EPIDEMIC CONTAINMENT POLICY IN PORTUGAL: THE 1885 CORDON SANITAIRE

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Abstract - The primary aim of this study is to further our understanding of the measures taken to contain epidemics in Portugal during the nineteenth century. The first cordons sanitaires along the country's land border were organized in 1800 and 1804 to prevent the spread of plague and yellow fever from Spain. Later, as also happened in countries with better public health regulations, liberal governments in Portugal did not shy away from implementing the quarantine procedures they had inherited from previous absolutist governments. This is clearly seen in the establishment of probably the last land-based cordon sanitaire to protect the country, which was set up in 1885 to guard against the cholera that was devastating Spain.

Index Terms - Cordons sanitaires, epidemics, Portugal, quarantine.

I. A BRIEF HISTORY OF EPIDEMIC CONTROL IN PORTUGAL

Ever since bubonic plague had invaded the continent in the mid-14th century, European governments had devoted a significant part of their activities to disease control, which involved a variety of sectors and interest groups and even international policy making. By the early 15th century, Portugal, like many other political entities, was using the methods developed by the Italian cities to fight the plague, although a permanent agency to tackle the problem was only set up a century later, and even then only in Lisbon. Portugal's geographic position left the country dangerously exposed to the effects of maritime trade, and this was especially true in Lisbon, the capital and largest port. Indeed, it was in the Lisbon area that the Crown began to organize its sanitary defense of the coastline by building major quarantine and ship inspection facilities at Trafaria, on the opposite shore of the Tagus estuary [1]. The Trafaria lazaretto remained the sole quarantine center for passengers, crews and cargoes until 1816, when it moved a few kilometers south to Caparica. Vessels authorized to approach the city would cross the Tagus and dock at Belém. Both facilities—Trafaria and Belém—had their own bodies of public servants managed by the chief health officer (Provedor-mor da Saúde), who in turn answered to the king.

A sporadic military (army and navy) presence in Trafaria and the port of Lisbon during the second half of the 18th century became permanent in 1815, when a warship and a detachment of troops with fire power were stationed there to control the sanitary inspection and quarantine facilities that protected Lisbon [2]. In July 1824, for example, there were 104 soldiers in the Trafaria–Belém area "employed [...] in the assistance of public health" [3].

The coastal protection system was strengthened and modernized on several occasions in the 19th century, particularly in the 1874 and 1889 reforms. The aim was always to introduce the latest European practices, yet, with the exception of the Regulation of March 8, 1860 (replaced in 1868), which attempted to relax traditional quarantine measures in line with the proposals of the 1851 and 1859 International Sanitary Conferences, the prevailing attitude was to keep the maritime border under strict inspection and control[4].

Despite its known weaknesses, which have been abundantly documented, this maritime protection and control system functioned as a permanent coastal cordon sanitaire, attracting complaints from diplomats accredited in Portugal, who often interpreted it as a commercial weapon against the countries they represented.

The territorial defense arrangements on land were different. Here, the Crown merely imposed temporary measures at times when the country was threatened or affected by disease outbreaks [5]. The fact that the municipalities were unable to take action themselves without first seeking royal approval meant that the people were vulnerable to fluctuations in the central government's authority and ability to intervene: the stronger the government, the more protection they enjoyed, but when it was weak (as it often was) they were abandoned to their fate. In cities, the walls functioned as a stone cordon sanitaire, guarded by armed men who controlled who and what could come in and go out according to central government orders or, not uncommonly, their own convenience. Outside of the cities, there is hardly any documentary evidence to work with, apart from a few suggestions that there were cordons sanitaires in disease-affected areas that were manned by local militias (ordenanças), territorially based paramilitary units under municipal control in which all able-bodied men aged between 15 and 60 had to enlist.

II. THE FIRST BORDER CORDONS SANITAIRES

The first cordons sanitaires along Portugal's land border with Spain for which we have documentary evidence were established during the yellow fever outbreak in Cádiz in 1800 and the plague and yellow fever outbreaks in Málaga and Vigo in 1804 [6]. The political situation in Portugal at the turn of the century was tense, since Napoleon Bonaparte's return to France had rekindled apprehensions about the Continental Blockade. The available data and the geography of the 1800 cordon suggest that the government made use of the fear that the epidemic might spread from Spain to mobilize the militias in the south of the country, where men often fled to escape military recruitment. If the outbreak continued to be confined to Cádiz, on Spain's southern coast, why was there greater investment on the land border than on the coast of the Algarve? And why did the land-based cordon extend north to the Tagus but leave a long gap between the Tagus and Douro, with a further concentration of troops in Trás-os-Montes (Fig. 1)? The answer may be found on the Spanish side of the border, where in 1800 the preparations for war were under way, with troops, field hospitals and supply depots already in Galicia, Extremadura and Andalusia. It seems likely, therefore, that once "civilians" had joined the militias to serve in the cordon, they might then be forcibly recruited into the regular army for the imminent war with Spain. The outcome of that war was defeat for Portugal, but yellow fever did not cross the border.

In contrast, the 1804 cordon stretched along the whole land border from the southern coast almost as far as the Douro. It was composed primarily of regular troops and its sole purpose was to protect public health. The authorities had probably learned how to set up a military cordon sanitaire from the Prussian generals that were reorganizing the Portuguese army at the time, since it was established according to the prevailing international rules (Fig. 2).

In Alentejo, in the south, it comprised three almost parallel lines of defense. Regular troops formed the first;

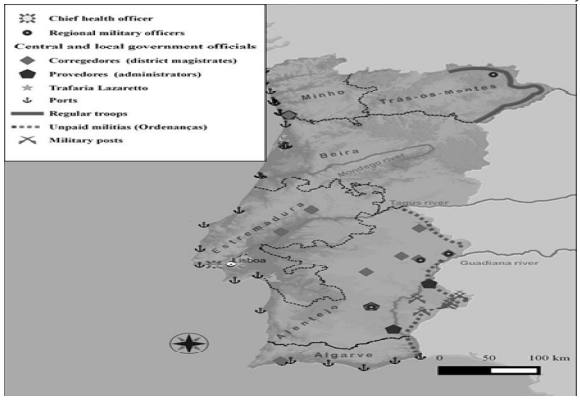


Fig. 1: Cordon sanitaire, 1800. From [6], p. 240.

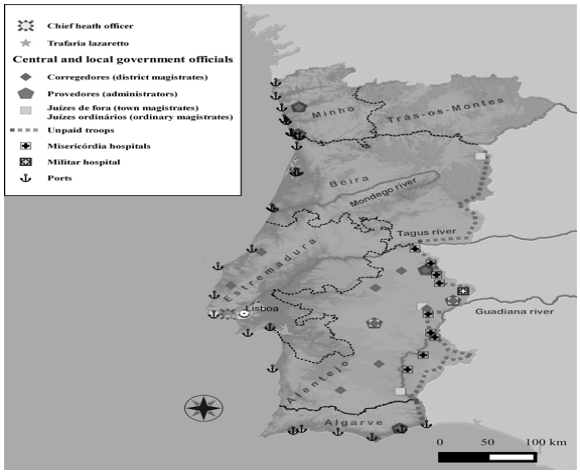


Fig. 2: Cordon sanitaire, 1804. From [6], p. 246.

they also surrounded villages in the border zone, blocked highways, and closed the almost 200 small ports. Behind them, the second line was composed of lazarettos, and the third of civilian and military hospitals (Fig. 3).

Whether it was because the epidemics were waning as they approached Portugal or because the army's measures were

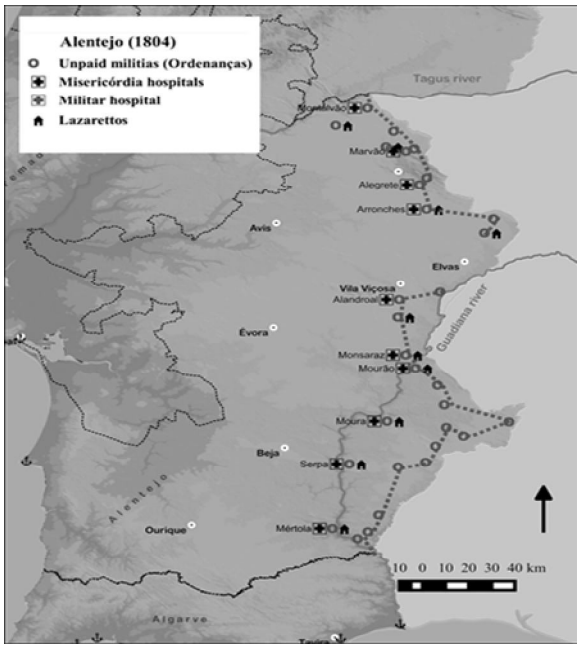


Fig. 3: Cordon sanitaire in Alentejo, 1804. From [6], p.248.

effective, the fact is that once again the country escaped unharmed from the threat of disease, unlike Málaga, where yellow fever killed 36% of the population.

In 1804 (and perhaps also in 1800), the absolutist state had been unable to develop internal public health structures and, therefore, closed the land border to protect the people and country from the scourges that were devastating its neighbor. Later, in different political times, when liberal governments in Portugal were faced with disease outbreaks, they rarely

hesitated at the choice between upholding either the right to life or the right to individual freedom [7]. Ongoing research shows that cordons sanitaires remained the standard response to epidemics until the end of the 19th century, despite the new ideological and regulatory framework.

At the International Sanitary Conferences, the European powers called for quarantine measures to be harmonized across the continent and also to be made time-limited, not least to serve their own commercial and imperialistic interests [8]. Portugal always aligned itself with the other southern European countries, which upheld the right of peoples to choose the procedures most suited to their own situations; in other words, to vary the strictness of quarantine according to their geographic locations, their economic capabilities, and the development of their public health facilities. Portuguese governments were well aware of their country's weaknesses and did not dare to take risks. One of the cases that best illustrates this position is that of the 1885 cordon, which was probably the last cordon sanitaire to be established at a national scale in Portugal.[1]

III. CLOSING THE BORDER TO CHOLERA: THE 1885 CORDON SANITAIRE

In late May 1885, as soon as the Portuguese Government learned that cholera had been identified in Valencia province, eastern Spain, it closed all railroad traffic between the two countries until the border lazarettos could be opened. The recently expanded railroad network emerged as the focus of all fears. It became the main target for the government's quarantine measures, which regulated the tiniest details of where trains from Spain would stop and what formalities would be required for passengers, baggage, and mail. The process was carried through by two military physicians who had reorganized the lazarettos for the last cordon sanitaire set up the previous year, when it was realized that they no longer had the capacity for large numbers of railroad passengers. The 1884 cordon had been a shambles at first, due to erratic and flawed decision making, until the government passed control of operations on the ground to the War Ministry, under the overall supervision of the Interior Ministry. It ended up being a training exercise for the government and for all the agencies involved in it, and the lessons learned were applied successfully the following year.

At the beginning of June 1885, the Interior Ministry called on the War Ministry to organize the cordon along the border, while it took care of internal defense itself in conjunction with the civil governors, the government's representatives in the provinces. The countless measures adopted included an immediate halt to any economic activity involving cross-border contact with persons or goods (e.g. fishing in shared rivers, holding fairs, or exchanging labor), the erection of temporary telegraph stations at the border, the preparation of cholera hospitals, the organization of district and municipal health committees, and the recruitment of physicians and surgeons for locations where there was a shortage.

In early July, people needed a health card to buy railroad tickets to inland destinations, a measure that the Interior Ministry described as "a second line of defense." By then there were 538 cavalry and almost 4,500 infantry stationed along the land border (and more than 6,500 by January 1886), almost one-fifth of the entire army including reservists. This capability was supplemented by that of the customs posts, with their experience in pursuing smugglers. Army physicians and surgeons were banned from taking leave save in exceptional circumstances.

As the outbreak in Spain declined, in late November the quarantine periods in Portugal began to be reduced and, on January 12, 1886, the controls for passengers coming from Madrid and France were cut to 24 hours under observation. Gradually, people were allowed to resume their former activities, although with a number of restrictions and about-turns, but it was April before the quarantine system was fully dismantled.

The hundreds of documents that describe the preparation and operation of this cordon sanitaire paint a picture of a country mobilized against a common enemy, but they also give a disturbing insight into the conditions that soldiers had to endure as human shields against the advance of cholera, and the everyday poverty and destitution of communities that lacked the basic necessities of life. It should be noted that the cordon was being prepared almost at the same time as the International Sanitary Conference in Rome in May–June 1885. Like all the others, this conference was mostly concerned with maritime trade and, consequently, with the hindrance to trade caused by quarantine measures. The Portuguese Government kept its maritime quarantine procedures virtually unchanged and focused instead on land-based measures. The recent expansion of the railroad network, in the government's view, greatly increased the risk of spreading cholera. Indifferent to the debate between contagionists and anticontagionists, international recommendations, and internal criticism, it took only a few days to implement a territorial sanitary system based around the railroad links with Spain and internal branch lines, which also determined the location of lazarettos, vigilance centers and cholera hospitals. Troops were deployed

[1] The information that follows was compiled from sources [9]–[12].

according to geographic requirements, with particular attention to the entry routes provided by the Minho and Guadiana rivers (Fig. 4).

We cannot be sure that it was the land-based cordon sanitaire that protected Portugal from the 1885 cholera

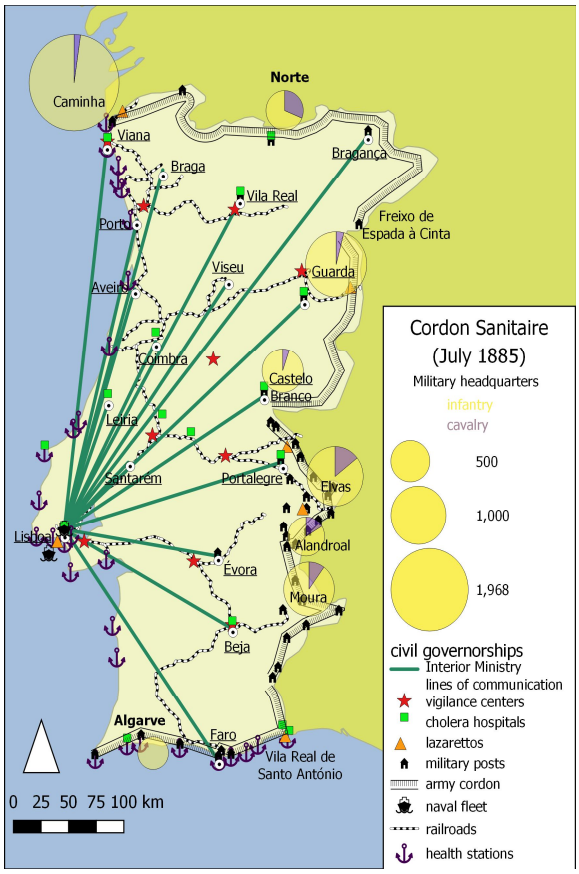


Fig. 4: Cordon sanitaire, July 1885. Compiled from [9]–[12].

epidemic, which killed some 120,000 people in Spain, but we should not underestimate its effect in terms of suppressing travel and the movement of agents that might spread the disease.

CONCLUSION

Resorting to the traditional measures of quarantine and cordons sanitaires to tackle the threat of epidemics in the 19th century was not a Portuguese idiosyncrasy. [2] Perhaps the factor that bore most weight in this policy was that they had always been the country's main means of defense. That is not to support Ackerknecht's thesis [13] that traditional quarantine policies were chosen by more conservative regimes. Even though Portugal's governments might have been aware of the scientific arguments against quarantine in favor of the "English system" of reducing such measures [14], it was still necessary to set up effective disease prevention and control bodies [15]. Not only was there no money to do so, but the unstable political system made it difficult to establish a model for the organization of the country. Nonetheless, epidemics triggered national emergencies and it was one of the primary duties of the state to maintain the country's territorial integrity [16]. Closing the borders was the only viable solution. It should also be noted that at that time the army was the most highly organized institution of the state and the one with the greatest capacity for mobilization. In addition, although the costs of these measures were high, they were short-term costs, and the potential financial losses resulting from the slowdown in economic activity were less of a risk than the possibility of losing population, in a country with a structural shortage of people. In this respect, the cordons sanitaires were also a populationist measure. When the cordons were removed, either because the danger had passed or at times of political turmoil, the land and people were to a great extent abandoned to their fate, exposed to both disease outbreaks and the endemic conditions that silently proved more lethal than even epidemics.

[2] For the case of Majorca, one of many that could be cited, see [7].

ACKNOWLEDGMENTS

I thank Luís Carlos Gonçalves for preparing the maps and Christopher J. Tribe for translating the text.

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