






Narratives of Plague in Arab Societies Through the Lens of Select Western Travelers
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Narratives of Plague in Arab Societies Through the Lens of Select Western Travelers

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Abstract

To examine the narratives of plagues in Arab societies, the paper, along with the postcolonial perspectives, uses the concepts like 'empathy' or 'detached concern' to bring fresh and new understanding of the travel texts. It selected John Antes' *Observations on the Manners and Customs of the Egyptians, the Overflowing of the Nile and its Effects* (1800) and Richard F. Burton's *Personal Narrative of a Pilgrimage to El-Medinah and Meccah* (1857) for the study. The paper analyses their narratives to understand their approaches in describing the 'native' Arab societies. The key findings show that while Burton tends to construct the people and their culture as 'the Other' although his mode of presentation tends to follow a mode of 'detached concern', Antes is, on the other hand, more objective but stood by the plague-infected people in empathy. The findings show that these Western travellers considered the concept of predestination, lack of quarantine, lack of sanitation, mass gatherings during the plague, and the unscientific local treatments as the root causes of the spread of the plagues among the 'natives'.

Keywords: Plague, Orientalism, Travelogues, Arab Land, Empathy, detached concern

Introduction

English travel literature on Oriental cultures and societies has primarily been written from Western perspectives because they were basically medical officers accompanying British soldiers, businessmen, and diplomatic and administrative officers. They, on their personal and professional levels, noted down their own daily experiences relying on their local translators. These observations have been debated as they were founded on distorted information and often limited sources. The focus of this paper is to investigate how the emotional distance between the observer and the object of observation as a writer can affect the observer's judgment and how the various myths, metaphors, images, anecdotes, and allusions are used to depict the life, culture, and society of the Arabs in approaching, diagnosing, and managing the traumatic impact of plague. The postcolonial perspectives along with the concepts of 'empathy' and 'detached concern' pervaded

as an undercurrent throughout the discussions and have illuminated some of the passages of these writers' explorations.

Plague times are highly challenging in the history of a society as many fundamental and intellectual aspects of the community are either destroyed or called into test. Plague has usually been a topic in historical and medical research dealing with it in terms of statistics and historical records. Travel writings have also been intensely studied from the postcolonial perspective with much focus on its narrative of otherness. However, to the best of our knowledge, few studies have focused on how these calamities were faced by these plague-affected communities. As these writings are not fictional but historical accounts that claim some scientific objectivity, there is a need to analyze how they describe the social effects of the plague and the people's methods of dealing with it during these times and places.

Two important concepts under debate in the medical discourse concern this investigation: "empathy" and "detached concern." These two concepts are interrelated in dealing with diseases and patients. While "empathy" refers to some personal involvement in the patients' experience and life, "detached concern" requires distancing oneself from the emotion-laden experience of the patients. Most studies agree on the necessity of some degree of empathy in dealing with diseases and patients, however, they differ on the degree and nature of empathy. Feeling concerned for other people creates a motivation to help and care for them.ⁱ In *From Detached Concern to Empathy: Humanizing Medical Practice*, Jodi Halpern (2001) argues that empathy is a form of "emotional reasoning" that involves emotional associations to provide a context for imagining the distinct experiences of another person (Halpern, 2001, pp. XI, 11). Halpern based his definition of "medical empathy", on the aesthetic understanding of "human empathy" as defined by philosophers like Theodor Lipps, and Martin Heidegger. For Lipps empathy is "the power of projecting one's personality into the object of contemplation." For Heidegger, the prior possibility of being in relation to something is a precondition to understand it. Halpern concludes that "empathy presupposes a common human set of interests and moods" (Halpern, 2001, p. 76).

In the same vein, postcolonial critics like Geoffrey Nash (2006), drawing insights primarily from Edward Said's *Orientalism* (1978), gave a cogent argument that how an apparently natural description of a people and culture "... is influenced, if not determined, by its authors' gender, class, age, nationality, cultural background, and education. It is ideological" (Nash, 2006, p. 2). Similarly, Mary Louise Pratt (2008) brought the intention and attitudes of the travellers in the conversation to show how and why their portrayal was being affected. She viewed travel literature as part of the European expansionist project as it served the very purpose of traveling to "the distant parts of the world that were being explored, invaded, invested in, and colonized" (2008, p. 3).

For this research, two writers have been selected because their travelogues have distinctive merit and provide in-depth accounts of some of the plagues and epidemics that spread in Hijaz and Egypt. The first among them is John Antes who was an American diplomat in Egypt for a long time. His famous work *Observations on the Manners and Customs of the Egyptians, the Overflowing of the Nile and its Effects* (1800) brought fresh perspectives to the travel writing discourse. Breaking away from the stereotypical representation of Arabs, he argued that the main reason for the failure in controlling the plague was the lack of quarantine. Richard Francis Burton

(1821–90), a prolific British writer, translator, and explorer, worked in various Arab countries as an intelligence officer and diplomat. One reason why his critical observations are significant and worth studying is his painstaking efforts to get to know the Arab people and their language, culture, and society. His *Personal Narrative of a Pilgrimage to El-Medinah and Meccah* (1857) is a manifest example of his scholarly understanding. The selection of these two travelogues was based on three factors: the time periods they cover—the seventeenth and nineteenth centuries; the regions they refer to — the Hejaz and Egypt, and the in-depth accounts of the plague and the actual events that surrounded them.

Observations of John Antes

There are several renowned Western travel writers who have travelled to and written about the people and societies of the Arabs. John Antes was one of the prominent travel writers of the period who worked as an American diplomat in Egypt. During his twelve-year stay he witnessed three-plague epidemics that had hit the country (Antes, 1800, p. 44). His well-known book *Observations on the Manners and Customs of the Egyptians, the Overflowing of the Nile and its Effects* (1800) introduced new viewpoints to the conversation on plague in travel writings. He challenged many stereotypes of Arabs propagated in the previous travel writings in analysing the root causes and spread of the plagues. He disapproved those fallacious arguments and emphasised that the lenient observation of quarantine measures aggravated the conditions of the plagues.

The interventional strategies of John Antes in curating the Arab and Turkish societies were nothing less than iconoclastic. He had not created the 'Orient' as 'the Other' in his analysis of the causes, traumatic pressure on the belief systems of the people and their management of the plague. His approach in looking at the plague infected people and envisioning their traumatic human conditions is empathetic and impartial. Probably, due to his prolonged stay in Egypt, he could identify himself with the people and their culture, and his narrative tone demonstrated his intimate understanding of the fabrics of the society.

He reassessed the existing myths and metaphors related to the origin and spread of plagues as perceived in the western popular imagination. He seemed to invalidate the western narrations by arguing that any isolated incidents should not be depicted as a representative account of the Orient. He cautioned any analysis of the plague is bound "to be a very difficult task... (and) are liable to be contradicted... Even that which may appear to be true at Constantinople, or other places, proves often to be the reverse at Grand Cairo. There is upon the whole so much seeming contradiction in this phenomenon..."(Antes, 1800, p. 36).

Egypt faced severe and frightening outbreaks of plague: 'Justinian's plague (6th and 7th centuries), the Black Death (14th and 18th centuries), and the third plague pandemic (1855–1959)' (Lotfy, 2015, p. 551), therefore, some Western writers alleged that Egypt was a source of and a breeding ground for the plague (1800, p. 36). They opined that the source of the plague was the griminess of Grand Cairo and the polluted water of the river Nile. Antes contested such viewpoints by

providing his observations and evidence: "I think Egypt cannot, with any truth, be called the mother of the plague" (1800, p. 41). He challenged such assumptions by arguing that Europeans had been living on the banks of the Nile for centuries without being affected by the plague, although they were using the same air, water, and environment. He further argued that many Egyptians were not affected by the plague, and the disease itself came to an end. These observations proved for him that the soil, water, and air of Cairo were not responsible for the plague at all:

All the houses of the European merchants in Grand Cairo have, for more than two hundred years, been situated close to this canal or very near it; and neither have these nor any of the other inhabitants, who live in the same situation, been more affected with diseases than the rest. (Antes, 1800, p. 38)

Another assumption that Western writers like William Wittman put forward was that the unhygienic conditions of the Arab people were the source of the plague. In *Travels in Turkey, Asia Minor, Syria*, Wittman depicted Egyptian life and society to bring home this assumption:

It would appear that the plague is a native of Africa, and of Asia.... The streets of Rosetta are extremely narrow and very dirty. The manner in which the inhabitants live crowded together, would appear sufficient, in a stagnant state of the atmosphere, in most of their towns, etc. to generate pestilential or malignant diseases. (Wittman, 1804, p. 382)

As a counterargument to such myths and images, Antes expounded his observations about the cleanliness of the Turkish and the Arab people:

It is a great injustice to the Turks to call them a filthy or dirty people. They are quite the contrary, particularly the better sort of them, who are remarkably cleanly, and their religious principles oblige even the common people to be in some measure so. To this, I must add, that the streets in the city of Grand Cairo are, upon the whole, by far not so filthy as most of the streets of our own towns. (Antes, 1800, pp. 37–38)

Irrespective of time and place, to check any infection and its spread, Antes seems to be an ardent proponent of concrete preventive measures like strict quarantine (1800, p. 36). He stressed that with a "strict quarantine in the maritime towns, it might as certainly be banished out of that country as out of any in Europe" (1800, p. 41). This was a cogent argument, since the Europeans and others who had begun to observe a strict quarantine did not catch the infection (1800, p. 35). Conversely, he noted that those who did not follow strict quarantine measures got infected: "a man at Alexandria having locked himself up to perform quarantine, but being unable to shave himself, sent for a barber,... paid dear for his folly, and died a very few days after" (1800, p. 35).

He noticed there is a pattern of the suffering and death caused by plague cutting across economic conditions and religious beliefs. Empathised with the poor people, he identified that they suffered more than the rich due to two reasons: first they were more superstitious than the rich and the

second they lived in crowds. The rich could afford to live separately, make social distance, and observe quarantine or any other precautionary measures.

Antes's in-depth and informed analysis of the reasons behind the quick spread of the infection attributed it to the dogmatic beliefs of the people cutting across the religions. For instance, the local Muslims found an excuse for not obeying the quarantine measures as they believed "that every man's fate ... is unalterable, written upon his forehead" (1800, p. 46). This view may have been a part of their cultural beliefs but was not based on their religious guidelines. Rather, Antes counter argued, "their religious principles oblige even the common people to maintain some measures of cleanliness and caution" (1800, p. 38). In the same vein, Antes first highlighted the dogmatic beliefs of the local Christians that it is God himself who select who to be sacrificed this year and who not, and, in consequence, giving precautionary measures a secondary role in managing the plague. In a highly illustrious way, he noted:

In Egypt they (the local Christians) are always pretty sure when the plague will cease, for it seldom remains after the 24th of June: this has given occasion to the following superstitious notions, not among the Turks only, but particularly among the Cophtic Christians. They say, and firmly believe, that angels are sent by God to strike those people who are intended as a sacrifice. All those who receive the stroke must inevitably die; but those that receive the infection through fear only, escape or recover. When they feel themselves infected, they say, *anna matrub bel cuppa!* which signifies, I am struck, or smitten, by the plague. As the 17th of June, according to the Cophts, is the festival of the Archangel Michael, on which day he lets a drop of water, of such a fermenting quality, fall into the river, as occasions its overflowings: they say that, at the same time, he, as the chief of all the other angels, orders all those occupied in striking the people to retire. The Cophts add, that if any of them should still lurk about in the dark after that day, they must absolutely fly before St. John on the 24th of June. (Antes, 1800, p. 43)

His advice to them is that any thinking Christian, although religious in his heart, cannot content himself with such reasoning. He should take precautions first and observe strict quarantine and all other precautionary measures to protect himself from infection.

After analysing the plague realities from the perspectives of economic conditions and dogmatic beliefs, he attempted to decipher the rise and fall in the number of deaths per day due to variation with the temperature of the place. He observed that the heat in "the middle of April, ...(infection) increased with such rapidity and virulence, that sometimes one thousand people died of it in one day at Grand Cairo; but, about the middle of May, the wind shifted to the east, which occasioned a few days violent heat, in consequence of which it immediately diminished" (Antes, 1800, p. 44). On the role of climatic effect on people afflicted with plague, Alan Mikhail also pointed out:

according to Antes, heat was also effective in curing those already afflicted with plague. He often observed that the sick arriving in Egypt from other parts of the Ottoman empire during the summer months would soon recover from the disease after only a few days in the province. (Mikhail, 2019, p. 182)

The travelogue has highlighted a number of myths in the previous depictions of the plague and how they were misrepresenting the actual realities. John Antes argued that it was not squarely possible to do a representative assessment of the plague as each location is unique and distinctive in nature based on the ecological and environmental conditions. He has argued that it is neither the economic condition, nor the religious orientation, nor the vigorous and healthy body makes any substantial difference in the data of the deaths in the plague. The thing that really makes a significant difference is the observation of the strict precautionary measures like quarantine and the variable temperature of the location. In his account of the plague, there were no any such cultural or religious prejudices.

Personal Narratives of Richard F. Burton

A study of the narration of plagues and other fatal diseases as depicted in the works of Richard F. Burton, in the postcolonial perspectives brings new insights into the discourse. What is unique and distinctive in the analysis of Richard Burton is that he maintained an attitude of 'detached concern'. Consequently, he disapproved all the socio-cultural, religious and traditional ethos and beliefs prevalent in the society as mumbo-jumbo approaches in dealing with the plague. To bring home his point, he highlighted the follies and fallacies in people's attitudes, approaches and treatment towards the epidemics and emphasized that they need to develop a scientific temperament in the society.

Richard Burton mocked the society in depicting their ignorance and inconceivable treatment of the plague and, in consequence, instead of using scientific methods in diagnosing, treating, and managing the patients, they relied on tradition and superstition. To arrest the continuous spread of the plague and curb down the grimy rise of death toll, Burton felt there was an urgent need to focus on changing the attitudes of the people. In consonance with his personal attitude to approach a disease or calamity with 'detached concern', he advocated that the society should rely more on logic, reason, rationality, and scientific research, rather than on wishful guesses and inexplicable diagnoses. Burton commented on Arabs' practice and attachment to the desert as they believed it cured their chronic disease:

Arabs are no longer the most skilful physicians in the world. They have, however, one great advantage in their practice, and are sensible enough to make free use of it. As the children of almost all respectable citizens are brought up in the Desert, the camp becomes to them a native village. In all cases of severe wounds or chronic diseases, the patient is ordered off to the black tents, where he lives as a Bedouin, drinking camels' milk, a diet highly

cathartic, for the first three or four days, and doing nothing. This has been the practice from time immemorial in Arabia, whereas Europe is only beginning to systematise the adhibition of air, exercise, and simple living. (Burton, 1858, p. 237)

Burton sometimes utilized Horatian satire in depicting the Arabian societies and cultures to substantiate his opinion on why such societies often face plagues. Unlike the Menippean satire, which focuses on mental attitudes, Horatian satire ridicules what it considers absurd or foolish in human behaviour. It has a subtler, more sympathetic tone that offers humour, not offence (Freudenburg, 2005, p. 7). His voice is indulgent, tolerant, amused, and witty. He mentioned another notable instance of Horatian satire in describing the treatment of the plague in the holy city of Medina and mocked people's 'boast of El Medinah that the Taun or plague has never passed their frontier' (Burton, 1858, p. 234). He aimed to contradict the hadith which mentions the protection for Makkah and Madina from plague. Burton with reference to a note mockingly mentioned fatal 'diseases and medical treatment of the northern Hejaz' (Burton, 1858, p. 234): "In the Rahmat el Kabirah, 'the Great Mercy,' as the worst attack is piously called, whenever a man vomited, he was abandoned to his fate; before that he was treated with mint, lime-juice, and copious draughts of coffee" (Burton, 1858, p. 234). A description of the superstitious treatment of Rih el Asfar was ludicrous in the extreme and demonstrated how people rely on their speculative ways of dealing with the plague patients:

The nurse closes up the room during the day and carefully excludes the night air, believing that, as the disease is 'hot', a breath of wind would kill the patient. During the hours of darkness, a lighted candle or lamp is always placed by the side of the bed, or the sufferer would die of madness, brought on by evil spirits or fright. Sheep's-wool is burnt in the sick room, as death would follow the inhaling of any perfume. (Burton, 1858, pp. 234–235)

His description of jaundice treatment was no less grotesque:

The sick man looks into a pot full of water, whilst the exorciser, reciting a certain spell, draws the heads of two needles from the patient's ears along his eyes, down his face, lastly dipping them into the water, which at once becomes yellow. Others have 'Mirayat', magic mirrors, on which the patient looks, and loses the complaint. (Burton, 1858, p. 236)

Burton also described the lack of sanitation and hygiene prevalent in his hotel. He reminisced about his painful experiences during his stay at the George Inn. A close analysis of the descriptions of the inn such as – the 'ragged walls' 'clammy with dirt, the smoky rafters foul with cobwebs' and the floor 'black with hosts of ants and flies', 'pigeons nestling on the shelf, cooing amatory ditties and cats, like tigers, crawled through a hole in the door' cogently convinces the readers that such unhealthy and unhygienic environment is the root cause of the repeated outbreak of plague in these societies (Burton, 1858, p. 115).

From the way Burton described the plague in his travel book, one may believe that the people were incessantly suffering from it. However, L. I. Conrad disapproved of such a gloomy picture of the societyⁱⁱ, and by analogy one can assume that Burton seems to have ignored the distinction between Taun and Waba (“plague” and “pestilence”) and categorized all forms of the disease under the umbrella term Taun. Due to this overgeneralization, Burton depicted a very dismal picture of the localities.

Parama Roy is worth quoting here:

... in the Personal Narrative, the white blot that is Arabia (or Sind) in the British imagination provides the perfectly constructed theatre for the authorised script of colonial impersonation, inscription, and occupation. (Roy, 1995, p. 192)

One of the powerful narratives that developed over a period of time was that Arabs, at the time, were seen as heavily reliant upon superstition and exorcism for treating the disease, and not upon medicines because of the concept of predestination. However, a closer look at the secular and religious literature and historical sources demonstrates that this was not always the case. The Arabs were not alone in suffering a dire lack of medication for these diseases. Before inoculation and vaccination, European medicine was helpless against the disease at the beginning of the eighteenth century. As a counterargument to this accusation, one can refer to Voltaire who provides evidence of how Europe borrowed such treatment from the Arabs. He praised Lady Mary Wortley Montagu for bringing the practice of inoculation from Constantinople and Caroline of Ansbach, Princess of Wales, for promulgating it in England, despite the serious reservations of the priests, according to whom this was an ‘unchristian operation’ (Voltaire, 1741, p. 64). Along with Lady Mary Wortley Montagu, Zabdiel Boylston,ⁱⁱⁱ a pioneer fighter against the epidemics, had to look for a solution in the traditions practiced by Ottoman women and African slaves. As Jennifer Lee Carrell observed: ‘The paradox of using smallpox to fight smallpox was not a product of Western methodical science. Its discovery and development lie hidden in the unrecorded history of the folk medicine of the Middle East, the Caucasus, and Africa’ (Carrell, 2004, p. vii).

In response to a letter written by Emanuel Timonius at Constantinople read before the Royal Society by Royal John Woodward, Cotton Mather, a Minister in Boston, Massachusetts replied in a letter entitled, *Curiosities of the Smallpox* (16 December 1706). He referred to an African slave as follows:

Many months before I met with any intimations of treating the Small-Pox with the method of inoculation, anywhere in Europe; I had from a servant of my own, an account of its being practised in Africa.

Enquiring of ... whether he ever had the Small-Pox; he ... told me, that he had undergone an operation which had given him something of the Small-Pox and would forever preserve

him from it; adding that it was often used among the Guramantese, and whoever had the courage to use it, was forever free from the fear of the contagion. (Carrell, 2004, p. 118)

Burton portrayed how religion, tradition, customs, and culture are in the crosshairs regarding the management of the plague and other common fatal diseases at those places he had been to. He pointed out that cleanliness and precaution are not always a part of their practice. Therefore, these societies imbibed some dubious ways of dealing with the plague like relying on stories of the old ancestors and local unscientific treatments. In addition, the misinterpretation of the concepts like fate and predestination aggravated the situation of the people afflicted with diseases.

Conclusion

The study has tried to enhance the understanding of the dynamics of Western travel writers' representation of some Arab societies during the plagues between the seventeenth and the nineteenth centuries. In particular, it outlined how these two travel writers—John Antes and Richard Francis Burton—portrayed the causes of the plague and the local people's attitudes and approaches towards diagnosing and managing its infection.

The narratives of Antes followed a more empathetic approach in describing the Arab societies. He attempted to demonstrate that the spread of the plague can be ascribed to the negligent approaches in dealing with the plague. In contrast, others like Francis Burton had been more prejudiced. Robert Burton, in particular, used scientific temperament as a moral compass to counter religious thoughts about divine intervention and predestination. John Antes, in particular, identified some instances of gaps between what their religious scriptures teach and what the locals practice.

In the narrative of Francis Burton, for instance, the major tendency was to highlight the dirty and unhygienic environment of the Arab societies as the main source of the plague. Antes refuted this myth and drew attention to the lack of precautionary measures like quarantine and their misunderstanding in conceiving the concept of predestination as the main factor for the spread of the infection. In their writings, the local people's eagerness to adopt primitive forms of medicines, superstitions, blind beliefs, lack of sanitation, the apparent pervasiveness of non-hygienic situations and the occurrence of social gatherings at regular intervals were some of the common images foregrounded in their narratives. However, the findings are not meant to be conclusive, and this area of study will keep generating fruitful academic discussions as human perspectives are constantly getting enriched with new transcultural transformations over time. Comparing these travel writings with native, historical, or non-Western travellers' accounts would open up fresh vistas for research and analysis. A comparative study between these texts and the contemporary travel texts observing European societies' way of dealing with the plagues would also help illuminate the relative strengths and weaknesses in their approaches towards the management of the disease.

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The authors declared no potential conflicts of interest.

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Notes:

ⁱ For more details on this debate see Howard Spiro, et. Al. (1996), *Empathy and the Practice of Medicine: Beyond Pills and the Scalpel*; and Jean Decety (2020), "Empathy in Medicine: What It Is, and How Much We Really Need It."

ⁱⁱ (For the delicate distinction between the two terms, see Lawrence I. Conrad. (1982) Tā'ūn and Wabā' Conceptions of Plague and Pestilence in Early Islam, *Journal of the Economic and Social History of the Orient*, Vol. 25, No. 3. pp. 268-307)

ⁱⁱⁱ Two unlikely heroes in the war against smallpox were Lady Mary Wortley Montagu and Zabdiel Boylston. Despite being 'outsiders to the elite ranks of the medical profession, they 'began the fight against that terrible disease in the Western world in the 1720s'. For more details see Jennifer Lee Carrell, *The Speckled Monster: A Historical Tale of Battling Smallpox* (US: Penguin, 2004), xii. See also, Douglas Boyd. 'Plagues and Pandemics: Black Death, Coronaviruses and Other Killer Diseases Throughout History', *Plagues and Pandemics*, (2002): 21–2.

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