ARGENTINE PANDEMIC

Poisoned Eden: Cholera Epidemics, State-Building, and the Problem of Public Health in Tucumán, Argentina, 1865–1908. By Carlos S. Dimas. Lincoln: University of Nebraska Press, 2022. Pp. 321. \$99.00 cloth.

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A deadly pandemic reached a country where a contested election had just occurred. The president denied the gravity of the situation and shunned a provincial governor who demanded strict sanitary measures. At the same time, the governor disavowed the efforts of municipal authorities who tried to contain the outbreak. Meanwhile, doctors angrily disagreed, taking sides with the warring political factions. A distrusting public refused to follow prophylactic recommendations; some even used physical violence against doctors and nurses. The ensuing chaos ended in thousands of deaths that could have been prevented. It may sound like the story is set anywhere in the world in the twenty-first century, but it happened in Argentina in 1886.

The province was Tucumán, the pandemic was cholera, and the historian who recreates it is Carlos Dimas. In this splendid and timely book, Dimas recounts the cholera outbreaks of 1866-67, 1886-87, and 1893-94 in the sugar-producing province of Tucumán, vividly illustrating the intersection of life, health, death, and politics in nineteenth-century provincial Latin America. As odd as it may sound, this is a story of progress. In terms of containing the deadly outbreaks, improving sanitary conditions, treating the patients, and burying the dead, Tucumán went from worse (1866-67) to bad (1886-87) to somehow better (1893-94). In 1866, when cholera arrived from the battlefields in Paraguay, many *tucumano* elites were rightfully alarmed. But the province lacked licensed doctors, and its governor was more interested in bickering with the municipality than stopping the scourge. When cholera reappeared in 1886, the situation had improved, but not by much. More doctors had settled in the province, and others came from outside the region to help. That did not help much.

In 1883, Robert Koch had identified the *vibrio cholera* bacterium and its way of transmission. But the doctors in Tucumán were not convinced, and they blamed the disease on the miasmas emanating from stagnant waters. Unable to deal with the putrid water, the doctors banned the poor from eating fruits and staging protracted funerals, admonished women for their unsanitary housekeeping practices, and applied medicines that had no effect against the bacterium. This was medicalization of the society at its worse. Not surprisingly, rural dwellers refused to comply. But the situation improved noticeably in 1893 when cholera made its third visit to the province. By then, Koch's findings had gained universal acceptance. The country and the region had increased the number and quality of public health officials. Meanwhile, the three levels of government had invested in infrastructure that provided hospitals and laboratories, safe drinking water, and faster transportation between the city and the countryside. The last appearance of *cholera morbus* was unremarkable.

What is interesting about this book is the fact that the author, who completed his research before COVID-19 struck, wrote it during the time of stay-home orders, mask mandates, and distance learning. Dimas recognizes that experiencing the chaos that COVID-19 exposed helped him think through the mess of the evolving Argentine reaction to cholera in the nineteenth century. In the two cases, states, doctors, and the public acted in fragmented and antagonistic ways, conditioning and shaping the medical response. This, I believe, is the most significant contribution this book makes.

Understanding, as Dimas does, the medicalization of society not as a top-down, one-way process but as an arena where different factors vie for power helps to solve a fundamental academic-ethical problem. Since the 1990s, many of us have shared the criticism that medicalization was the keystone in consolidating the modern patriarchal and racial order. Yet, we are the same people who put out signs pleading "Believe the science."

Admittedly, there is a cognitive dissonance between the two positions, but there is no reason they cannot be reconciled. The biomedical sciences need a reckoning with their past to build a fairer present, and they also need to keep churning out vaccines with the speed and efficacy they did in 2020.

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NINETEENTH-CENTURY INDIGENOUS POLITICS

We Are Not Animals: Indigenous Politics of Survival, Rebellion, and Reconstitution in Nineteenth-Century California. By Martin Rizzo-Martinez. Lincoln: University of Nebraska Press, 2022. Pp. 536. \$80.00 cloth; \$80.00 e-book. doi:10.1017/tam.2022.77

Martin Rizzo-Martinez's book is about nineteenth-century Indigenous politics and much more (3). The author seeks to write a history of Santa Cruz, California, through centering the "Indigenous experiences, politics, and defiance" of Native people in the region over the nineteenth century in relation to Spanish missions (14).

Rizzo-Martinez shows his reader through early-to-late-1800s Santa Cruz's colonial world, which featured "colonizers from throughout Mexico and the Pacific Rim, along with Mutsun-speaking Indigenous communities" (70). The author maintains that this region was much more complex than the social binary (Indians and Spaniards) missionaries sought to enforce at the time (70). Through seven chapters filled with a rich diversity of sources, Rizzo-Martinez—alongside other historians such as Ben Madley, William Bauer, and Kat Whiteley—shows how integral a study of Indigenous