

August 10, 2026

Dear Columbia University Seminar on Early American History and Culture Participants:

Thank you for taking the time to read this inchoate draft of an article manuscript titled, “Judith Burt and Floralimel Clark: Free Black Women Nurses Working in Jamaica, 1750-1785.” Enclosed you will find the abstract for the manuscript and my first full draft of the manuscript. Please do not cite or circulate these materials without my permission.

I began conceiving of this article after a 2018 research trip to Jamaica, when the Jamaican Archives and Records Department was fortunately open. I returned to it for a conference paper in 2022, when I first began putting down words on the page. I returned to it again this year in the context of invitations from nurses to speak about the history of nursing in the early Americas for the 250th in the U.S. Now, as a member of a working group about the history of nursing in the early Americas, I have begun to devote more attention to developing this research and conference paper into an article manuscript.

Going from conference paper to article manuscript is always challenging. The last time I received feedback on this research was at the Association of Black Women Historians conference in 2022. The panel I was a part of helped me figure out how to better center the free Black women I was researching and informed my research questions about gender, labor, and freedom. I am eager to hear your feedback about the following: 1) the structure and organization of the article 2) the concept of “interstitial freedom” (borrowed from Melanie Newton), whether it is working for me, and how to better frame and introduce it in the article 3) are there historiographical conversations that I’ve overlooked (About early American/Caribbean urban history? About gender and freedom in the era of slavery? About nursing and medical authority? Anything else?) 4) Are the images aiding my arguments or do they feel gratuitous? 5) Anything else you feel is worth changing, addressing, or elaborating on?

Again, this is a first draft, so I am very open to critiques and invitations to elaborate more or make changes. I am eager for feedback at this stage and look forward to our conversation.

Thank you for your time,

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Judith Burt and Floralimel Clark

Free Black Women Nurses Working in Jamaica, 1750-1785

Abstract

In the second half of the eighteenth century, the Kingston vestry in Jamaica agreed to pay two Black women nurses, Judith Burt and Floralimel Clark, a premium to “cure” wards of the Kingston poor house who had yaws. Through the contextualization of Burt and Clark’s healing work, this article reckons with the place of Black women’s non-reproductive medical labor in the history and historiography about race, women’s labor, and medicine in the era of slavery. The records of Burt and Clark suggest that, despite white men’s growing authority, white men’s public hegemony over tropical medical expertise was still not fully realized in the late eighteenth century. Local governments were still willing to hire and pay Black women at a premium for their “cures.” Furthermore, by considering Burt and Clark’s laboring conditions, the nature of the work that they engaged in, and the effect that the labor had on their lives as free Black women, this article elaborates on the interstitial freedoms wage-earning Black women experienced in the era of slavery.

Keywords: Black women, free women of color, Jamaica, slavery, medicine, yaws, poor house

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Elise A. Mitchell

After months of diligently treating the indigent white man, Thomas Taylor, in Kingston's poor house, Judith Burt was probably delighted to receive her compensation. In the summer of 1752, the Kingston vestry used their tax coffers to pay Burt ten shillings per week for "for her Care in Maintaining and Cureing Thomas Taylor of the Yaws."¹ Later that fall, she was paid again for continuing to heal, "Thomas Taylor and John Marony (two poor men under Cure for the Yaws)."² Her labor likely consisted of cleaning the skin lesions associated with yaws as Taylor and Marony convalesced in varying stages of nudity, changing their bed pans, preparing and serving them medicines and balms for their skin, feeding them, and laundering their sheets and clothes. Having treated Taylor and Marony for months, she would have been relieved when she completed the grueling work of "Maintaining and Cureing" them and glad to have been compensated for it.³ Perhaps she took her wages to the market to purchase linens, ribbons, or other accessories, or fruits or drinks or smokable herbs from enslaved, free, and escaped Black

The author would like to express the utmost gratitude to Kimberly Blackwin and her staff at the Jamaican Archives and Records Department for their stewardship of early Caribbean records and astute advice to examine local vestry records for evidence of early modern medicine and disease. The author also thanks Deirdre Cooper Owens for her generous comments and questions about an early draft of this paper given at the 2022 Association of Black Women Historians meeting. The author thanks Sarah Pearlman Shapiro for her insights about the forms of gendered violence wage nurses experienced in the early Americas and Meg Roberts for her insights into perceptions of early modern wage nurses in Britain and its empire. The author is grateful for the feedback from members of Columbia University's Seminar on Early American History and Culture.

¹ August 25, 1752, Kingston Vestry Minutes 1750-1752, 2/6/2, Jamaican Archives and Records Department (Hereafter JARD).

² October 4, 1752, Kingston Vestry Minutes 1752-1754, 2/6/3, JARD.

³ August 25, 1752, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

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market women in larger quantities than she could ordinarily afford.⁴ Or maybe she saved her money. Maybe she aspired to own more property, in land, livestock, or even enslaved people.⁵ Or maybe she simply hoped to use it on clothes or accessories for her outfit later that year, when coveted Christmas and New Years celebrations approached.⁶ Perhaps she helped a family member or friend by loaning them money. The income could have provided her with some relief, the ability to feed or care for herself and loved ones without the usual concern for the cost. Regardless of what she used the money for; she was unlike most other Black women healers in eighteenth-century Jamaica. Judith Burt, “a free negro Woman” and nurse at the Kingston’s poor house, was paid.⁷ This payment differentiated her from the numerous, mostly enslaved, Black women healers in her midst.

Burt was not the only woman to receive premium compensation, in addition to her regular wages, from the Kingston vestry for curing yaws. A generation later, in December 1784, the Kingston vestry ordered that Floralimel Clark (also Floratimel Clark and Floromel Clarke) a seventy-year-old free “Negroe woman” and nurse in Kingston’s poor house, be paid eleven pounds “for curing three poor children of the Yaws.”⁸ Perhaps Clark too enjoyed her extra pay, spending it on indulgences her regular wages would not allow or using it to make ends meet for herself and perhaps a family. At seventy, the work of maintaining her own home would have become more challenging. Maybe the funds went toward hiring help with laundry and cooking

⁴ Shauna J. Sweeney, “Market Marronage: Fugitive Women and the Internal Marketing System in Jamaica, 1781–1834,” *The William and Mary Quarterly* 76, no. 2 (2019): 197-222.

⁵ Erin Trahey, “Among Her Kinswomen: Legacies of Free Women of Color in Jamaica,” *The William and Mary Quarterly* 76.2 (April 2019): 257-288.

⁶ John Stewart, *An Account of Jamaica* (London: Longman, Hurst, Rees, and Orme, 1808), 262-265.

⁷ August 25, 1752, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

⁸ December 7, 1784, Kingston Vestry Minutes 1781-1788, 2/6/6, JARD; “Jamaica, Church of England Parish Register Transcripts, 1664-1880,” *FamilySearch* <https://familysearch.org/ark:/61903/1:1:VH6H-74R> (Viewed August 19, 2019; Kingston, Jamaica, Registrar General's Department, Spanish Town; FHL microfilm 1,291,763).

that she ordinarily had to do on her own. The archive does not disclose how Clark spent her extra income. It simply records that she received it. That simple fact was more than what most women of her age, gender, and race, in Jamaica were promised. She like, Judith Burt, enjoyed the privilege of a regular wage, and the promise of a premium for her expertise in “curing” yaws.

Judith Burt and Floralimel Clark’s stories show that in eighteenth-century Jamaica, Black women were entrusted with curing contagious diseases. Yet, historians of Black women in the era of slavery have often focused exclusively on Black women’s reproductive health labor, overlooking their crucial work managing contagious diseases.⁹ This article reappraises eighteenth-century Jamaican records about Black women’s yaws treatments to demonstrate how Black women’s work managing contagious diseases was a form of gendered labor that was also a crucial part of eighteenth-century Jamaica’s medical landscape. Furthermore, using informed speculation and triangulation, this article explores the many ways this labor could have affected

⁹ Most studies of Black women in the era of slavery emphasize their knowledge of reproductive health but have very little discussion of Black women’s knowledge of medicine beyond reproduction. These histories are crucial to our understanding of enslaved and free Black women’s health, medical knowledge, and lives, but they only tell part of the medical history. Lucille Mathurin Mair, *A Historical Study of Women in Jamaica, 1655-1854* (Mona: University of the West Indies Press, [1974] 2006); Marietta Morrissey, *Slave Women in the New World: Gender Stratification in the Caribbean* (Lawrence: University Press of Kansas, 1989); Barbara Bush, *Slave Women in Caribbean Society, 1650-1838* (Kingston Heinemann Caribbean, 1990); Bernard Moitt, *Women and Slavery in the French Antilles, 1635-1848* (Bloomington: Indiana University Press, 2001); Jennifer Morgan, *Laboring Women: Reproduction and Gender in New World Slavery* (Philadelphia: University of Pennsylvania Press, 2004); Katherine Paugh, *The Politics of Reproduction: Race, Medicine, and Fertility in the Age of Abolition* (New York: Oxford University Press, 2017); Sasha Turner, *Contested Bodies: Pregnancy, Childrearing, and Slavery in Jamaica* (Philadelphia: University of Pennsylvania Press, 2017); Deirdre Cooper Owens, *Medical Bondage: Race, Gender, and the Origins of American Gynecology* (Athens: University of Georgia Press, 2018). Scholarship that has referenced Black women healers work beyond reproductive body work during the era of slavery include: Sharla Fett, *Working Cures: Healing, Health and Power on Southern Slave Plantations* (Chapel Hill: University of North Carolina Press, 2002); Timothy Walker, “Sorcerers and Folk Healers: Africans and the Inquisition in Portugal (1680-1800),” *Revista Lusófona de Ciência das Religiões* 5-6 (2004): 83-98; Karol Weaver, *Medical Revolutionaries: The Enslaved Healers of Eighteenth-Century Saint Domingue* (Urbana: University of Illinois Press, 2006); Tânia Salgado Pimenta and Flávio Gomes, *Escravidão, doenças e práticas de cura no Brasil* (São Paulo: Outras Letras, 2016); Kalle Kananoja, *Healing Knowledge in Atlantic Africa: Medical Encounters, 1500–1850* (New York: Cambridge University Press, 2021); Pablo Gómez, *The Experiential Caribbean: Creating Knowledge and Healing in the Early Modern Atlantic* (Chapel Hill: University of North Carolina Press, 2017); Claire Gherini, *Slavery’s Medicine: Illness and Labor in the British Plantation Caribbean* (Charlottesville: University of Virginia Press, 2025).

Black women's experiences of freedom. For both Judith Burt and Floralimel Clark, wage work as nurses enabled them to engage in practices of freedom.¹⁰ While other free Black women of their day were conscripted to rely on white relatives, former enslavers, and sexual liaisons with white men to eke out free status in the era of slavery, Black women wage nurses were able to make their way through their own employ.¹¹ Expertise in nursing broadly, and particularly in treating yaws, enabled them to do this amid the crushing contextual realities of being a free woman of color in the era of slavery in Jamaica. Burt and Clark's histories tell us something about the exceptional practices of freedom Black women nurses were able to engage in. However, the racialized gender politics of slavery cast a long shadow on their experiences.¹²

Judith Burt and Floralimel Clark worked for wages as nurses in the Kingston poor house and received a premium for their skills treating wards with yaws, a notoriously challenging disease to treat. Yaws is a contagious tropical disease that causes painful lesions, usually on the hands and feet, and if left untreated, can cause severe joint and bone pain. The lesions, if they become open sores, can easily infect people who come into contact with them. Thus, in the eighteenth century, sufferers were often confined in small temporary huts or makeshift structures to prevent the spread.¹³ Physicians and scientists in the West have long recognized a connection

¹⁰ Jessica Marie Johnson, *Wicked Flesh: Black Women, Intimacy, and Freedom in the Atlantic World* (Philadelphia: University of Pennsylvania Press, 2020).

¹¹ Mair, *A Historical Study of Women in Jamaica*, 90-96, 272; Hilary Beckles, *Natural Rebels: A Social History of Enslaved Women in Barbados* (New Brunswick: Rutgers University Press, 1989); Marisa Fuentes, *Dispossessed Lives: Enslaved Women, Violence, and the Archive* (Philadelphia: University of Pennsylvania, 2016).

¹² Johnson, *Wicked Flesh*.

¹³ James Grainger, *An Essay on the Common West-India Diseases and the Remedies Which that Country Itself Produces* (London: Mundell and Son, and Longman and Rees, [1764] 1802), 71-77; Clement Caines, *Letters on the Cultivation of Otaheite Cane* (London: Robinson, 1801), 153-154; David Collins, *Practical Rules for the Management and Medical Treatment of Negro Slaves in the Sugar Colonies* (London: J. Bartfield, 1803), 415; Gherini, *Slavery's Medicine*, 109-110.

between yaws and syphilis and are still determining what distinguishes the two diseases. In the eighteenth century, yaws frequently affected the poor and enslaved Africans, especially children, and often carried racial and class connotations.¹⁴ Black women who worked in plantation hospitals and poor houses were frequently tasked with treating this ailment.¹⁵ Though enslaved Africans' knowledge of yaws treatments is documented in eighteenth-century historical sources and the modern historiography, some historians have argued that eighteenth-century Europeans did not fully embrace African yaws therapies.¹⁶ Burt and Clark's stories reveal that in the eighteenth century some local British government authorities did indeed embrace African yaws "cures," and perhaps African diasporic authority on yaws was more widely accepted among eighteenth-century Caribbeans than historians have previously acknowledged.

Though Black women played crucial roles as healers of yaws and other contagious flesh disorders in Jamaica and throughout the Atlantic World, their histories are underrepresented in many medical history archives and have therefore been largely overlooked in the historiography about medicine. Instead, much of the history of medicine concerning early modern Black women has centered what the historian Sasha Turner termed "reproductive body work."¹⁷ Reproductive body work includes the provision of birth control and abortions, prenatal, postnatal, and neonatal

¹⁴ Grainger, *An Essay on the Common West-India Diseases*, 71-77; Jean-Barthélemy Dazille, *Observations sur les maladies des negres* (Paris: Chez Didot, 1776), 255-261; Caines, *Letters on the Cultivation of Otaheite Cane*, 150-151; Katherine Paugh, "Yaws, Syphilis, Sexuality, and the Circulation of Medical Knowledge in the British Caribbean and the Atlantic World," *Bulletin of the History of Medicine* 88, no. 2 (2014): 225-252; Londa Schiebinger, *Secret Cures of Slaves: People, Plants, and Medicine in the Eighteenth-Century Atlantic World* (Stanford: Stanford University Press, 2017), 52-54; Rana A. Hogarth, "Race, Place, and Power in the Production of Medical Knowledge: Perspectives from the Greater Caribbean," *History Compass* 19, no. 11 (2021): 1-9; On the racialization of diseases see: Rana Hogarth, *Medicalizing Blackness: Making Racial Difference in the Atlantic World, 1780-1840* (Chapel Hill: University of North Carolina Press, 2017).

¹⁵ Paugh, "Yaws, Syphilis, Sexuality, and the Circulation of Medical Knowledge," 225-252; Sherri V. Cummings, "Rendered Useless: The Business of Slavery, a Sick African Girl, and the Law in Colonial Newport," *Slavery and Abolition* 45, no. 3 (2024): 562-580.

¹⁶ Paugh, "Yaws, Syphilis, Sexuality," 243.

¹⁷ Sasha Turner, *Contested Bodies*, 113.

care, and early childhood health management. The scholarship about the history of Black women's enslavement and reproduction has been crucial for deepening understandings of the foundations of midwifery, obstetrics, and gynecology in the Americas.¹⁸ Nevertheless, the lacuna surrounding the history of Black women healers when their work exceeded midwifery and other reproductive body work remains largely underexplored. Leaving historical questions about medical labor that exceeds reproductive health unanswered risks implying that Black women's medical knowledge and labor was confined to reproductive body work. It was not. Black women's healing expertise included extensive knowledge of how to treat contagious diseases, such as yaws. Treating yaws, in particular, was a form of gendered labor that free and enslaved Black women performed with expertise.

The extant copies of Kingston's eighteenth-century vestry minutes, a frustratingly brief account of the local history of Kingston, suggest that free Black women's yaws cures may have been mainstream. Thus, they would not have been considered part of the marginalized African diasporic spiritual and herbal healing practices, such as obeah, which has received considerable scholarly attention. Obeah referred to a nebulously defined range of herbal and spiritual healing techniques that enslaved Africans and their descendants have engaged in for generations to redress physical, mental, spiritual, and social manifestations of illness.¹⁹ Obeah was outlawed in Jamaica in 1760, with laws that threatened death or transport from the island as punishment.²⁰ It

¹⁸ Mair, *A Historical Study of Women in Jamaica*; Morrissey, *Slave Women in the New World*; Bush, *Slave Women in Caribbean Society*; Morgan, *Laboring Women*; Paugh, *The Politics of Reproduction*; Tuner, *Contested Bodies*; Cooper Owens, *Medical Bondage*.

¹⁹ Jerome Handler and Kenneth Bilby, "On the Early Use and Origin of the Term 'Obeah' in Barbados and the Anglophone Caribbean," *Slavery and Abolition* 22.2 (August 2001), 87-100; Katharine Gerbner, *Archival Irruptions: Constructing Religion and Criminalizing Obeah in Eighteenth-Century Jamaica* (Durham: Duke University Press, 2025).

²⁰ "An Act to Remedy the Evils arising from Irregular Assemblies of Slaves," Jamaica 1760, CO 139/21, The National Archives, UK; Ebony Jones, "'[S] old to Any One Who Would Buy Them': Convict Transportation and the Intercolonial Slave Trade from Jamaica after 1807," *Journal of Global Slavery* 7.1-2 (2022), 103-129.

is possible that some enslaved Africans and their free and enslaved descendants relied on obeah practitioners for treatments in severe cases of yaws, but the line between obeah and herbalism would have been blurred for them and non-Black colonists alike. By the second half of the eighteenth century, obeah was treated with trepidation by British enslavers, who often suspected men to be practitioners.²¹ European medical practitioners increasingly mocked and dismissed obeah as mere superstition that impeded legitimate medical practice.²² The fact that Burt and Clark were paid for their medical labor and employed in the vestry's poor house as nurses suggests that their healing practices were viewed favorably by the public. While historians of the Iberian and French Atlantic have acknowledged the ways the African and African diasporic medical knowledge was incorporated and respected among locals, historians of the British Caribbean have tended to imply that African and African diasporic cures were not embraced by all.²³ Burt and Clark's public health labor managing a contagious disease among the poor, suggests that, at least in some spaces in the British Caribbean, the confluence of African, European, and American medical knowledge was quite similar to Iberian and French Atlantic spaces.

It is difficult to discern how many other Black women worked as yaws nurses (or nurses more broadly) in eighteenth-century Jamaica. Some estimates for the second half of the eighteenth century suggest some 3500 to 5900 free people of color lived on the island, versus

²¹ Diana Paton, *The Cultural Politics of Obeah: Religion, Colonialism, and Modernity in the Caribbean World* (New York: Cambridge University Press, 2015); Vincent Brown, *Tacky's Revolt: The Story of an Atlantic Slave War* (Cambridge: Harvard University Press, 2019), 138.

²² Hogarth, *Medicalizing Blackness*, 89; Kate Ramsey, "Powers of Imagination and Legal Regimes against "Obeah" in the Late Eighteenth- and Early Nineteenth-Century British Caribbean," *Osiris* 36 (2021): 46-63.

²³ Weaver, *Medical Revolutionaries*; Pablo F. Gómez, "Incommensurable Epistemologies? The Atlantic Geography of Healing in the Early Modern Caribbean," *Small Axe* 18, no. 2 (2014): 95-107; Schiebinger, *Secret Cures of Slaves*; Kananoja, *Healing Knowledge in Atlantic Africa*; Benjamin Breen, *The Age of Intoxication: Origins of the Global Drug Trade* (Philadelphia: University of Pennsylvania Press, 2019).

some 31,000 white colonists and military.²⁴ In 1800, free people of color made up roughly 2.2% of the total population of Africans and people of African descent, but were nearly a fifth of the free population.²⁵ While some registers of free people of color exist, they do not always distinguish well between those with parents of different races and those whose parents were both Black. Nevertheless, historian Lucille Mathurin Mair showed that in early nineteenth-century Kingston, Black women made up a larger proportion of the free population than mixed raced women.²⁶ However, it is difficult to determine whether this was also true in the eighteenth century due to the lack of records. Additional complications for discerning the number of free people with African ancestry in Jamaica come from the reality that not all of them were listed in registers of free people of color. Those who owned and inherited property are better represented than those who did not and had to rely on wage labor to make ends meet.²⁷ Others lived with and financially relied on their former enslavers, often persisting in a perpetual state of debt peonage that resembled slavery.²⁸ Others cultivated small plots of land and raised livestock. However, most of them were drawn to the towns, primarily Kingston, Port Royal, and St. Ann's Bay where many of them ran lodging houses and bars and performed domestic labor.²⁹ On the island of Jamaica as a whole, free women of color were a minority, numbering far, far less than the majority enslaved African population and even far less than the white minority population. The

²⁴ For a higher estimate: [Untitled] in "Papers Relative to the Statistics of Jamaica, c. 1760-1790," Additional Manuscript 12435, British Library. For a lower estimate: Mair, *A Historical Study of Women in Jamaica*, 90.

²⁵ John Garrigus, "Free Coloureds," in *The Routledge History of Slavery*, eds. Gad Heuman and Trevor Burnard (New York: Routledge, 2011), 234-247.

²⁶ Mair, *A Historical Study of Women in Jamaica*, 274.

²⁷ Trahey, "Among Her Kinswomen," 257-288.

²⁸ Thank you to Michael Becker for this insight. For examples see: St. Ann Vestry Minutes 1767-1790, 2/9/1, JARD. See also: Kamau Braithwaite, *The Development of Creole Society in Jamaica, 1770-1820* (Kingston: Ian Randle Publishers, [1971] 2005), 167-175.

²⁹ Mair, *A Historical Study of Women in Jamaica*, 278; Sheena Boa, "Urban Free Black and Coloured Women: Jamaica, 1760-1834," *Jamaican Historical Review* 18 (1993): 1-6; Trahey, "Among Her Kinswomen," 269.

gender demographics and numbers of them who performed wage work are even more challenging to assess due to a lack of consistent records. Nevertheless, Burt and Clark's histories provide a telling example - a window into the persistence and influence of African diasporic medical expertise in Jamaica and a glimpse of the texture of freedom for wage-earning Black women in urban centers in the era of slavery.³⁰

The vestry records describing Burt and Clark's work prompt more questions than answers. We know they were both free "negro" women nurses and little more beyond that. They burst into the archive and recede from view because of their labor, leaving few clues about how they became free in the first place. Enslaved Black women were occasionally bequeathed their freedom when their enslavers died, freed for disclosing other enslaved people's plots against white people, freed because of their intimate sexual or affective relationships with their enslavers, or otherwise rewarded with freedom for some service that their enslaver deemed extraordinary.³¹ Some few were born free, though this was rare in the eighteenth century. These rare instances of enslaved women gaining freedom, were utilized as examples to inspire obedience and deference among enslaved people who were not free.³² However, their freedom also muddled the fixedness of Blackness and enslavement, sometimes making it easier for enslaved people to pass as free, especially in places like Kingston. If they were previously enslaved, it is possible that Burt and Clark were familiar with free people in Kingston and had experienced moments, perhaps when they were hired out or sent on errands, that felt like

³⁰ Lara Putnam, "To Study the fFragments/Whole: Microhistory and the Atlantic World," *Journal of Social History* 39, no. 3 (2006): 615-630.

³¹ Mair, *A Historical Study of Women in Jamaica*; Gad Heuman, *Between Black and White: Race, Politics, and the Free Coloreds in Jamaica, 1792-1865* (Westport: Greenwood Press, 1981); Melanie Newton, *The Children of Africa in the Colonies: Free People of Color in Barbados in the Age of Emancipation* (Baton Rouge, Louisiana State University Press, 2008), 38; Trahey, "Among Her Kinswomen," 257-288.

³² Garrigus, "Free Coloureds," 237.

freedom, before they were manumitted. In terms of quotidian experience, there was often a fine line between what it felt like to be a free wage worker and what it felt like to be a trusted enslaved person in urban environments like Kingston, where enslaved and free Black women alike were highly mobile, and enslaved women often worked independently of their enslavers, and wage domestic and nursing work often resembled the work of the enslaved.³³

If they were previously enslaved women, Judith Burt and Floralimel Clark were utterly silenced in the archive during that period. They became more legible in freedom – findable in the archive at least. Nevertheless, the prevailing gender and racial politics in Jamaica impacted freedwomen, especially wage laboring freedwomen. The institution of slavery in Jamaica, and the wider Americas, removed the Black woman from the normative category of womanhood (which was defined by whiteness) and relegated her to the brute category of enslaved laborer, producer of slaves, and a degraded object violation and whim.³⁴ The institution of slavery cast Black women as beyond the normative gendered and racialized categories of human subjectivity.³⁵ Many freed Black women nonetheless clawed at the entrance to these categories through associations with white people and approximating the status of white enslavers by participating in slavery, inheriting property, and engaging in modicums of political

³³ Newton, *The Children of Africa in the Colonies*, 40-42; Fuentes, *Dispossessed Lives*, 13-45; Sweeney, "Market Marronage," 197-222.

³⁴ Hortense J. Spillers, "Mama's Baby, Papa's Maybe: An American Grammar Book," *Diacritics* 17, no. 2 (1987): 65-81; Morgan, *Laboring Women*; Saidiya Hartman, "Venus in Two Acts," *Small Axe*, no. 26 (June 2008): 1-14; Fuentes, *Dispossessed Lives*; Heather V. Vermeulen, "Thomas Thistlewood's Libidinal Linnaean Project: Slavery, Ecology, and Knowledge Production," *Small Axe* 22, no. 1 (2018): 18-38.

³⁵ Spillers, "Mama's Baby, Papa's Maybe," 65-81; Sylvia Wynter, "Unsettling the Coloniality of Being/Power/Truth/Freedom: Towards the Human, After Man, Its Overrepresentation—An Argument," *CR: The New Centennial Review* 3, no. 3 (2003): 257-337; Alexander Weheliye, *Habeas Viscus: Racializing Assemblages, Biopolitics, and Black Feminist Theories of the Human* (Durham: Duke University Press, 2014); Fuentes, *Dispossessed Lives*.

participation.³⁶ Nevertheless, all Black women were marked, and free Black women wage workers – women like Burt and Clark, who did work similar to enslaved women, were not property owners, and were likely enslaved once themselves – would have struggled to escape the clutches of the ideologies and political contexts that locked them into a kind of disenfranchised, interstitial freedom, bereft of many of the privileges propertyed and/or white free subjects enjoyed.³⁷

Slavery's context impacted the shape of free Black women wage workers' freedom and of their archival traces, rendering them quite similar to that of the enslaved. Indeed, both groups are often described in terms of laboring capacity alone. Thus, the historical methods best suited for addressing their history are those scholars typically apply to studies of the enslaved women and other subaltern subjects, such as triangulation, reading against the grain, informed speculation, and Black feminist analyses of gender and power.³⁸ This article employs these methods and Black feminist analytics borrowed from studies of enslaved women, while maintaining attention to both the privileges and limitations of Burt and Clark's free status. As the Melanie Newton argued in her study of free people of color in Barbados, free people of African descent in the

³⁶ Mair, *A Historical Study of Women in Jamaica*; Newton, *The Children of Africa in the Colonies*; B.W. Higman, *Plantation Jamaica, 1750-1850: Capital and Control in a Colonial Economy* (Mona: University of the West Indies Press, 2008), 79-80; Johnson, *Wicked Flesh*; Trahey, "Among Her Kinswomen," 257-288.

³⁷ On "interstitial freedom," see: Newton, *The Children of Africa in the Colonies*, 25.

³⁸ Hartman, "Venus in Two Acts," 1-14; Fuentes, *Dispossessed Lives*; Sasha Turner, "The Nameless and the Forgotten: Maternal Grief, Sacred Protection, and the Archive of Slavery," *Slavery and Abolition* 38, no. 2 (2017): 232-250; Sara E. Johnson, "'He Was a Lion, and He Would Destroy Much' A Speculative School of Revolutionary Politics," *Small Axe: A Caribbean Journal of Criticism* 23, no. 1 (2019): 195-207. Ada Ferrer, "Slavery, Freedom, and the Work of Speculation," *Small Axe: A Caribbean Journal of Criticism* 23, no. 1 (2019): 220-22; Jennifer L. Morgan, *Reckoning with Slavery: Gender, Kinship, and Capitalism in the Early Black Atlantic* (Durham: Duke University Press, 2021); Sara E. Johnson, *Encyclopédie Noire: The Making of Moreau de Saint-Méry's Intellectual World* (Williamsburg and Chapel Hill: The Omohundro Institute of Early American History and Culture and the University of North Carolina Press, 2023). Also on triangulation: Vincent Brown, *The Reaper's Garden: Death and Power in the Atlantic World* (Cambridge: Harvard University Press, 2008); Joyce Chaplin, *Subject Matter: Technology, the Body, and Science on the Anglo-American Frontier, 1500-1676* (Cambridge: Harvard University Press, 2001), 27-34.

British Caribbean simultaneously enjoyed the privileges associated with freedom and faced oppression due to the pervasiveness of racial slavery.³⁹ Their experiences of freedom lied at the interstices, somewhere in the narrow space between enfranchised liberal freedom and the crushing subjection associated with slavery. Using the examples of Judith Burt and Floralimel Clark, this article examines how free Black women's public wage work as nurses imperiled and enriched their lived experiences and how their knowledge was marginally acknowledged in the eighteenth century.

Eighteenth-century African and African descended women knew something about treating yaws. The colonial archives of the Caribbean contain a range of fleeting references to enslaved African women and men who knew how to "cure" yaws in communities and among individuals. Enslaved Africans were familiar with both yaws inoculation and topical remedies for the disease. Inoculation practices appear to have been confined to West Africa, north of the equator.⁴⁰ While, West Central Africans and West Africans alike would have likely been familiar with topical remedies, made from herbs and barks, for treating diseases that affected the flesh.⁴¹ In Jamaica, West and West Central African knowledge about how to treat yaws as well as generations of Native and African diasporic knowledge of the Jamaican herbs and barks

³⁹ Newton, *The Children of Africa in the Colonies*, 24.

⁴⁰ Eugenia W. Herbert, "Smallpox inoculation in Africa," *The Journal of African History* 16, no. 4 (1975): 539-559; Elise A. Mitchell, "The Transformation of Smallpox Inoculation in the Early Modern Atlantic World," *Past and Present* 271 Supplement 18 (2026): 312-340.

⁴¹ William J. Simon, "A Luso-African Formulary of the Late Eighteenth Century: Some Notes on Angolan Contributions to European Knowledge of Materia Medica," *Pharmacy in History* 18, no. 3 (1976): 113; José Pedro Sousa Dias, "Índice de drogas medicinais angolanas em documentos dos séculos XVI a XVIII," *Revista portuguesa de farmácia* 45, no. 4 (1995): 181; Kananoja, *Healing Knowledge in Atlantic Africa*, 42; Kalle Kananoja, "Bioprospecting and European Uses of African Natural Medicine in Early Modern Angola," *Portuguese Studies Review* 23, no. 2 (2015): 51; Barcia, *The Yellow Demon of Fever*, 178; Mitchell, "The Transformation of Smallpox Inoculation in the Early Modern Atlantic World," 312-340.

available would have all influenced how women like Judith Burt and Floralimel Clark treated yaws.

Some West Africans used inoculation to prevent and control the severity of yaws among youths. One well known account of yaws inoculation comes from an enslaved woman from the Gold Coast named Clara. The enslaver and chronicler, Bryan Edwards, described her as “a most faithful and well-disposed woman” who arrived in Jamaica in 1784.⁴² She explained that “the Natives of the Gold Coast give their children the *yaws* (a frightful disorder) *by inoculation*.” She related that they would make an incision in the thigh and put some “infectious matter” from yaws in the incision and infants would have “the disorder slightly, and recovered speedily.” This she said was preferable to getting the disorder as an adult when it would “get into the bone.”⁴³ This sort of preventative approach to contagious diseases was common in West Africa. West Africans and people of West African descent on both sides of the Atlantic were known for being skilled in inoculating against and treating smallpox in a similar fashion. Their notions that diseases could be milder through practices of deliberate inoculation in childhood predated Western Europeans’ adoptions of these practices by generations.⁴⁴

Unlike accounts and descriptions of African practitioners of smallpox inoculation, which included both men and women, knowledge and treatments for yaws appear to have circulated among women and from women to men. Clara is one well-known example. Elsewhere, even decades into the nineteenth-century, European medical professionals insinuated that yaws care was the provenance of Black women. For example, James Thomson, a protégé of the overzealous

⁴² Bryan Edwards, *The History, Civil and Commercial, of the British Colonies in the West Indies* (Dublin: Bryan Edwards, 1793) Vol. II: 62-63.

⁴³ Edwards, *The History, Civil and Commercial*, Vol. II: 63.

⁴⁴ Mitchell, “The Transformation of Smallpox Inoculation,” 312-340.

experimental physician John Queir, wrote in his manual on diseases affecting the enslaved that plantation “yaw hospitals” should be overseen by “the most trusty well-disposed woman on the property” and that all “provisions for their use placed under her care: She should assist in cooking their victuals, washing their clothes, and be herself allowed a very simple supply,” and insisted that she would be proud to work in this capacity.⁴⁵ Other popular texts also reference yaws healing as the purview of Black women.⁴⁶

Extant records demonstrate that Black women’s remedies for yaws when it broke out naturally included a range of topical remedies. As historian Claire Gherini explained African diasporic yaws “cures” typically involved treating the disease “from the outside in rather than the inside out.”⁴⁷ While West Africans may have employed inoculation as a preventative measure, West Africans and West Central Africans alike would have deployed potent topical remedies in natural cases. These remedies typically involved herbal baths and herbal decoctions. For example, James Grainger a physician and enslaver in the mid-eighteenth-century Caribbean noted, that “A variety of external applications are then recommended by the old Negroes’ but if aught is applied to the eruptions, it must not be of a repellent nature.”⁴⁸ In another example, a doctor working in Jamaica, Henry Barham, noted that some elderly enslaved Black women used an “admirable plant” called Macary Bitter or Majoe (a popular name after an elderly Black woman healer) to make “simple decoctions” that “did wonderful cures with the most stubborn diseases, as the yaws, and in venereal cases, when the person is given over as incurable by

⁴⁵ James Thomson, *A Treatise on the Diseases of Negroes as They Occur in the Island of Jamaica* (Jamaica: Alexander Aikman, 1820), 93.

⁴⁶ Examples include: Collins, *Practical Rules for the Management and Medical Treatment of Negro Slaves*; Henry Barham, *Hortus Americanus* (Kingston: Alexander Aikman, 1794), 96.

⁴⁷ Gherini, *Slavery’s Medicine*, 109.

⁴⁸ Grainger, *An Essay on the More Common West-India Diseases*, 57.

skillful physicians, because their Herculean medicines failed them.”⁴⁹ The plant was known to grow “in great plenty” in the Macarry Bay, Jamaica and near St. Jago de la Vega.⁵⁰ Other plant-based remedies for yaws included the use of *bois royale* and *bois fer* barks among the enslaved in parts of the British and French Caribbean.⁵¹ These remedies were known to have originated among the enslaved and later spread among their enslavers and local doctors. For the cases Burt and Clark treated, the poor men and children, they likely relied on these types of topical remedies, rather than inoculation since the yaws had already broken out among these people naturally.

Curative wisdom about the progress of yaws and how to bring relief to sufferers persisted among enslaved and free people of age. This would have been consistent with Floralimel Clark’s story, a hired yaws nurse in her seventies, who had grown sage about these treatments over time and likely through years of experience. Furthermore, as the examples above suggest, even white medical professionals, who vaunted themselves above enslaved nurses and midwives, sought out the expertise of elderly African and African descended healers to treat yaws. There existed a sort of informal, downplayed trust of African cures for yaws that was consistent with the Kingston vestry’s decision to hire two Black women to do the work of curing it among the infectious white poor.

Free Black women healers, including Judith Burt and Floralimel Clark, likely bartered and traded for herbal remedies along Jamaica’s bustling southern coast. Given that they were free and able to travel on their own volition, they could have easily procured these herbs from networks of enslaved and free people who foraged them to sell in markets. Additionally, though

⁴⁹ Barham, *Hortus Americanus*, 96.

⁵⁰ Barham, *Hortus Americanus*, 96.

⁵¹ Schiebinger, *Secret Cures of Slaves*, 50-64.

travel to forage alone came with its share of risks, as free women, Burt and Clark could have also foraged for these plants for themselves. Burt and Clark appear to have enjoyed the autonomy of selecting and administering their own cures without the interference of the poorhouse's white male doctor – who would have been trained to use mercurial concoctions before local herbs and barks.⁵²

The eighteenth century was a time when medicine was professionalizing and masculinizing in Jamaica and throughout the British empire. The historian Sasha Turner has explained how in the second half of the eighteenth century, British medical practitioners increasingly wrested authority over reproductive treatments and childbirth from enslaved women.⁵³ European male doctors were increasingly a fixture on plantations throughout the Jamaica and the wider British Caribbean in the second half of the eighteenth century.⁵⁴ While the historiography has aptly demonstrated how enslaved people continued to contest European medical authority on plantations, it must also be acknowledged that these contests stretched to urban thoroughfares too. Indeed, in this same period, urban vestry members in Kingston trusted two Black women to do the drudgery and administer the “cure” to yaws in the bustling port. This suggests that white male hegemony over medical expertise was, at least in practice, still an incomplete project in urban centers.

⁵² The use of mercurial medicines for yaws was widespread among Europeans in the eighteenth century: Grainger, *An Essay on the Common West-India Diseases*, 71-77; Barham, *Hortus Americanus*, 96; Schiebinger, *Secret Cures of Slaves*, 50-64; Gherini, *Slavery's Medicine*, 128.

⁵³ Turner, *Contested Bodies*.

⁵⁴ Richard Sheridan, *Doctors and Slaves: A Medical and Demographic History of Slavery in the British West Indies, 1680-1834* (New York: Cambridge University Press, [1985] 2009); Gherini, *Slavery's Medicine*.

By the mid-eighteenth century, the Kingston poor house had become a multi-imperial space as much as it was a local colonial one. The poor house where, Judith Burt and Floralimel Clark worked, reflected the margins of Kingston's society. Kingston was a Caribbean throughfare for the inter-imperial slave trade and trade in goods as well as an increasingly cosmopolitan port in the eighteenth century.⁵⁵ The Kingston poor house was a last-ditch resort for the, overwhelmingly male, poor, deserters, orphan children, and other wards of the vestry. The house, also referred to as a "hospital," was often in disarray – vestrymen noted the need for "maintenance" and repairs to the doors, shutters, and windows, white washing the walls, among other things needed to put it in "a proper Condition" on several occasions.⁵⁶ Poor and ailing sailors and families from other parishes often found themselves at the Kingston poor house door because Kingston was "the principall Mart of the Island."⁵⁷ Other Jamaican parishes frequently sent their poor and ailing wards to Kingston's poor house, much to the vestry's annoyance. For example, in 1749, the Kingston vestrymen observed that out of 139 infirm in their poor house only eight people were "properly intituled to Belief as regular Inhabitants or by being Born in the parish the rest Being persons which have been sent up from the different parishes of the Island when disabled by Sickness or other ways to Work in the Plantations they belonged to or else which indeed are the great number are Seafaring people from Vessells which belong to the Island or others which arrive from Guiney and the different parts of Europe to this Town."⁵⁸ The

⁵⁵ Colin G. Clarke, *Kingston, Jamaica: Urban Development and Social Change, 1692–1962*, (Kingston: Ian Randle, 2006); Gregory O'Malley, *Final Passages: The Intercolonial Slave Trade of British America, 1619-1807* (Williamsburg and Chapel Hill: The Omohundro Institute of Early American History and Culture and the University of North Carolina Press, 2014); Trevor Burnard, "Towns in Plantation Societies in Eighteenth-Century British America," *Early American Studies* 15, no. 4 (2017): 835-859.

⁵⁶ January 25, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD; March 25, 1751, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD; November 28, 1786, Kingston Vestry Minutes, 1781-1787, 2/6/6, JARD.

⁵⁷ October 17, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

⁵⁸ October 17, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

specific reference to ships arriving from “Guiney” referred to the health consequences of the slave trade on crew morbidity and mortality.⁵⁹ The vestry paid salaries to “3 negro Women as Nurses and Cooks” that year.⁶⁰ Three Black women alone nursed and cooked for 139 wards. This meant that each of them cared for nearly fifty people, mostly men, in various states of ill physical and mental health at a time.

The presence of people, especially sailors hailing from beyond Kingston was a constant issue at the poor house. In January 1750, the vestry recorded “that the Almes House of this parish for some Considerable time past has been under bad Regulations and made use of as an Hospital for Sailors unlawfully discharg'd Sick from Plantations in other parishes and for other divers Idle persons & Vagabonds though of able bodys who loiter and refuse to Work for reasonable Wages in the several places where they resided and not for the poor of the parish the intended use thereof there being only at this time out of Nineteen persons two [were] of the poor of the parish.”⁶¹ In January 1750 the vestry ordered, “That no person except the actual poor of this parish be sent to the parish house without an order of Vestry according to law and that Joseph Harris or any other person that may have the care of said house hereafter receive no other person whatsoever into said house but in that manner.”⁶² Most of the infirm were sailors, including Andrew Shornton a sailor from a ship in St. Ann and William Keys a sailor from Curaçao.⁶³ Nevertheless, these orders and complaints did little to stop the flow of sickly indigents to

⁵⁹ Philip Curtin, “Epidemiology and the Slave Trade,” *Political Science Quarterly* 83.2 (1968): 190-216; Emma Christopher, *Slave Ship Sailors and their Captive Cargoes, 1730-1807* (New York: Cambridge University Press, 2006); Mark Harrison, *Medicine in an Age of Commerce and Empire: Britain and its Tropical Colonies, 1660-1830* (New York: Oxford University Press, 2010).

⁶⁰ October 17, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

⁶¹ January 25, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

⁶² January 25, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

⁶³ January 25, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

Kingston's poor house. For example, in 1782, the St. Ann's vestry reported that they would pay maintenance costs for a poor ward, William Morgan, until he was sent to Kingston's poor house.⁶⁴ The Kingston vestry continued to pay Black women nurses' wages to ensure that the local and regional population of free poor people's health needs were addressed, maintaining the public health and order of the broader residential and merchant community around the bustling port of Kingston.

Burt and Clark's labor as nurses would have included all manner of bodily care for the wards, who appeared in various stages of undress before them. Some records from the period indicate that yaws "breaks out in every part of the body, but chiefly about the hips and privities."⁶⁵ Thus, they would have been exposed to men and children's pelvises and genitals in the process of treating them. They were required to provide intimate care. They would have washed their wounds, handled bodily fluids – including emptying bed pans, dealing with vomit, sweat, and other excrement, fed and administered medicines to them, and handled their filthy clothing and bedsheets, possibly laundering them as well. The free status of these Black women nurses would not have exempted them from the gendered and racial hierarchy in Jamaica. These free Black nurses typically served white wards, who undoubtedly treated these nursing women as subordinates because of their race and status. It is difficult to imagine that the prevailing racist and sexist culture associated with both slavery and the slave trade did not affect how wards treated these nurses, after all many of them were previously seamen on slave ships and overseers on plantations.

⁶⁴ September 28, 1782, St. Ann Vestry Minutes 1767-1790, 2/9/1, JARD.

⁶⁵ Grainger, *An Essay on the More Common West-India Diseases*, 55; See also Henry Meredith, *An Account of the Gold Coast of Africa* (London: Longman, Hurst, Rees, Orme, and Brown, 1812), 236.

Black women's nursing labors in eighteenth-century British Caribbean were closely associated with subordination, denigration, servitude, and the presumption of nursing women's sexual availability. In the cartoon of "Johnny New-Come in the Island of Jamaica" depicts the popular eighteenth-century fictional character Johnny New-Come, a newly arrived Briton in Jamaica. He arrives in Jamaica and falls ill and is immediately attended at bedside by a Black woman with a pronounced bosom and a little girl. He later dances with the same Black woman in one panel before falling ill again with the "Yellow Claw of Febris." The same woman is then shown attending him at his bedside in several panels before crying over his dead body, implying subtly that their relationship after the dance had progressed with a degree of intimacy.



Figure 1. William Holland, "Johnny New-come in the Island of Jamaica" (1800). Courtesy of the John Carter Brown Library at Brown University.

Black women who nursed in the Caribbean like their white counterparts in North America and Britain were represented as blurring the lines between the intimate body work of nursing and sexual liaisons. In Britain and the early British American colonies, elites closely associated women's wage work as nurses with sex work and sexual availability.⁶⁶ Such associations were even more pronounced in the Caribbean, where the majority of this wage labor

⁶⁶ Kathleen Brown, *Foul Bodies: Cleanliness in Early America* (New Haven: Yale University Press, 2009), 31; Susan Brandt, *Women Healers: Gender, Authority, and Medicine in Early Philadelphia*. University of Pennsylvania Press, 2022, 147; Meg Roberts, "Caregiving, Crisis, and Coercion in the American Revolutionary War," Ph.D.diss., (Cambridge University, 2024).

was performed by free Black women, whose status, gender, and race were always already associated with tropes of hypersexuality and temptation.⁶⁷

More explicit images linking Black women's domestic and care work to sexual availability appear in other late eighteenth-century satirical images. These images were produced primarily for metropolitan English audiences to mock the lifestyles of Europeans in the Caribbean.⁶⁸ However, these images also socialized audiences to Caribbean mores and primed them with knowledge of the stereotypes about Black women, specifically their reputedly pernicious and grotesque lasciviousness. The two satires below exemplify this. The enslaved women who worked in white men's homes are shown as objects of grotesque sexual desire and sexually available to white men. Both late eighteenth-century and early nineteenth-century satires employ suggestive visual motifs of caricatured Black women with large, exposed breasts, in beds where white men could easily access their bodies – either sinisterly while they were sleeping or by happenstance, before awakening in shock and disgust at what they had done. These images implied that Black women engaged in domestic work and care work were always already sexually available to white men. Black women poor house nurses, whose clothes were likely rumpled, wet, and dirtied from the grueling care and domestic work they performed,

⁶⁷ Morgan, *Laboring Women*; Fuentes, *Dispossessed Lives*.

⁶⁸ Kay Dian Kriz, *Slavery, Sugar, and the Culture of Refinement: Picturing the British West Indies 1700-1840* (New Haven: Yale University Press, 2008), 71-117; Temi Odumosu, *Black Jokes White Humour: Africans in English Caricature 1769-1819* (London: Harvey Miller Publishers, 2017).

would have been associated with these caricatures. These images in concert with texts from the period linked both free and enslaved Black women care workers with sexual availability.



Figure 2. Richard Newton and William Holland, "What a Nice Bit!" (1796). Courtesy of the British Museum.



Figure 3. Isaac Cruikshank, "A Morning Surprise," (1807). Courtesy of the British Museum.

Furthermore, textual descriptions of free women of color from the eighteenth and early nineteenth centuries described them primarily as “mistresses of white men.” For example, John Stewart wrote about free women of color during his time in eighteenth-century Jamaica: “A female of colour thinks it more genteel and reputable to be the kept mistress of a white man, if he is in opulent circumstances, and can afford to indulge her taste for finery and parade, than to be united in wedlock with a respectable individual of her own class.”⁶⁹ He went on to describe those

⁶⁹ Stewart, *An Account of Jamaica* (London: Longman, Hurst, Rees, and Orme, 1808), 297.

who did marry within their race as regretting having “tied the noose of matrimony to one of her own description” because they were “obliged to toil from morning to night in dirty drudging occupations,” likely a reference to wage work as nurses, cooks, and laundresses.⁷⁰ The implications of his descriptions reflected the sentiments of white men of his time, that Black women were possessed of a strong desire to enter into sexual and romantic relations with white men to escape the drudgery of wage work and enjoy materialistic pursuits. Such “illicit homage to her charms” temptations of the flesh of free women of color were known among Stewart’s ilk to lead white men to “forsake his wife and abandon his children to hold dalliance in her more alluring company!”⁷¹ Other contemporary enslavers and chroniclers, such as Edward Long framed white men’s sexual and romantic liaisons with “Negresses and Mulattas, free or slaves” as “vice” and temptation leading them to become “loose to every kind of sensual delight.”⁷² Black women wet nurses, whether free or enslaved, were closely associated with hypersexuality and prostitution. Edward Long wrote that “there is scarcely one of these nurses who is not a common prostitute, or at least who has not commerce with more than one man; or who has not some latent taint of the venereal distemper.”⁷³ Free women of African descent who were engaged in care work were framed as wanton temptresses, angling for white men’s wealth above all else.

Other Johnny New-Come cartoons, such as the “Johnny Newcome in Love in the West Indies” series, reveal implicit linkages between Black women care workers, freedom, and hypersexual availability. Upon arrival in Jamaica, New-come is immediately “smitten with Mimbo Wampo,” a caricature of an enslaved African woman. In the next panel, he is shown

⁷⁰ Stewart, *An Account of Jamaica*, 297.

⁷¹ Stewart, *An Account of Jamaica*, 297.

⁷² Edward Long, *The History of Jamaica* (London: T. Lowndes, 1774), Vol. II: 328.

⁷³ Long, *The History of Jamaica*, Vol. II: 277.

“Delicately delivering his Love to the amiable Mimbo Wampo, while she is picking his Chegoes.” The work of “picking” “Chegoes” was a form of care work and nursing labor that was typically foisted upon enslaved Black women in the Caribbean. Subsequent panels show New-come asking for advice from Old Mumbo Jumbo, the “Oby Man,” whose medical expertise is mocked and denigrated in the image of his vessel of “Feathers, Grave Dirt, Egg Shells, &c.” New-come ultimately brings Mimbo Wampo into his “harem” and has nine children with her. Bodily care work, especially Black women’s work in this arena, was linked with the presumption of their intimate company, sexual and romantic availability, and hypersexuality and hyperfertility.



Figure 4. William Holland, “Johnny Newcome in love in the West Indies,” (1808). Courtesy of the British Museum.

Furthermore, the imagery and descriptions of the children in this cartoon reveal the sexual stigma that freedom carried for Black women. Mimbo Wampo goes from being dressed in little jewelry and serving Newcome, to images of her in pronounced gold earrings, bracelets, and necklaces, smoking a pipe as Johnny Newcome kneels before her. Implied in the image is a change in her status, from his enslaved woman to a free woman possessed of his wealth and his progeny. Furthermore, the progeny are described as “Toussaints” of their county, desiring of “Liberty and Equality,” implying that they were born free and making a mockery of their status.

It was in this cultural milieu, that free Black women nurses at the Kingston poor house did their work.

Though the archival record fails to contain any reference to the “negro Women” nurses’ experiences treating those, largely men, who lived on the margins of Jamaican society, contextual knowledge of the cultural landscape of Jamaica and the wider British empire, suggest that such labor was both grueling and risky. In addition to the natural perils of disease exposure, there were also those perils associated with being among the few free Black women left alone to care for dozens of sickly indigent people, mostly men, at a time. The men that women like Burt and Clark nursed were frequently seamen of the slave trade turned vagrants after either being abandoned due to illness or debility or leaving their service at their own volition (much to the chagrin of their captains). Many of the men were also impoverished laborers, who worked above or alongside enslaved people on plantations. These men would have been familiar with the amphibious culture of sexual violence against Black women on Atlantic ships and Caribbean shores. Nurses were not exempt from physical and sexual violence at the hands of patients. Throughout the British Caribbean white men perceived women of African descent, particularly free women of African descent, as brimming with lasciviousness and hypersexual subordinates available for their whims. Together this combination would have proved perilous for free Black women nurses at the Kingston poor house. Unprotected by the presence of patriarchal authority and quadruply presumed to be sexually available due to their free status, race, gender, and the stigma of women’s waged care work, nurses like Judith Burt and Floralimel Clark would have endured unwanted sexual advances and all manner of assaults.

Amid the stigma, the denigration, and the violence against free Black women waged nurses in the Kingston poor house, there remained a sentiment among the vestrymen that Black women were uniquely suited, perhaps even expert at treating yaws. It was for their apparently unique ability to “cure” it that Judith Burt and Floralimel Clark were paid from the tax coffers. Their willingness to commit public tax funds to their cures reveals their faith in their knowledge, regardless of emerging elite men’s doubts of Black women’s yaws expertise. Judith Burt and Floralimel Clark were able to take advantage of these fleeting openings for recognition of their skill as specialized healers and employment opportunities in urban Jamaica.

Burt and Clark continued to perform their grueling, and at times denigrating work because it would have enabled them a rarified economic and geographic freedom denied to most other women of African descent in Jamaica at the time. The stigma and perils of their wage work outside the home was likely balanced by the privileges associated with their incomes. Free women of color who were not married to white men and not bequeathed property from white male fathers, former enslavers, or sexual partners, often had to engage in bound labor agreements with their former enslavers for survival. While some historians have adopted the term “bondwomen” to mean solely enslaved women, doing so ignores that bound labor was also a struggle in the lives many free Black women as well. Wage work in urban centers like Kingston offered freed Black women a way out of these arrangements. Being paid a premium for specialized labor, like “curing” yaws, provided free Black women, like Burt and Clark, with a disposable income – an income they likely enjoyed.

Whether Judith Burt and Floralimel Clark were born free or formerly enslaved in a rural or urban setting, their wage work ensured that they would not have to enter into a bound labor agreement or live with the looming precarity of debt peonage. Rural, landless freed Black

women's lives frequently resembled the lives of enslaved women, sometimes locking them into the very same geographies of containment that they once endured while enslaved. The surviving vestry records from the rural parish of St. Ann reveals that rural freedwomen, frequently resided on the properties and in the households of their former enslavers.⁷⁴ Women in rural St. Ann, such as Fidelia, who was previously enslaved by the doctor Alexander Johnston, were ostensibly free in name only. Fidelia continued to live with Johnston and exchange her labor for medical treatments, housing and food.⁷⁵ By the late eighteenth century, such peonage was encouraged. Reflecting on the state of freed women in Jamaica, enslaver and chronicler William Beckford noted that elderly enslaved women who were "unable to work" for their families ought to be "made independant as to labour, but should be always dependent upon her master for protection and food."⁷⁶ This effectively presumed even freed women would be forever bound to their former enslavers, providing a nominal freedom at best. Beckford also lamented that in the eighteenth century, "A liberated slave in Jamaica [...] would be thrown out of house, ground, and personal protection; and the gallows might be at last end his dreams of liberty."⁷⁷ Wage work in Kingston, no matter how stigmatized, offered a step up from bondage and abject poverty as well as a way out of the rural and domestic ambits of former enslavers.

When paid a premium for their labor "curing" yaws, these women were likely able to enjoy the extra income. After either enduring enslavement themselves or witnessing their mothers endure enslavement, Burt and Clark likely wanted their due. In Jamaica's markets there

⁷⁴ A List of such Negroes Mulattos and Indians as have produced to the Vestry good and Sufficient Proof of their Freedom," March 1774, St. Ann's Vestry Orders, 1767-1790, JARD, Local Records, 2/9/1.

⁷⁵ Series 12, Vol. 334, Alexander Johnston, Powel Family Papers (Col. 1582), Historical Society of Pennsylvania (Hereafter HSP); Series 12, Vol. 344, Alexander Johnston, Powel Family Papers (Col. 1582), HSP.

⁷⁶ William Beckford, *Remarks Upon the Situation of Negros in Jamaica* (London: T. and J. Egerton, 1788), 25.

⁷⁷ Beckford, *Remarks Upon the Situation of Negros in Jamaica*, 96-97.

was plenty to be had. Extra provisions, such as firewood, foods, fish, metalwork, and wooden goods were all lawfully sold by enslaved and free people alike in Jamaica's markets.⁷⁸ Then there were the more luxury goods, pottery, linens and other textiles, cutlery, and jewelry, sold lawfully or thieved. Images such as the one below of the linen market in Dominica reveal the range of things enslaved and free Black people descent sold and bartered for in eighteenth-century British Caribbean markets.



Figure 5. Agostino Brunias, 1728–1796, *Linen Market, Dominica*, ca. 1780, Oil on canvas, Yale Center for British Art, Paul Mellon Collection, B1981.25.76.

⁷⁸ Sweeney, “Market Marronage,” 206.

Yuletide markets would have been particularly bustling and bountiful. British enslavers and observers remarked that enslaved and free people of color adorned and “shew themselves off to the greatest advantage, by fine clothes, and a profusion of trinkets.”⁷⁹ This was especially the case in the “towns” like Kingston, where young women dressed in bright blues and reds in competition with each other. They were described as wearing dresses “of the finest muslin, trimmed with gold or silver, and ornamented with blue or red ribbons, according to their party; and gold necklaces, earrings, and other expensive trinkets.”⁸⁰ Such finery relied on enslaved and free African and women of African descents’ labor. They were the ones who would have made these clothes and had the access to secure the “other expensive trinkets” for themselves or others. They were the ones who would have sold and bartered goods in the markets or performed wage labor that gave them the purchasing power for these precious items.

What these items allowed for was, for a moment, for enslaved and free alike, a feeling of enjoyment and a sense of enfranchised freedom regardless of their station. Historians, notably Stephanie Camp and Tamara Walker, have discussed the crucial role of self-fashioning for the enslaved in North and South American contexts.⁸¹ In the Caribbean things were no different. Fashion enabled enslaved Africans and people of African descent to enjoy their bodies and reject their exploitation as sites of domination, others’ wealth accumulation, and grueling labor. The parties and festivities they enjoyed in their time off – dancing, dressing up, competing, loving, and just being – were precious expressions of a freedom they could not access politically. For free women of color wage workers, though they possessed free status, moments of self-

⁷⁹ John Stewart, *An Account of Jamaica* (London: Longman, Hurst, Rees, and Orme, 1808), 262.

⁸⁰ Stewart, *An Account of Jamaica*, 264.

⁸¹ Stephanie M.H. Camp, *Closer to Freedom: Enslaved Women and Everyday Resistance in the Plantation South* (Chapel Hill: University of North Carolina Press), 60-92; Tamara Walker, *Exquisite Slaves: Race, Clothing, and Status in Colonial Lima* (New York: Cambridge University Press, 2017).

fashioning were similarly precious. The filthy, undignified work of tending the poor house, the stench of one's clothes – all wet and smothered in poor white men's excrement – meant that enslaved women wage workers, largely nurses, laundresses, and domestics, rarely got to experience the corporeal freedom or enjoy their fashions free status afforded free women of color who did not do waged work. For working women, as Tera Hunter has similarly argued in the North American context, enjoying one's freedom included enjoying a vibrant social life and self-fashioning when possible.⁸² Christmastime and New Years, and any other occasion for dressing up would have enabled free women wage workers to enjoy their bodies, feel clean, primped, and fashionable. The sensations they ordinarily felt, the clothing they ordinarily wore, and the indignities they ordinarily suffered would have been all too reminiscent of enslavement. Dressing up with the money they earned enabled them to feel free and see those they loved to express their freedom through dress.⁸³

Burt and Clark may have also sought to uplift their communities of kith and kin. This could have taken shape through their saving their wages to help purchase others' freedom, purchase land, or purchase enslaved people who they could hire out for additional income. Participating in the slaving economy, however brutal, was a key to economic success and self-sufficiency in eighteenth-century Jamaica and much of the Americas, often complicating and fracturing the potential for racial solidarity.⁸⁴ Networks of kith and kin relied on each other for income, loans, and inheritances, all of which was only possible through having a disposable income, typically earned on the backs of enslaved people. Burt and Clark still likely experienced

⁸² Tera W. Hunter, *To 'Joy My Freedom: Southern Black Women's Lives and Labors After the Civil War* (Cambridge: Harvard University Press, 1998).

⁸³ Walker, *Exquisite Slaves*, 43-77.

⁸⁴ Newton, *The Children of African in the Colonies*; Johnson, *Wicked Flesh*; Trahey, "Among Her Kinswomen," 257-288.

connections with enslaved Black people, whose incomes (if they had any from their provision grounds) would have been far less than their wages. These connections would have been fraught with affection, joy, competition, frustration, and all manner of affective content with other Black people who were still enslaved.⁸⁵ Where such bonds were strong, Burt and Clark may have sought to financially help their enslaved kith and kin. Spending their money on loved ones would have enabled them to solidify social bonds that were always under threat in a society where slavery was present. Tamara Walker argued that enslaved people used gifts of clothing and jewelry to nurture relationships, despite the prevailing logics of anti-kinship so pervasive in societies where enslaved people were vulnerable to being torn from their kin at their enslaver's whim.⁸⁶ For free people of color, especially wage earners, who enjoyed the privilege of greater control over maintaining kin networks, gift giving and lending items and money would have been a way to not only nurture those bonds but a manner of enjoying them. It would have been a manner of expressing one's freedom to bestow gifts upon loved ones at Christmastime, or any other time, or extend loans to ensure that they had all they needed.⁸⁷ Freedom enabled Black women to have and hold dear free families. Gift exchanges, loans, and otherwise providing for one's family with one's hard-earned wages was one way of nurturing those bonds and protecting loved ones from the predation of others.

For free women of color, wage nursing enabled them to access material and social dimensions of freedom, which would have otherwise been foreclosed to them as enslaved women, or controlled by others if they remained in the ambit of their enslavers or took white

⁸⁵ Saidiya Hartman, *Scenes of Subjection: Terror, Slavery, and Self-Making in Nineteenth-Century America* (New York: Oxford University Press, 1997), 61; Newton, *The Children of African in the Colonies*, 25, 39.

⁸⁶ Walker, *Exquisite Slaves*, 43-77.

⁸⁷ Trahey, "Among Her Kinswomen," 275-280.

male partners. For these women freedom could be material, but it was also all that was sweet. Not only the sweetness of power or possessions, but the intangible solace of a free aging woman knowing that because she was free so were her descendants, forever more - knowing that the cycle of heritable bondage had been broken in her family line and that she played a role in accomplishing that. And maybe, that was enough. Or maybe it was not enough, but it was a start on the rugged road of more collective freedoms yet to come.⁸⁸ Maybe a start was all one needed to perform the daily drudgery of wage nursing work. Maybe the discipline of hope for freedoms to come was enough to keep going and trying and grinding away.

By the end of the first half of the nineteenth century, the promise of these named and unnamed Black women healers and their cures for yaws would be disavowed in much of the British medical literature. For example, in 1839 one physician, James Maxwell, was frustrated that so few European-trained medical professionals had devoted themselves to the study of yaws. Maxwell studied yaws in Jamaica extensively. His published works frequently remarked that people of African descent, “believe that they possess better information, both of the pathology and treatment of the disease, than their white brethren.”⁸⁹ Furthermore he wrote that, “Medical practitioners in general receive very little credit from the blacks for their skill in the cure of this disease, and it is not to be wondered at, when they daily witness the distressing results of the mercurial treatment. They place more faith in the primitive treatment of their African forefathers, and however barbarous that may be, it is infinitely preferable to the practice of those who endeavour to cure yaws by the various preparations of mercury.”⁹⁰ Maxwell like many white

⁸⁸ Trahey, “Among Her Kinswomen,” 257-288.

⁸⁹ James Maxwell, *Observations on Yaws* (Edinburgh: Maclachlan, Stewart, and Company, 1839), 36

⁹⁰ Maxwell, *Observations on Yaws*, 45.

physician-authors before him described African knowledge of yaws primitive, exotic, astonishing, untutored, untrustworthy, and an otherwise marginal or unreliable foil to European-trained physicians' knowledge and practices. Nevertheless, less than a century earlier the said treatments of African foremothers were sponsored by the vestry in Jamaica's "principall mart," Kingston.⁹¹ What emerged among white people in the nineteenth century was the clear and unwavering sentiment that a white, trained physicians' expertise was required in all cases.

It should not be ignored that this sentiment arose at the very moment that Black women were freed throughout the British empire. Thus, their ability to work within the waged medical economy dramatically increased. Wresting power from them about diseases for which their expertise was once valued was a strategic move in a now increasingly competitive medical marketplace. The retrenchment of colonialism and racial hierarchies that shaped British Caribbean societies in the wake of emancipation, had an impact of healthcare.⁹² In the aftermath of British emancipation in the Caribbean, new colonial anxieties arose about the "civilization" and "welfare" of Afro-Caribbean populations, with an explicit focus on managing population health and surveilling the kinds of healing the first generations of freedpeople engaged in.⁹³ Thus, newly freed Black people found themselves navigating societies where coercion back into plantation economies and disrespected low-wage work was all too common. Nevertheless, eighteenth-century Kingston, Jamaica, and the wider British Caribbean was a time and place when all of this was still unrealized. It was a time and a place when free Black women, like

⁹¹ October 17, 1750, Kingston Vestry Minutes 1750-1752, 2/6/2, JARD.

⁹² Thomas Holt, *The Problem of Freedom: Race, Labor, and Politics in Jamaica and Britain, 1832-1938* (Baltimore: Johns Hopkins University Press, 1992); Natasha Lightfoot, *Troubling Freedom: Antigua and the Aftermath of British Emancipation* (Durham: Duke University Press, 2015).

⁹³ Diana Paton, *The Cultural Politics of Obeah: Religion, Colonialism, and Modernity in the Caribbean World* (New York: Cambridge University Press, 2015); Juanita de Barros, *Reproducing the British Caribbean: Sex, Gender, and Population Politics after Slavery* (Chapel Hill: University of North Carolina Press, 2014).

Judith Burt and Floralimel Clark, could still use waged medical labor to eke out forms of interstitial freedom, relative economic independence, and perhaps even some modicum of fleeting respectability and self-making for themselves despite the surrounding crushing realities of enslavement and colonialism. The meaningful, but uneven opportunities for freedom, in the era of slavery and British colonialism must be understood. Closely examining and contextualizing Burt and Clark enables us to see a genealogy of Black women's medical knowledge and authority beyond the scope of reproduction as well as their deft survival, despite the crushing realities of interstitial freedom amid slavery.