Book Review


This book should be most welcome by scholars from a variety of fields: history of health and medicine; colonialism and empire in Africa; global history; comparative colonial studies; history of tropical medicine, demography and statistical knowledge; studies of science and knowledge circulation; transimperial connections; and a few other fronts, plus their intersections and combinations. Samuël Coghe’s research on previously unexplored government and private archives does more than fill a gap in historiography regarding an understudied context and period—Angola’s health policies under the Portuguese, 1890–1945. This study provides us with a rich, prismatic and inspiring combined analysis of de-population anxieties, labour practices, migration, racialised politics, and inter-imperial circulation of medical knowledge and practices. It is also an alternative to the existing, often redundant approaches to Portuguese colonial exceptionalism in its presumed benign or malign qualities.

The evidence gathered and analysed by the author indicates that there were commonalities and shared anxieties across imperial formations, that knowledge circulated and practices were borrowed in the matters of what might be called ‘colonial biopolitics’—an unsettled term to which the author prefers ‘population politics’ for reasons he explains. Anchored on the issues of sleeping sickness as a perceived factor of population loss and of assistance to maternity as a perceived instrument for population gain, Coghe addresses the understudied health services and sanitary politics of inter-war Angola and weaves a case study that should become a reference for future research.

Several gems emerge from the chapters: the detailed depiction of colonial perceptions and actions regarding sleeping sickness in Angola and Africa in general; the development of an agency dedicated to ‘indigenous health’ (Assistência Médica Indígena) and its outreach practices; the overlapping of medical and public health interventions with anxieties of de-population and the understanding of the impact of outmigration for labour; the underlying racialised social structures, practices and ideologies; the making of a ‘field demography’; the role of some individual actors in the shaping of medical knowledge and policies, as exemplified by Damas Mora; the role of indigenous practices and practitioners in colonial policies; the special role of African midwives and the politics of assistance to maternity. Those gems are interwoven in a connected analysis and make the book a singular and worthwhile contribution to contemporary scholarship. It has the breadth, depth and enthusiastic engagement of what was originally a doctoral dissertation, while it was also superbly curated to mature as a scholarly book.

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Cristiana Bastos

*Instituto de Ciências Sociais, Universidade de Lisboa*