Juanita De Barros


In the hundred years between the abolition of slavery and the great labor rebellions of 1938, the population of Britain’s Caribbean colonies increased more than three times, from about 0.8 to 2.7 million. Almost everywhere, the governing classes and the entrenched plantation owners complained of a population “crisis.” This fear took several forms. In some colonies there were not enough people, in others too many; and where the numbers seemed about right, the people chose not to labor on the plantations. In response, there emerged sustained efforts in the British colonies to intervene in the lives of individuals in order to shape the size and health of the populations. Gradually, the balance shifted from the violence of forced migration to more subtle forms of encouragement and indoctrination. It is the policies and activities associated with this more modern approach that form the core of Juanita De Barros’s new book.

De Barros focuses on three colonies—British Guiana (Guyana), Barbados, and Jamaica—which contrasted in size and economic structure. Barbados quickly came to be seen as “overpopulated” and the government began to encourage rather than hinder emigration. British Guiana had exceptionally heavy mortality and continued to depend on immigration, whereas Jamaica was not densely populated and saw the development of a vibrant peasantry. Often, complaints about “population shortages” (p. 169) were code for “labor shortage,” meaning the preference of people to work their own land rather than bend their backs for the planter class. In spite of the differences between the colonies, the governing elites shared an enthusiasm for initiatives directed at reducing mortality and increasing fertility.

De Barros provides a particularly rich study of the Baby Saving League of British Guiana, established in 1914 following an international conference held in London, and quickly followed by the Child Saving League of Jamaica (1916) and Barbados (1921). These voluntary organizations were promoted by the wives of governors and other elite women—generally white, occasionally colored, and often, at least initially, unwelcoming to black women whatever their social status. The Leagues sought to provide cheap child care and give advice to working mothers, but looked to English women as the ideal superintendents to give training in midwifery, nursing, and health visiting. It was a kind of charitable maternalism, seeking to spread concepts of respectability and “civilization”—including a model of marriage and the family counterpoised to “bastardy” and “concubinage.” At first, these initiatives were confined to urban
centers and received funding from local government. They overlapped a growing interest in public health, particularly the improvement of urban sanitation and hygiene.

The enthusiasm of the elite for better living conditions related directly to their personal interest in making the tropics less deadly for their own class and race, and their awareness of new medical knowledge about the true causes of disease—notably the mosquito as vector in malaria and yellow fever. These discoveries coincided with the growth of U.S. imperialism in the Caribbean, beginning in 1898, and led to imperial cooperation, notably through the work of the Rockefeller Foundation. Hookworm and venereal disease were particular targets, once again bringing together moral and economic concerns.

The most original contribution of De Barros’s research and interpretation lies in the detailed account she provides of the interaction between metropolitan and local governing classes in seeking to increase fertility, reduce infant mortality, and encourage marriage and faithful monogamy. On the other hand, she is reluctant to offer detailed statistical data or attempt estimates—even readily available birth and death rates are not presented. Similarly, there is no attempt to reconstitute family households. This limits the potential to explain the demographic behavior of the mass of poor people and to assess the impact of policy.

Down to 1938 colonial government was dominated by white male elite opinion, and the documentary sources available to explore these attitudes are abundant. De Barros exploits them very effectively. The attitudes of the poor are harder to find, but clues can be discerned in their behavior. The poor accepted indoctrination on hygiene and sanitation, so much so that, relative to their wealth, the people of the British Caribbean came to enjoy high standards of health and longevity.1 In contrast, the people rejected moralistic preaching on how to organize their sex lives and family units. By the 1930s, De Barros shows, they were talking about birth control. In doing so they were ahead of their time, following practices that now appear quite modern. Whereas the elite liked to see public policy as a package of interdependent elements grounded in unchallengeable truths, the people recognized prejudice and hypocrisy when they saw it, and picked and chose.

B.W. Higman
School of History, Australian National University, Canberra, ACT 2601, Australia

barry.higman@anu.edu.au

---