Sick From Freedom: African-American Illness and Suffering During the Civil War and Reconstruction

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Review

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Downs, Jim *Sick From Freedom: African-American Illness and Suffering during the Civil War and Reconstruction*. Oxford University Press, \$29.95 ISBN 978-0-19-975872-2

Digging Deeper into Emancipation

Jim Downs' *Sick from Freedom: African-American Illness and Suffering during the Civil War and Reconstruction* offers new insight into experiences of the recently emancipated during Reconstruction. Rather than treat emancipation as a watershed moment that created a clear divide between slavery and freedom, Downs casts emancipation as a process that only just began with Lincoln's Proclamation. Part of this process, Downs shows, was for the federal government to address issues of freedpeople's health. He shows that the prejudice and misconception of many officials hampered the federal government's response to major health crises within newly freed populations. Moreover, the government's reactions were slowed by general bureaucratic inefficiency and ineffectiveness. Downs persuasively argues that access to care became an integral right of citizenship for many freedpeople during Reconstruction, and he shows that this access only came to freewomen and freemen through the work of activists, freedpeople, and caring physicians in the 1870s.

Downs begins his book with a harrowing story of an unnamed boy who, after emancipation, traveled with his mother, father, and five siblings to a Union camp in Chattanooga in 1863. There, his father enlisted, and Union officials sent the family to a camp in Nashville. In Nashville, the boy's mother died, and officials decided to send the children back to Chattanooga. The remaining family members suffered through starvation and a smallpox epidemic, which wracked the freed population in the camp. In the winter of 1865, the young boy became afflicted with frostbite, and Union soldiers had to amputate his feet. For Downs, this story is emblematic of the problems former slaves faced following emancipation. Union officials – military men focused on winning a war – were

unprepared for the care of this population. Emancipation thus did not bring immediate freedom, but instead sickness, death, and suffering.

Things did not get much better for the newly freed after the war ended. The ego of federal officials and military leaders clashed as they debated who should manage the transformation of the newly freed into a productive free labor force. Meanwhile, government intervention ground to a halt. Disease, starvation, and mobility remained hallmarks of life for the recently emancipated. Ultimately, activists in benevolent organizations who tried to care for the newly freed grew so shocked by what they saw and frustrated with the futility of their efforts that they petitioned the federal government to take more direct action. Thomas Eliot, a representative from Massachusetts, brought forth a bill to do that, noting that "the liberation of millions of slaves without federal protection would have constituted a crime against humanity" (61).

The Freedmen's Bill passed the House by a scant two-vote majority in 1864, and Lincoln signed it into law in March 1865. Among the things it created were Freedmen's Hospitals to care for the emancipated. But here, too, the story of suffering and illness continued. Downs notes that "as a result of the slowness of the federal bureaucracy health conditions worsened, and, in many situations, freedpeople died while waiting for treatment." Later, in 1866, Andrew Johnson vetoed a bill meant to keep funds flowing to these hospitals. His veto made a dire situation only worse. Others, like O.O. Howard, the head of the Freedmen's Bureau, proved meddlesome even when trying to do good. Downs shows that the well-intentioned D.C. bureaucrat created unnecessary headaches for doctors when he ordered all Freedmen's Hospitals plant their own vegetable gardens on site. The orders proved problematic for hospitals already overworked and short on staff.

The situation only began to change when doctors, benevolent organizations, and freedpeople forced state and local medical institutions to accept those considered disabled. By doing so, Downs concludes, "federal officials made a critical claim about the meaning of citizenship: access to medical services became a benefit of citizenship" (165). Later, the federal pension system for veterans empowered many of the emancipated to describe their suffering and illness – and to receive some compensation. Finally, Howard University began a medical program that churned out African American doctors who returned to their communities to provide greater medical care. Still, Downs' proposal that emancipation was a process only begun with the Proclamation remains true;

access may have improved by the 1870s, but equality remained distant.

At only 178 pages of text, Downs' crisp narrative adds significant knowledge to the era of Reconstruction. Downs' core contribution is to show how health, citizenship, and emancipation became entwined. One could not enjoy freedom without one's health. Receiving access to care was an arduous struggle for many of the freed slaves. But also notable is Downs' recovery of a smallpox epidemic that broke out amongst the freed population in Washington D.C. and the South. The epidemic has largely been overlooked, but Downs' argument that a massive smallpox epidemic afflicted the emancipated is compelling and worthy of more study. He also shows how ideas about race and illness influenced the government's poor reaction to the epidemic.

Throughout *Sick from Freedom*, Downs does an admirable job of giving voice to the emancipated, a group whose voices are often absent from the historic record or, when they do appear, obfuscated by the prejudice of the record-taker. Nonetheless, his work is primarily an institutional history that studies the reaction of the federal government and the institutions formed to support it to the needs and demands of newly free men and women. I anticipate this book, along with Gretchen Long's new *Doctoring Freedom: The Politics of African American Medical Care in Slavery and Freedom*, will make for regular readings in graduate seminars.

Patrick Spero is assistant professor of history and leadership studies at Williams College. He has published essays and reviews on early American print culture, revolutionary politics, frontier life, and education. He most recently authored a twelve-part series for RealClearHistory.com which can be accessed at: http://www.realclearhistory.com/articles/2012/09/21/presidential_elections_from_adams_to_lincoln_35.html on the presidency from George Washington to Abraham Lincoln, which included video campaign ads produced by his students.