



## Besieged cities: Representations of the fear of death and illnesses in the pandemic of COVID-19 and in the cartoons of the end of the nineteenth century in Brazil

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### ABSTRACT

The epidemics plagued Brazil in several periods of history, such as the end of the 19th century and had a large effect on *Revista Ilustrada*, coordinated by the Italian-Brazilian cartoonist Ângelo Agostini. The fear of illnesses and death accompanies us throughout history and generates practices and representations associated with the historical context of the time. Today, the pandemic of the covid-19 reaps thousands of lives in Brazil and in the world, and the way we appropriate the tragic reality leads us to produce representations that slip, in many cases, to scientific denialism and contribute to the fact that many lives are still lost by discourses and practices emptied of scientific foundation. Besieged, cities face the microscopic enemy with

social distancing and basic hygiene health measures, while vaccination cannot immunize the majority of the Brazilian population. Love and empathy become lenient summing up in the void left by the absence of sufficient vaccines or specific remedy against coronavirus to date, march 20, 2021. Previously closed windows are opened to provide the sight of the other. We will highlight in this article the relationship between feelings and their representative expressions related to the fear of death and illnesses in written and iconographic languages and seek to articulate them to the historical facts that served as a stage for its construction. Analyzing the practices and representations associated with public health and developing a comparative study between the epidemics of the late nineteenth century and the pandemic of the covid-19 becomes relevant to find realistic solutions that lead us safely to freedom, health and the enjoyment of community life.

**Keywords:** Covid-19, Cartoons, Representations.

### 1 INTRODUCTION

The fabric of history reminds us of the beacons that have always guided his writing: time and space. Without the context in which historical facts occur, their significance is lost in the tangle of the infinite possibilities of the transition between past and present, without adding its effective contribution to the understanding of the world in which we live. It is always necessary to situate the practices and representations in the historical time and in the geographical space in which they were erected. Chartier points out to us the need to consider the appropriations we make of reality and how they establish links between the practices and the representations we build from them when we elaborate our discourses. On the definition of Cultural History he states:

On the one hand, it is necessary to think of it as the analysis of the work of representation, that is, of the classifications and exclusions that constitute, in their radical difference, the social and conceptual configurations proper to a time or a space. (CHARTIER, 2002, p. 27)

The discursive elaboration is always permeated with symbolisms. Our fears, desires, dreams, desires, life expectations are expressed in various languages that interact with everyday life and are covered with access codes that connect with each other. Subjectivity creates interpretations of its own

that reveal the mirrors with which we reflect ourselves and the world around us. We will highlight in this article the relationship between feelings and their representative expressions related to the fear of death and diseases in the written and iconographic languages and we will try to articulate them to the historical facts that served as a stage for their construction.

Considering the beacons of the European medieval Jacques Le Goff presents the city:

The city of the Middle Ages is an enclosed space. The wall defines it. (...) A place of greed, the city aspires to security. (...) But the sick, like lepers who can no longer work, cause fear, and these shelter structures soon become structures of imprisonment, of exclusion. (LE GOFF, 1988, p. 71)

The walls were erected in medieval Europe in search of protection. A period marked by wars, especially by barbarian invasions, they seemed to constitute refuges from the menacing danger that reached Western Europe. However, they did not extend this protection to all the inhabitants even equally. Social exclusion demarcates its borders and they reflect the inequalities that also affect the spheres between disease and health, between life and death. The citadels were erected with moats, walls and thick walls to ensure that the population inside would be more protected from the external dangers that threatened them. But diseases generated the fear of the unknown that could lead to death and promoted the social exclusion of the sick. The disease within the citadel could mean the death of many people within and outside the walls.

In 2020, we saw borders closed in the face of another threat: the pandemic of the novel coronavirus, also called Covid-19, which spread around the world, taking as its starting point mainland China at the end of the year 2019. The Great Wall of China was ineffective in containing the enemy. The speed with which the virus spread continues to haunt the world's population and leads us to seek alternative forms of social interaction, especially in cities, where thousands of people live in spaces compacted by social demand. If on the one hand the search for security in gated communities demarcates the occupation of urban space in the twenty-first century, this security becomes fragile in the face of the invisible, microscopic enemy, which spares neither rich nor poor and invades public and private areas claiming thousands of lives.

In the face of the still little-known danger, the World Health Organization and health professionals are calling for social distancing as a way to stem the inexorable advance of the pandemic. This has been the most advocated measure to contain the disease associated with prophylactic measures such as basic hygiene, such as hand washing, and the use of masks. Masks previously used formally in the means of research and care in the area of health, or symbolically associated with carnival celebrations or even the need for anonymity for security agents or marginals, now take to the streets in cities as an imposition of state and municipal public authorities and health professionals in Brazil who fight to combat the virus and its tragic consequences for the population. State and municipal

governments have taken several restrictive measures for population circulation aimed at reducing the spread of the disease that reaches alarming rates in 2021 during the second pandemic wave in Brazil. Also called "lockdown", the closure of commerce, usually except for essential services such as pharmacies, supermarkets and banks, is now imposed by state and local governments in some municipalities for some periods during the pandemic, which also included the mandatory use of masks in public spaces among other restrictive measures such as the rotation of vehicles and the prohibition of access to public spaces such as bars, beaches, parks and restaurants, while the scientific denialism of the federal government, which should coordinate the actions to combat the pandemic in Brazil, leads to the advance of the evil that continues to claim thousands of lives around the world.

On March 10, 2021, in Brazil, we added 270,917 deaths from Covid-19 and, in 24 hours, 2,349 deaths from the disease, with a total of 11,205,972 confirmed cases since the beginning of the pandemic in the country, information released by the Consortium of Press Vehicles through the National Journal of Rede Globo television. These numbers are only indicative of the high mortality of respiratory infection, being only underreported indications, since the reduced availability of tests for Covid-19 led to their application only in critically ill patients, health and safety professionals at the beginning of the pandemic, and there is no way to assess the real severity of the problem. The majority of the population continues without access to diagnosis and, often, without access to care in the health service, which in several Brazilian states has already collapsed, unable to offer beds, especially ICU beds with respirators, indispensable to save lives in the event of worsening of the disease and, in some municipalities, without enough oxygen to meet the social demand, as happened in Manaus and in the interior of Pernambuco. Many sick people convalesce or die in their own homes.

Although most of those infected manage to recover, we cannot overlook the frightening number of infected and deaths from Covid-19 already achieved in Brazil, which reached the record of 2,798 in the number of deaths in 24 hours and a total of 282,400 deaths from the beginning of the pandemic until March 16, 2021. Brazil surpassed the United States of America and became the epicenter of the pandemic, especially after the discovery of a new variant of the virus in Manaus, considered more contagious than most of the genetic mutations of the virus so far identified, resembling the strains of the United Kingdom, South Africa and India.

It is essential to observe how the disease has transformed the lives of thousands of people. Images of almost deserted cities such as Paris, Madrid, Rome, Vatican City, New York and many other great capitals seem to come from the imaginary or from simple digital manipulation on a computer, when in normal times there are clusters of people circulating with the most diverse objectives. The city has resignified itself.

On the other hand, contrary to what has been said about the "fragmentary" of the city, I think that what is taken as fragmentary, in a certain discursive formation that disposes meanings about the city, is, in reality, to look, interpretation of the world, of the city in movement: the meaning, we repeat, is also the window from which one looks. And then we have both the virtual and the real. (ORLANDI, 2004, p. 29)

The movement of the gaze recreates new perceptions of the besieged and immobilized city; The reduced movement of pedestrians and vehicles is associated with the frenetic network of invisible circulation of the city that operates in the virtual-real plane, mediated by the internet, by smartphones, by the computer, in an impressive agility in the exchange of experiences. The city's senses are in transit. Remote possibilities increasingly occupy the time and space of the real fragments of life in cities terrorized by the pandemic.

Loneliness, with forced seclusion in domestic spaces, increased depression and generated the need to address this problem with the digital approach. Technology overcomes distances and brings together individuals and groups, making solidarity emerge as a new link and one of the pillars on which the population relies in search of support.

It seems to me that today, in the face of the rise of misery that the public authorities cannot contain, there is a reinvigoration of solidarity. (Duby, 1998, p. 36)

Solidarity appears as a constitutive element of a new social practice and is associated with collective survival in times of the Covid-19 pandemic. Death seems to us too close to put us in front of the dilemma: to face it, seeking alternative solutions such as affirmative community actions of relief and support for the sick isolated in their homes, or for the unemployed and components of the social category constituted by the self-employed who lost the only source of income they had with the state and municipal decrees of social isolation - either in the form of food aid or protective equipment individual such as masks and cleaning supplies to ensure the containment of the terrifying speed with which the virus spreads, especially in the so-called risk groups that encompass the age group of those who are with or above 60 years of age, those who have comorbidities such as severe hypertensive, diabetic, immunosuppressed, heart disease and people with previous respiratory diseases, or to settle down to the good fortune of not being infected and letting death take its course without doing anything to try to stop it, without caring about the lives of others. Today, local public authorities associate themselves with the civil population organized in NGOs formed by groups of volunteers, the business community, communities and specific local associations in order to promote social welfare.

These collective subjects are the ones who perpetuate the historical memory of emancipatory civilizing processes, who build indignation in the face of the reactualization of old problems and the reconfiguration of human miseries and who dream of the possibility of contributing to the production of a more just and happy society. (SCHERER-WARREN, 1999, p.11)

The awakening of today's society to the need to preserve life has us contemplated with exciting scenes of reinvented social conviviality. Health professionals are often applauded and applauded in entire cities from the interior of buildings, from the balconies of apartments, as well as they and they applaud the recovery of the sick who overcome death and return to daily family life, carrying in their luggage gratitude for the victory won and recognition for the effort of health professionals in obtaining healing. In the corridors of hospitals, wards are formed by these and these professionals of life who celebrate the medical discharges of convalescent patients who pass by receiving applause and congratulations as if they had resurfaced to a new life. The hospitalized patients are prevented from a greater conviviality with family and friends and count on God and the dedication of the teams responsible for their treatment. Thus, an affective link is created that goes beyond professional limits: it is no longer just a number that has fled death; It is a unique life that preserves itself and that develops a greater belonging to the world that surrounds it. Love and empathy become leniency in the void left by the absence of sufficient vaccines or specific coronavirus medicine to date, on June 13, 2021.

The fear of death is replaced by the substantiality of life, by the valorization of priorities such as affectivity and coexistence in borderline risk situations. Previously closed windows are opened to provide a view of the other. Music then appears as a catalyst vehicle for emotions that overcome the physical barriers established by social distancing and bring happiness from one balcony to another in Italy and other countries, breaking the devastating silence and bringing a breath of life, like a breath that resurfaces the social potential of the human being. The Lives replace large events, avoiding the crowds favorable to contagion and enter our homes to bring a new breath with music and constructive messages of health protocols, narratives of experiences and deaths that live side by side in the womb of society.

The epidemics ravaged Brazil in several periods such as the late nineteenth century and had wide repercussions in the *Revista Ilustrada*, coordinated by the Italian-Brazilian cartoonist Ângelo Agostini, which circulated in Brazil from 1876 to 1898. The fear of illness and death accompanies us throughout history and generates practices and representations associated with the historical context of the time (Fig 1).



center, reigning over Typhoid Fever and Pernicious Fever also crowned. Today, the crown is on the coronavirus that prevails over Yellow Fever, Dengue, Chikungunya and Zika.

Figure 2. AGOSTINI, Angelo. Illustrated Magazine, 1878, no. 101, p. 4. "Ella is accompanied by her cousin-sisters and ruling with all her might. Terrible reign of death."



In Fig. 3, in addition to the aforementioned skeletons representative of Yellow Fever, Pernicious Fever and Typhoid Fever, there is also a canoe guided by a skeleton that serves as a boatman that goes towards the city of São Sebastião do Rio de Janeiro, the Bilious Fever that caused panic among the population.

Figure 3. AGOSTINI, Angelo. Illustrated Magazine, 1881, no. 238, p. 4. "S. M. the yellow fever and all his Court had already left the island to make their daily journey to the city of S. Sebastian, for that nothing it happens to their councillors."



In Fig 4, a woman full of pustule with a sickle appears threatening the city of Rio de Janeiro represented by another well-dressed woman, white and with a crown on her head who asks for help at the feet of the representatives of the Hygiene Board. An appeal launched to the representatives of the Junta responsible for combating epidemics as a last resort of a population terrorized by smallpox. It is worth remembering that in 1878 we were living in the form of monarchical government and the city of Rio de Janeiro was the capital of the country, so in her representation as a female figure she appears crowned. It is interesting to note that, despite the immense black population residing in the city, she still appears as a white woman, although the *Revista Ilustrada* defended abolition and the Republic. The stigmas of racism and prejudice also derived from slavery were present. Only those who had access to literacy would read and understand the caricatures, cartoons and texts published in the periodicals and this raised the old system of social exclusion more incident on blacks and browns. In addition to slavery, the poverty, misery and lack of schooling that affected the great mass of the Brazilian population in those times led to social exclusion.

Figure 4. AGOSTINI, Angelo. Illustrated Magazine, 1878, no. 131, p. 5. "The Government and the Board of Hygiene seek to save the city from the cruel epidemic."



Social theories appear most strongly in the nineteenth century, the time of Social Darwinism and an effervescent scientific discussion, seeking answers sometimes linked to prejudices, discourses and discriminatory practices.

In general, until the second half of the nineteenth century, miasms would enjoy wide acceptance of all the ideas that would attribute the origin of epidemics – tertian fevers, yellow fever, cholera, etc. Such strange elements would usually be defined as imperceptible substances dissolved in the atmosphere, originated from the decomposition of corpses, organic elements, or even by emanations of patients. (ALMEIDA, 2018, p. 121-122)

Medical explanations for the appearance and spread of yellow fever epidemics at the Court at two different times—in the 1850s, when the disease first appeared, and in the early 1870s, when it returned after relatively prolonged absence during the 1860s—demonstrate the continuing interdependence between medical thought and political and racial ideologies. [...] In other words, in dealing with the problem of yellow fever at a particular historical moment, the public health authorities of the governments of the Second Reign invented some of the essential foundations of the so-called "whitening ideal" – that is, the configuration of a racial ideology based on the expectation of eliminating the African heritage present in Brazilian society. Such elimination would occur through the arrival of immigrants, the encouragement of miscegenation in a demographic context altered by the massive arrival of white Europeans, by inertia and also by the operation of ill-confessed specific public health policies. (CHALHOUB, 1996, p.63)

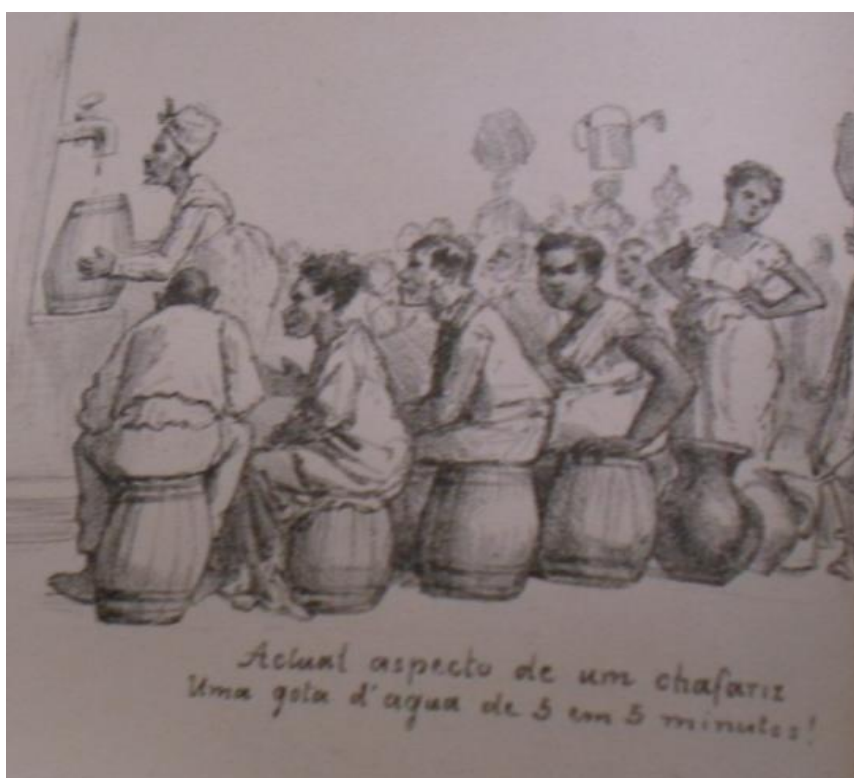
It is a well-known fact that the denunciation made in the nineteenth-century cartoon by Angelo Agostini in Fig 5, in which figures appear representing the rich with their properties squandering water and others representing the poor, who depended on fountains that did not meet the demand of the low-income population to supply themselves (Fig. 6) points to a current problem: How to meet hygiene protocols without water, which becomes a key element to prevent the spread of viruses such as corona? The absence of public policies that guarantee the equity of rights leads to social disparities that are

aggravated by the demographic increase and the rooting of the stigmas that we inherit, such as racism and social exclusion.

Figure 5. AGOSTINI, Angelo. Illustrated Magazine. 1878, no. 101, p. 4. "There is a great lack of water, and yet it is waited for by the rich who have it to spare at the expense of the poor who have none."



Figure 6. AGOSTINI, Angelo. Illustrated Magazine, 1878, no. 101, p. 4. " Current aspect of a fountain. A drop of water every 5 minutes."



On the other hand, the lack of affirmative action by the federal government to control the pandemic, following the health protocols already established by the scientific area, leads us to see chaos settling even in the first wave of the coronavirus pandemic, as occurred in Manaus, with regard to the high amount of bodies to be buried in the already crowded cemeteries. Pits were opened on a large scale very close to each other, while rows of refrigerated trucks formed with the bodies of pandemic victims awaiting burial. In Fig. 7, one sees the image of a deceased complaining that he

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#### Emerging Issues Related to the Corona

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contracted bladders with other neighbors buried next to him, given the proximity of the graves in the cemetery.

Figure 7. AGOSTINI, Angelo. Illustrated Magazine, 1878, p. 4. "People who have died of contagious diseases will be buried in a special log. This measure is perhaps due to the complaints of some deceased who have lately picked up bladders from some others, victims of the current epidemic."



On March 18, 2020, in Bergamo, Italy, we saw a convoy of army trucks pulling out hundreds of bodies to be buried outside the city. In Rio de Janeiro, in 1878, as presented in his social satire the *Revista Ilustrada* (Fig. 8), the innovation thought to deal with the high amount of bodies to be buried victims of epidemics was to propose the creation of a crematorium in the vicinity of the city and transport them by train, called a mortuary car, to the burial site. This leads us to recover the old hygienist discussion of the nineteenth century of building secular cemeteries, without the control of the brotherhoods, to avoid the spread of diseases with the practice of intramural burials in churches and their churchyards. To transport the bodies to the cremation site in Rio de Janeiro, it was thought to use mortuary trains adapting the city to the modern standards they cherished then. The railroads symbolized the modernization of Brazil in the nineteenth, a product of the Industrial Revolution. Due to the demand caused by Covid-19 in the twenty-first century, refrigerated trucks, a product of the current modernization, waited crowded with corpses for burials in the crowded cemeteries.

Figure 8. AGOSTINI, Angelo. Illustrated Magazine, 1878, no. 134, p. 4. "Ahi will be roasted. The people who, after long soffrimentos on earth during their lifetime, want nothing more with Ella after death. And so they will be reduced to ashes, which is much more Tasteful, comfortable and elegant."

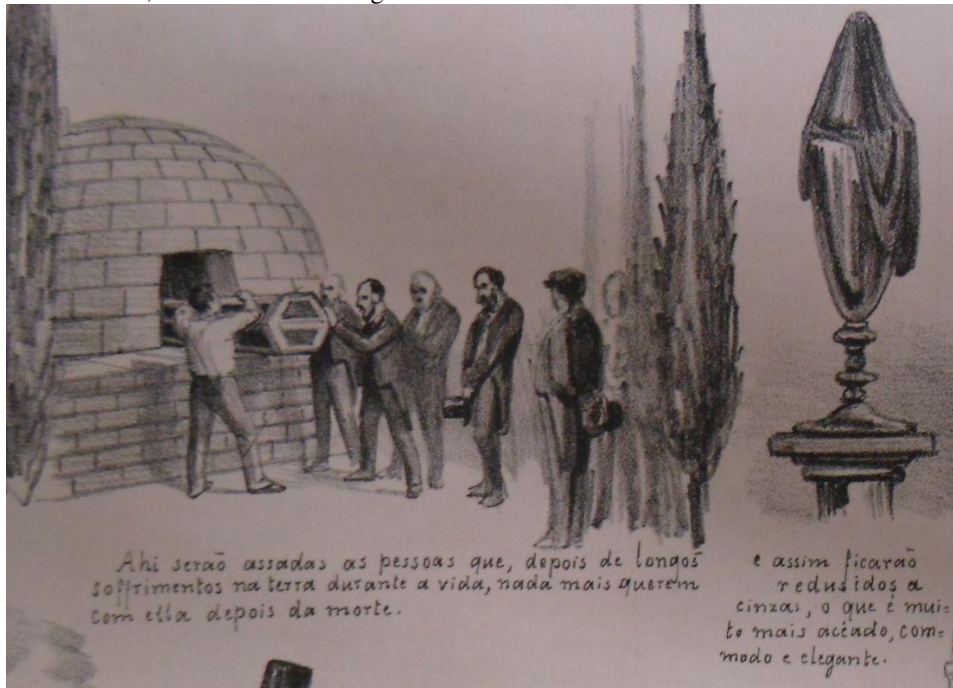


Figure 9. AGOSTINI, Angelo. Illustrated Magazine, 1878, no. 134, p. 4. "The corpses will be driven by the Rio do Ouro railroad in mortuary cars. Round trip 10 leagues only."



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This comparative study between the representations of fear of diseases and death in Covid-19 and in the cartoons of Angelo Agostini at the end of the nineteenth century allows us to evaluate by fragments daily experiences in times of pandemic and epidemics that inexorably claimed thousands of lives and left their physical and psychological sequelae in the Brazilian population.

We have learned to deal with our fears and to face illness and death itself with a greater spirit of solidarity, but we still face the barriers imposed by ignorance and disregard for the health of the population that still affect some rulers and part of the population that insists on not listening to science and the need for responsibility and respect in social coexistence. Many lives could have been preserved with respect to health protocols. The demand for public policies that support the less favored layers of the population with water supply, indispensable to the fight against diseases, electricity supply, product of the second Industrial Revolution in the nineteenth century, education and health, which should be priorities in any government, become urgent concerns so that we can tread the path of social welfare together and together, thus ensuring the construction of a society guided by respect for human rights and collective accessibility to happiness.

Today, June 19, 2021, we have reached a terrifying level of 500,022 deaths (GLOBO, 2021) since the beginning of the pandemic in Brazil in 2020. We have already lost more than half a million lives in Brazil. Vaccination is being expanded and new vaccines appear in the Brazilian scenario to give us new breath to continue in the fight for survival and for the experience of better days.

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