Women and Antebellum-Era Modern American Gynecology” Paper presented at the annual meeting of the American Studies Association Annual Meeting, Renaissance Hotel, Washington D.C., 5 November 2009.

¹⁰ Schiebinger, Londa. *Secret Cures of Slaves: People, Plants, and Medicine in the Eighteenth-Century Atlantic World* (Stanford Press, 2017), p.13.

¹¹ Note that Trapham also introduces his work in alignment with Hippocrates’ ideas of the human body and the earth’s composition. Trapham,

2. See also Sheridan, *Doctors and Slaves*, 17

¹² Allen, Phyllis. "Medical Education in 17th Century England." *Journal of the History of Medicine and Allied Sciences* 1, no. 1 (1946): 115-43. Accessed January 26, 2021. <http://www.jstor.org/stable/24619539>.

¹³ Thomson, James. *A Treatise on the Diseases of Negroes, as They Occur in the Island of Jamaica : With Observations on the Country Remedies*. Jamaica: Printed by Alex. Aikman, 1820, p. 8.

¹⁴ See Hogarth, Rana A. *Medicalizing Blackness: Making Racial Difference in the Atlantic World, 1780-1840*. Chapel Hill University of North Carolina Press, 2017.

¹⁵ Trapham, Thomas. "Of the Dropsie called the Country Disease," Trapham, Thomas, *A Discourse of the State of Health In the Island of Jamaica: With a Provision Therefore Calculated From the Air, the Place, and the Water, the Customs and Manner of Living &c..* London: Printed for R. Boulter. 1679.

¹⁶ *Ibid.*

¹⁷ *Ibid*; Barnes, Byron A., and Fox, Laurreta E. "Poisoning With "Dief-fenbachia"." *Journal of the History of Medicine and Allied Sciences* 10, no. 2 (1955): 173-81.. <http://www.jstor.org/stable/24619018>.

¹⁸ See Sheridan, Richard B., *Doctors and Slaves: A Medical and Demographic History of Slavery In the British West Indies, 1680-1834*. Cambridge [Cambridgeshire]: Cambridge University Press, 1985.

¹⁹ Maxwell , James. "'Accidental Poisoning of Three Negroes by Catharides,' Item 54, ." *The American Journal of the Medical Sciences*, Carey, Lea and Blanchard. Philadelphia, 1835. Accessed via Google Books, p. 254.

²⁰ *Ibid*, p. 255.

²¹ Ocampo, Rafael, and Michael J. Balick. "Plants of Semillas Sagradas: An Ethnomedical Garden in Costa Rica." (2009): 61-62.

²² See: Osawaru, M.E, F.M Dania-Ogbe, ME Osawaru, and FM Dania-Ogbe. "Ethnobotanical Studies of West African Okra [*Abelmoschus Caillei* (a. Chev) Stevels] from Some Tribes of South Western Nigeria." *Science World Journal*. 5, no. 1 (October 28, 2010).

²³ Trapham, p. 27.

²⁴ *Ibid*, p. 117.

²⁵ *Ibid*, p.117-118.

²⁶ Thomson, p. 9.

²⁷ “AJ Alexander to Joseph Black,” April 21, 1773, July 26, 1773, University of Edinburgh Library, Joseph Black Correspondence, Gen 873, vol 1 ff 58-63: accessed via, Paugh, Katherine, *The Politics of Reproduction: Race, Disease, and Fertility In the Age of Abolition*. First edition 2017.

²⁸ “AJ Alexander to Joseph Black,” April 21, 1773, July 26, 1773,” accessed via Schiebinger, Londa. *Secret Cures of Slaves: People, Plants, and Medicine in the Eighteenth-Century Atlantic World* (Stanford Press, 2017), p. 50-51

²⁹ Ibid, p. 51.

³⁰ Ibid, p. 51.

³¹ Schiebinger, Londa. *Secret Cures of Slaves: People, Plants, and Medicine in the Eighteenth-Century Atlantic World* (Stanford Press, 2017).

³² Long, Edward, *The History of Jamaica: Or, General Survey of the Antient and Modern State of That Island: with Reflections On Its Situations, Settlements, Inhabitants, Climate, Products, Commerce, Laws, and Government*. New ed., [London]: F. Cass, 1970.