

From India to Brazil, with a microscope and a seat in Parliament:

the life and work of Dr. Indalêncio Froilano de Melo¹

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Indalêncio Froilano de Melo was born in Benaulin, Goa, on the 17th of May 1887. His was a traditional family of Brahmin, Catholic, and landed local aristocrats of the province of Salcete. Like many other Goan families, they had been Catholics for centuries, had Portuguese names and were at ease with official hierarchies; at the same time, they ranked highly in a social structure that still acknowledged caste status. Moreover, Indalêncio's father, Constâncio Francisco de Melo, was a lawyer, while his mother, Delfina

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Rodrigues, came from a distinguished family; her father, Raimundo Venancio Rodrigues, from the Goan province of Bardez, had been a member of the Portuguese *Cortes* (Parliament) and mayor of the city of Coimbra.²

The picture of prosperity changed with the early death of Constâncio de Melo. Young Indalêncio was 12 years old at the time, and from then on he had to work hard on many fronts. He persevered and successfully passed through medical school. His career would be productive, unique, and versatile. He became one of the most famous Goan doctors ever; he combined clinical work, research and public health; he taught medicine, attended international conferences, directed medical services and headed the medical school. He was also deeply involved in local politics; he got to be the mayor of Pangim (1938-45), and represented India in the Portuguese parliament (1945-49). He participated actively in the debates of the time and had something to say about “overseas” politics, as he envisaged a transition from imperial connections to modern-style and diverse political federation that could restore dignity to the different peoples involved in the colonial nexus. This was too much for

² Biographical notes are compiled from Pedro Joaquim Peregrino da Costa, “Médicos da Escola de Goa nos Quadros de Saúde das Colónias (1853-1942)” *Boletim do Instituto Vasco da Gama*, 57 (1943): 1-43, 58:1-66; Américo Pires de Lima, “Froilano de Mello”, *O Médico* 180 (1955); Artur de Oliveira e Silva, *Breve Contribuição da Escola de Medicina Portuguesa para o Estudo das Ciências do Ultramar* (Dissertation, Faculty of Medicine, University of Porto, 1964); Jose Collaco and Alfredo e Mello, “Professor Froilano de Mello, MD: A Short Biography of His Life and Achievements”, *Goacom Biography Series* <http://www.goacom.com/culture/biographies/froil1.html> (access 11/11/2003); Francisco Monteiro, “Froilano de Mello (1887.1955)” *Galeria de Goeses Ilustres*, 2002 http://www.supergoa.com/pt/read/news_cronica.asp?c_news=159; as well as from oral sources collected in Goa, India, and São Paulo, Brazil.

Salazar's dictatorial regime: Froilano de Melo ended up out of place in a regime that had supported part of his political career. But neither did he fit into the politicized, anti-colonial opposition sympathetic to Indian nationalism, as epitomized by Tristão da Cunha and the freedom fighters. Froilano was unique to the end of his days, which he lived in a state of unofficial exile. He moved away from Portugal and away from Goa, away from the Portuguese colonies; he spent his time at the University of São Paulo, Brazil, away from politics, close to his beloved microscopes and to the microscopic subjects of research that meant so much for medical knowledge and for the health of millions.

The study of Froilano de Melo's life and work will help us understand the ways in which people and knowledge circulated within empire, not only geographically, or socially, but between different bodies of power-knowledge, between medicine and politics, between the laboratory and public health policies, between representations and practices, and between the so-called centers and the so-called peripheries. This study will also contribute to the understanding of the complex intertwining of imperial and local politics. Although much has been said on the topic, it is still insufficient to account for Froilano's multifaceted life. He personified the many layers of power and its contradictory stances. He was both a colonial subject and a highly cosmopolitan doctor. He admired Indian nationalism and he felt at home in Portugal. He moved easily within the Portuguese colonial structure which he understood as an expanded form of nationalism that could be restored into a federation of diversities from within. In many senses he was an in-between figure that

belonged comfortably to both worlds and ended up an outsider to both of them. Also, he was agency as much as structure; he acted on his own initiative in ways that no social structure could determine, while his life, persona, and work were also the product of a long-established, tense and contradictory society.

Froilano's career started with his graduation from the Medical School of Goa in 1908. Before going on, it is worth taking a minute to reflect on the interplay of medical institutions, medical teaching, colonial values, local values, social constraints and individual choices at the time. To study medicine in Goa, as opposed to Portugal, may be interpreted as a sign of the relative difficulties that Froilano experienced as a youth: those who had the choice and support would often go directly to the Portuguese medical schools in Lisbon, Porto or Coimbra. Some, too, chose to study medicine in Bombay.

Those who attended the Medical School of Goa had to face additional difficulties in order to pursue a medical career: they had to go through further training and exams in Portugal. Without this, they were left to do secondary jobs and could only take on second-class positions – *facultativo de segunda classe* – in the colonial health services, which included the remote outposts of Mozambique, Angola, Cape Verde, Guiné, São Tomé, Macau, and Timor. If lucky, they took positions within *Estado da Índia*, which included Goa, Daman and Diu. But they could not practice in Portugal, nor take the higher places in the colonial positions.

The subalternization of the Medical School of Goa within the Portuguese colonial system occurred at two levels.

Legal and political instruments downgraded its diplomas, and thus its graduates, stating they neither qualified to practice in Portugal, nor to fill the first-class positions in the outposts of Africa and Asia, where they could only take secondary positions. Ideology racialized them according to the hierarchies crafted by empires.³ Portuguese colonial authorities used “evidence”, clearly based on prejudice, in order to denigrate Indian doctors. Official reports about the Medical School emphasized the poor quality of its curriculum, the poor performance of the students, the absence of experimental learning and laboratory work; in sum, they depicted an establishment that could not qualify for the status of higher education.⁴ Portuguese officers in charge of colonial health services depicted Indian doctors working under their supervision as inadequate and ignorant types who could not earn the respect of the patients.⁵

³ Confidential reports are much more explicit about race than are official documents, suggesting that the prevailing racism was not fully coded, leaving room for ambiguities and free expressions of prejudice. In Froilano de Melo’s obituary, his former class mate from the Medical School of Porto Americo Pires de Lima, trying to be complimentary, notes that “one could notice at the first sight an unmistakable air of race. As a matter of fact, he was of pure Brahmin caste, but perfectly Europeanized, a fine patriot.” Claiming that everybody received Froilano openly, Pires de Lima considers that maybe not every single teacher did him justice, whether due to “unspeakable racial prejudice”, or to “mistrust of a unknown migrant” (Lima, “Froilano...” (cit. n. 3)).

⁴ E.g., *Ofício*, July 11 1854, and *Ofício*, February 8 1856, from Eduardo Freitas d’Almeida, Head Physician, to Ignacio da Fonseca Benevides, President of the Navy and Overseas Health Council, Arquivo Histórico Ultramarino (Overseas Historical Archive, hereafter, AHU), rm 12, Índia, Health Services, # 1987. For a lengthier analysis and discussion see C. Bastos, “Doctors for the Empire : The Medical School of Goa and its Narratives.” *Identities* 8 (2001) : 517-548; “Medicina, império e processos locais em Goa, século XIX.” *Análise Social* 182 (2004): 99-122.

⁵ *Relatorio do serviço de saude da provincia de Moçambique, 1893*, José d’Oliveira Serrão d’Azevedo, Arquivo Histórico Ultramarino, Sala 12, maço 2817; for discussion see, C. Bastos “O Médico e o *Inhamessoro*: O

Far from being passive recipients of their subordination, Goan doctors fought back. The book *Médicos Ultramarinos*, by Dr. Sócrates da Costa, reads like an anti-discrimination manifesto.⁶ They fought for better jobs, better training, equal opportunities – or, at least, equal to those held by the Portuguese. Equality was not a universal aspiration – factions, frictions and fractures abounded, and different hierarchies co-existed. No single agenda emerges from Goan doctors’ reactions. Different things were voiced by different people at different times. Because many of the graduates ended up serving for some time in Africa, as this was one of the few career opportunities offered to them, it is interesting to analyse the ways they shaped colonial categories in a relational manner. Once hierarchized, and not placed at the top, they wanted to make sure someone else ranked below them, be it the lower castes back home or any African they met.

In 1879, for instance, the young Arthur Gama, a recent graduate of the Medical School of Goa, found himself as the sole representative of the colonial government in the

relatório do goês Arthur Ignacio da Gama em Sofala, 1879” in *A persistência da história*, ed. C. Carvalho & J. Pina-Cabral (Lisbon: Imprensa das Ciências Sociais, 2004), 91-117; “Race, medicine and the late Portuguese empire: the role of Goan colonial physicians” *Journal of Romance Studies*, 5 (2005): 23-35; “Medical Hybridisms and Social Boundaries: Aspects of Portuguese Colonialism in Africa and India in the Nineteenth Century” *Journal of Southern African Studies*, 33 (2007): 767-782.

⁶ Aleixo Justiniano Sócrates da Costa, *Os Médicos Ultramarinos: Mais um brado a favor dos facultativos formados pela Escola Médico-Cirúrgica de Nova Goa* (Lisbon: Tip. Universal, 1880). For a discussion, see also C. Bastos, “The inverted mirror: dreams of imperial glory and tales of subalternity from the Medical School of Goa.” *Etnográfica*, VI (2002): 59-76.

very remote post of Chiloane island, in Sofala, Mozambique.⁷ He wrote the official reports using the imperial “we”; he sided with the Portuguese and was unsparing in his use of words of deprecation against what he considered the primitive and savage ways of the Africans whose lives he was supposed to rule over.⁸

A few years later, in 1889, the Goa-born and Lisbon graduate doctor Rafael Pereira, heading the Health Services of *Estado da Índia* at the time, theorized at length about the role of Indian physicians as intermediaries between the Portuguese and the Africans.⁹ His rationale seemed to be that if they could not hold the same status as the Portuguese, they could come nearer to it by contributing in unique ways for the consolidation of empire.

Decades later, another Goa-born doctor and researcher, Germano Correia, used every possible opportunity, in his many papers on physical anthropology, history of medicine, or history of colonization, to make public statements against the discrimination of Goans within the Portuguese colonial system. But his protest did not really encapsulate an early anti-colonial consciousness of emancipation, and much less an egalitarian ideology. His fight could better be depicted as a personal pursuit of a group identity that could spare him from the derogatory contamination of being lumped

⁷ *Relatório da Ilha de Chiloane Capital de Sofalla*, apresentado pelo facultativo da 2.^a classe em Comissão do Quadro de saúde de Moçambique, Arthur Ignacio da Gama, 1 de Janeiro de 1879. AHU, rm 12, Health Services, Mozambique, # 1506.

⁸ See Bastos, “O médico”, “Race...”, “Medical Hybridisms...” (cit. n. 5)

⁹ *Relatório do Serviço de saúde da Índia*, October 30, 1889, by Rafael António Pereira. AHU, rm 12, # 1988.

with the natives – the generic “barefoot marahta” he so much abhorred.¹⁰ His vast work about “Luso-descendants” – a category that served the purpose of re-classifying its members as Europeans – seems like a long effort to rescue himself from the feelings of misplacement and displacement experienced as a colonial subject.¹¹

On those matters, too, Froilano was unique. He did not fight for a special status of inclusiveness within Portuguese circles. He circulated through different social spheres for most of his life, owing to personal merits; his cosmopolitanism transcended the circles of empire. He claimed loyalty to Portuguese rule while praising Indian culture. He did not feel compelled to choose between one and the other. Instead, his energies were dedicated to the more universal goals of promoting health, life and dignity.

In order to understand this doctor’s place in society one should try to grasp a closer and nuanced perception of Goa’s social stratification, which I suggest seeing as complex entanglements of dissonant – and sometimes contradictory hierarchies. Goa’s society accounted for several simultaneous hierarchies of value; and while Froilano de Melo and his peers might be de-valued in a racialized colonial order, they

¹⁰ Germano Correia, “Os Luso-descendentes de Angola: contribuição para o seu estudo antropológico” *Memória do III Congresso Colonial Nacional*. (Lisbon: Sociedade de Geografia/Tipografia Carmona, 1934), 57.

¹¹ C. Bastos, “Um luso-tropicalismo às avessas: colonialismo científico, aclimação e pureza racial em Germano Correia”, in *Fantasmata e Fantasias Imperiais no Imaginário Português Contemporâneo*, ed. M. C. Ribeiro and A. P. Ferreira (Porto: Campo das Letras, 2003), 227-253; Bastos, “Race...” (cit. n. 5).

ranked very highly in a wider system of interacting political agendas, within which the Portuguese and their politics were only one small part. This picture is drawn mostly from the analysis of primary sources, as there are, so far, only a few analytical works that cover Goa's nineteenth and early twentieth society.¹² But primary sources are rich enough to enable us to grasp the sense of disconnectedness experienced by those who were in charge of running the place. They could not run it properly, as they had to deal with obstacles that were thrown up by local political interests. This was precisely at the core of the complaints of the Portuguese placed in head positions in India. They constantly lamented their inability to implement any rules unless they matched the agendas of the local delegates. Officers seemed puzzled by those contradictions and paradoxes. Some of them seemed to despair of the difficulties, while others conformed to the state of things as they were and tried to adjust themselves accordingly. In sum, some of the local groups, or individuals, had a higher share of power than the Portuguese formally acknowledged. Although this picture may conflict with established views about empire, it should come as no surprise to those acquainted with Portuguese colonial history in a wider perspective. Connections to India had been in decline since the 17th century; at that time, trade shifted to the Atlantic. Not that *Estado da Índia* ceased to be a Portuguese colony, but fortunes, gold, trade and plantations were all to be made

¹² There have been some recent works that fill the gap and raise important questions, most notably Rochelle Pinto *Between Empires: Print and Politics in Goa* (Delhi: Oxford University Press, 2007).

in Brazil and in close tandem with the slave trade in Africa. After Brazilian independence, in 1822, there was a sort of intermezzo in Portuguese imperial politics, and only after the Berlin conference (1884-5) were there systematic attempts to build empire in Africa. In those circumstances, much of what happened in Goa, and, for that matter, in Asia, was not really at the center of Portuguese colonial interests. Yet local life went on, with its politics, its passions, its accomplishments.

The fact that a colonial institution like the Medical School of Goa was founded there in 1842, fashioned after the medical schools of Lisbon and Oporto, and created to teach western medicine to local students, should not be taken as a sign of colonial intervention but as its very opposite: regardless of the fact that the school was later appropriated by the narrative of imperial pride, primacy and longevity, its foundation should be associated with the action of local elites with the cooperation of Portuguese delegates in place, rather than linked to an action of the metropolis aimed at the promotion of western medicine in the colonies.

As a matter of fact, the school opened its doors in 1842, the year when the capital of *Estado da Índia* had moved to the city of Pangim, temporarily named Nova Goa, in the district (*Taluka*) of Ilhas. In the local historiography that developed a century later, credit is given to Mateus Moacho, the Portuguese Head Physician, together with the Count of Antas, who was then the governor and signed the local *portarias* that established the new Medical School. Dr.

Moacho is celebrated as the founder and visionary who was able to start what others had attempted and failed.¹³

And yet Mateus Moacho was only passing by. He and the Count of Antas left India the following year. We have no evidence that Moacho had a plan for the teaching of western medicine as a tool for the expansion and consolidation of colonial rule. And, indeed, there is no reference to the Medical School of Goa in Portuguese legislation until 1847.

There is an earlier reference to medical teaching in India in the 1844-45 legislation, which is taken by interpreters like Peregrino da Costa as the delayed approval of the Medical School.¹⁴ And yet in that set of laws, regulating the colonial health services and determining that colonial hospitals should provide medical training to local populations, does not differentiate India from Mozambique, Angola, and Cape Verde.¹⁵ That fact is also noted by Meneses Bragança in his 1923 overview of education in India. From his perspective, the absence of the briefest reference to the Medical School of Goa in the 1844-45 legislation regulating medical teaching in the colonies meant that the Portuguese government did not acknowledge the school. Moreover, he suggested that it had mostly resulted from “a creation of the local

¹³ Germano Correia, *História do Ensino Médico na Índia Portuguesa nos secs. XVII, XVIII e XIX* (Bastorá: Rangel, 1947); João Pacheco de Figueiredo, “Escola Médico-Cirúrgica de Goa: Esboço Histórico”. *Arquivos da Escola Médico Cirúrgica de Goa*, serie A, 33 (1960): 119-237; José Antonio Ismael Gracias, “Físicos-Móres da Índia no Seculo XIX. – Memoria historica”, *O Oriente Português XI* (1914): 255-278; for a discussion, see C. Bastos, “O ensino da medicina na Índia colonial portuguesa: fundação e primeiras décadas da Escola Médico-Cirúrgica de Nova Goa” *História, Ciência Saúde – Manguinhos*, 11 (2004): 11-39.

¹⁴ Peregrino da Costa “Médicos...” (cit. n.2)

¹⁵ See Bastos “Doctors...” (cit. n. 5), and “Fundação...” (cit. n. 13)

government which the metropolitan government had refused to subscribe". He furthermore noted that the governor Garcês Palha, who followed the Count of Antas, had honourably authorized the continuation of the establishment, in spite of Lisbon's lack of support.¹⁶

In spite of what Lisbon approved or ignored, things were happening in India on the medical teaching front, while they were not happening anywhere else in the colonies. Brazil, which had two medical schools, was no longer a colony, and people now went on with their lives without the jurisdiction of the Portuguese government. In Goa they were under that jurisdiction, but they did not seem to follow every word of it. Regardless of the (lack of) response of the Portuguese government to their initiative, Goans enrolled in the new medical school. Among them were Pedro Gonzaga Augusto de Melo and Felizardo Piedade de Quadros, from Raia, Salcete, Luís Francisco Fremiot Conceição, Francisco Xavier Lourenço, Agostinho Vicente Lourenço, and António Luís Moreira, all from Margão (Salcete), plus Joaquim Lourenço da Anunciação Piedade Araújo, from Loutolim (also Salcete), and Bernardo Wolfango da Silva, from Piedade (Ilhas). They graduated in July and August 1846, that is, before the Portuguese government even acknowledged the existence of a Medical School in Goa.

Their school was not richly endowed. They counted on existing military hospitals in Ribandar and Pangim, and used the building of the Maquineses Palace for the rooms

¹⁶ Menezes Bragança, "A Educação e Ensino", *Índia Portuguesa* 2 (1923).

that served as medical library, an anatomical dissection room, and a chemistry laboratory; they counted also on the good will of a very small number of teachers. Among them was Mateus Moacho, followed by Francisco Maria Torres, plus the army surgeons J. Frederico Teixeira Pinho and António José da Gama – who was among the first Goans ever studying abroad, on a scholarship – and by António Caetano do Rosário, who had no scholarly training and had learned medicine by working in the hospital.

And yet students persevered, got their training, their licences, and created a collective entity that gave them a qualified scholarly identity, one that for years to come would produce more and more graduates, not without getting into decades of difficulties with the Portuguese administration and, later, being re-interpreted as something that was all along planned by the Portuguese.

I suggest that, against the official historiography that developed along the twentieth century – much of which was due to the efforts of Germano Correia¹⁷ – that we should ground the Medical School of Goa in local agency, local interests, and local will to adopt, at least partially, the language, knowledge and perhaps the practices of western medicine for some purpose, be it the actual practice of medicine or merely the achievement of higher education credentials that could lead to better places in the administration.¹⁸

¹⁷ Correia, *Historia*; Figueiredo, *Escola* (cit. n. 13)

¹⁸ For a very interesting analysis of a parallel situation in Bombay – where rich Parsi merchants supported the earlier western hospitals in the 1830s – see Mridula Ramanna, *Western Medicine and Public Health in*

Froilano de Melo, too, got his training in Goa, and the remainder of his life indicates that he was seriously committed to medicine. After graduating in 1908, he continued his studies at the Medical School of Oporto, where he graduated in 1910 with the dissertation *Introdução ao estudo das febres de Goa – uma página da patologia colonial (Introduction to the study of Goa's fevers – a page on colonial pathology)*.¹⁹ He was immediately named third-class physician in the health services of India with the military rank of *alferes-médico*. He moved up fast in the medical-military hierarchy and became lieutenant in 1912, captain-major in 1914, major in 1920, lieutenant-colonel in 1924, and colonel in 1927. He got involved in public health, medical research and medical teaching of all possible types.

Already in 1911, young Froilano de Melo was part of the committee formed for the reform of public health in the colony and was also the interim director of the vaccine institute. That was the year of a bubonic plague epidemic in the harbour of Mormugão, and Froilano could show, as the official delegate to fight the epidemic, his commitment to organized public health measures. His work attracted laudatory official remarks, which were repeated in 1914 for his action in the province of Salcete. His commitment to sanitary action continued throughout his life. We can suggest that he became the ultimate biopolitician of Pangim, as one who at once governed and watched over the collective body and

Colonial Bombay, 1845-1895 (Dehli: sangam Books-Orient Longman, 2002).

¹⁹ Peregrino da Costa, "Médicos..." (cit. n. 2); Oliveira e Silva *Breve Contribuição* (cit. n. 2)

individual bodies, as well as over animal bodies and the invisible bodies that threatened them. For that matter he watched over nature as well – over the air and the waters, wells and sewage, river mouths and benches, harbours, dwellings, pavements, and constructions. Malaria was one of his early interests; in 1914 he presented his research both at the sanitary conference of Lucknow and at the first sanitary conference ever organized in Goa, promoted by himself in that same year. In that conference he presented a few papers on malaria, smallpox, vaccines, immunity, ankilostomiasis, cholera and public health. In 1917 he was lobbying for the construction of a network of canals in the city. In 1923 he coordinated field research on water wells and anopheles mosquitoes that led to anti-malarial preventive policies. Epidemic outbreaks mobilized him for immediate action, but the prevailing endemic diseases interested him too. In 1928 he created a sanatorium for Tuberculosis in Margão, and in 1932 a Leprosarium in Macasana. He directed the bacteriological institute between 1914 and 1945, and in 1938 he became the mayor of the city of Pangim. He remained in the job until 1945, when he was elected to the Portuguese parliament. As mayor he could implement public health, and biopolitics, on a wider scale; not only upon human beings, but also upon dogs (rabid dogs were slaughtered), upon trees (jacarandas and acacias from Cuba were planted), upon stones, constructions, places, and spaces.

He was, indeed, a powerful man, and one whose passion and life were driven by a strong belief in the redemptive powers of biomedicine. He never ceased studying and teaching. Already in 1920 he gained official support to pur-

sue his specialization in tropical medicine and obtained a licence to go to Lisbon, Paris, London and Berlin. In 1921, he inaugurated the course of mycology and protozoology in the medical school of Oporto, where he taught parasitology and pathology as visiting lecturer. He also pursued his studies in parasitology in Berlin.

He was in the medical faculty for most of his life. He taught a vast array of subjects at the Medical School of Goa, including General Pathology, Bacteriology and Parasitology, Descriptive and Topographic Anatomy, Physiology, Histology, *Materia medica* and Pharmacology and, for the first time, Microbiology and Tropical Pathology, which he inaugurated as early as 1913. In 1925, after returning from a series of periods of advanced training in Europe, he became director of the Medical School of Goa and held the job until 1947.

His role in the shaping and circulation of medical knowledge can be assessed by his numerous participations in major conferences, his publications, his membership in international scientific societies and, last but not least, his involvement in editorial boards of scientific journals. As early as 1912 he was the head editor of the journal *Revista de Medicina*. He was also among the founders of the *Boletim Geral de Medicina*, the *Arquivos Indo-Portugueses de Medicina e Historia Natural*, and the most renown *Arquivos da Escola Medico-Cirurgica de Nova Goa*. He published on leprosy, malaria and other topics of tropical medicine and parasitology, alongside with public health.

He was a member of several international scientific societies: the Royal Asiatic Society of Bengal, the Indian

Academy of Sciences, in India; the Société de Pathologie Exotique and Société de Biologie de Paris, in France; the Sociedade de Etnologia & Antropologia, in Oporto, and the Sociedade de Ciências Médicas and the Sociedade de Geografia de Lisboa, both in Lisbon, Portugal.

The list of medical conferences he attended as a representative of Portugal is impressive – “endless”, according to his obituary by Américo Pires de Lima, or precisely 37, according to a recent biographical note.²⁰ That included, in his mid-20s, the All India Sanitary Conference and the Third Entomological Meeting, both in Lucknow, 1914, where he lectured on the very recently formed field of medical mycology by invitation of the Viceroy. He was the delegate of Portugal in places as diverse as Lahore in 1918, Coimbra in 1925, Calcutta in 1927, Cairo in 1928, Allahabad in 1930, Algiers in 1930, Padua in 1930, Oporto in 1931, Jujuy in 1931, Bangalore in 1932, Bucharest in 1932, Lisbon in 1935, Amsterdam in 1935 and in 1938, Orense in 1935, Budapest in 1935, Lausanne in 1935, Paris in 1937, Lourenço Marques in 1938, Johannesburg in 1938, and Havana 1949. In 1950 he was invited to Petropolis by the Brazilian ministry of health, for he had lost support from the Portuguese government. Earlier, besides representing Portugal abroad, he had been part of the scientific intelligentsia that brought to life the celebratory centennial of 1940.²¹

²⁰ Pires de Lima “Froilano de Mello”; Collaco & Mello, “Professor Froilano de Mello...” (cit. n. 2)

²¹ For a thorough analysis of the scientists’ participation in the 1940s centennial celebrations, see M. Fátima Nunes “The History of Science in Portugal (1930-1940): The sphere of action of scientific community”, e-

He also served in Africa as part of his military-medical career. In 1922 he directed the Office of protozoology and mycology of the Institute of Scientific Research of Luanda, Angola, which he left in 1923 and returned to in 1925 for a conference about Tropical Medicine in Western Africa, where his work – together with that of his colleague Germano Correia – was highly appreciated and deserved the acknowledgment of the Portuguese republican government – soon to be replaced by Estado Novo.²²

A note should be made on the popularity of Froilano at the time, which led him to win the elections to represent Goa in the parliament – against the opposition of the church, who accused him of being a freemason.²³ However, those elections did not lead to a parliament, for the 1926 military coup put an end to the republican regime. It would take another twenty years before there were new elections.

Froilano's experience in Africa helped him shape the celebratory speech addressed to the alumni, faculty and authorities during the centennial celebrations of the Medical School of Goa that took place in 1942. He mentioned his brief acquaintance with the “dark continent”, and his experience of being made welcome in the places where the natives were suffering, rich and poor alike, after which he draw

Journal of Portuguese History 2 (2004) http://www.brown.edu/Departments/Portuguese_Brazilian_Studies/ejph/html

²² The Goan paper *A Índia Portuguesa* of May 23, 3004, reported the appraisal note given by the Portuguese Republican Government to Froilano de Melo and Germano Correia, both professors at the Medical School of Goa, for their valuable contributions to the Tropical Medicine conference.

²³ See discussions in *A Índia Portuguesa* 3028, Nov 14, 1925, on p.3, and *O Bharat* XI (51), March 24 1927, on p.2.

conclusions about the general appreciation of Goan doctors in the Portuguese colonies.

Knowingly or unknowingly, Froilano's voice was at that moment in tune with the Portuguese government, even if only momentarily. Finally, Goan doctors were acknowledged by the Portuguese administration, maybe less as an effect of their pleading than by the fact that there was a new agenda for the Portuguese colonial governance. Now, they were useful for symbolic and material purposes; they were tokens of diversity, of educated colonial subjects, and they could indeed be used as qualified clinical labourers in Africa. In 1942, Goan doctors could look back at their collective past and see a purpose on their African trajectories. They now saw themselves as pillars of empire, regardless of the fact that they had been so poorly treated by the Portuguese authorities all through their collective history. Such was the tone of the celebratory events of 1942.²⁴

Things had changed since the times they were fighting for acknowledgment in a colonial order that despised them. The history of the Medical School of Goa was then rewritten. The 1942 celebrations of the Medical School of Goa centennial were also a reverberation of the 1940 large colonial exhibit in Lisbon *O Mundo Português*; and they also celebrated the tricentennial of the 1640 "restoration" of independence from Spain. *Empire* equated to *Nation*.

²⁴ Escola Médico-Cirúrgica, *Comemorações Centenárias (1842-1942)* (Bastorá: Tipografia Rangel, 1955); C. Bastos "Goa em 1942: A retórica do império e as ambiguidades do nacionalismo" in *Portugal não é um país pequeno: pensar o império na pós-colonialidade*, ed. M. R. Sanches (Lisbon: Cotovia, 2007), 229-247.

Colonial institutions became central to the rhetoric of nation, and some of the pre-existing ones were given a prestige that they might not even have had in the beginning. Along those lines, the Medical School of Goa was celebrated as a pioneering institution created by the Portuguese in Asia, and Goan doctors trained there were celebrated as heroes and pioneers of Portuguese medicine in Africa.²⁵

Froilano de Melo participated to the full in those celebrations. He had been a student, faculty member, and director of the institution. He had been involved on many different fronts in the field of public health, either by promoting sanitation, fighting epidemics or implementing prevention. In many senses he was a politician while doctor and a doctor while politician. During the centennial, he was also the city's mayor and in a few years he would be elected to the parliament as deputy, and was able to fulfil his mandate between 1945 and 1949.

In the 1940s Froilano seemed well in tune with the wider political power that governed his surroundings, and he moved easily between places. In the Lisbon parliament he often presented himself as a doctor who diagnosed ailments and suggested appropriate treatments, and that included social, economic and political situations and interventions. In those terms he often spoke of his native Goa, at that time mostly referred to as simply "India", or "Portuguese India". One of the issues of concern for Goans was the fact that their social status had been lowered under Salazar's legislation,

²⁵ Escola Médico Cirúrgica, *Comemorações*

against a long established practice of granting them a special status. Informally acquainted for a long time with the higher spheres of power, and actually involved with decision making in matters concerning them, Goans did not welcome being treated as mere natives and colonial subjects.

Without showing any hostility to Salazar's government, and emphasizing his loyalty to Portugal, Froilano addressed with some objectivity the tense situation experienced in the wider India on the eve of its independence, and noted its potential to affect Goa. He also suggested that a lusophone confederation could restore the dignity aspired to by Goans without challenging the Portuguese rule.

Those ideas were not embraced by Salazar, who, in the aftermath of WW2, was heading in the opposite direction to the one of most European nations regarding democratization and decolonization. As recent scholarship has shown, only at that time was the Portuguese government about to implement some consistent colonization policies, which attracted crowds of colonists to Angola and Mozambique as late as the 1950s, 60s and early 70s!²⁶ What had been mostly a celebratory style of empire, as epitomized by the 1930s and 1940s exhibitions, was about to be replaced by a more "modern" approach to colonization; however, that occurred at a time when most European colonial empires were collapsing and giving way to other social-political formations.

Under Salazar, discussions about decolonization, confederation or colonization styles were not supposed to occur,

²⁶ Cláudia Castelo, *Passagens para África. O Povoamento de Angola e Moçambique com Naturais da Metrópole* (Porto: Afrontamento, 2007)

whether in the Parliament or in the streets. Moreover, the regime engaged in a sort of ideological engineering by adopting the doctrines of Gilberto Freyre on Portuguese colonization, at some point named lusotropicalism. Freyre was a Brazilian sociologist-anthropologist who had theorized about the benign and creative style of the Portuguese colonization – as opposed to the Northern European version – in his masterpiece about Brazilian north-eastern plantation society, *Casa Grande & Senzala*.²⁷ According to him, the Portuguese were less racist and more amiable in their interactions with colonized peoples than other European colonizers were. Invited by a minister of Salazar to elaborate further on Portuguese colonialism with an actual visit to the African and Asian colonies, Freyre engaged in such a visit in 1951-2, after which he published *Aventura & Rotina* and *Um Brasileiro em terras portuguesas*.²⁸ The former, written like a travelogue, lets us see inside his reflective mind and its many contradictions. More interesting to us is the way he recorded his main insight about lusotropicalism, and the very formulation of the term. It actually happened in Goa, during a conference at the Vasco da Gama Institute, in December 1951. Freyre was deeply impressed with what he found to be similar between exotic Goa and his Brazilian homeland. Besides the elements of the natural environment,

²⁷ Gilberto Freyre, *Casa Grande & Senzala* (Rio de Janeiro: Schmidt, 1933).

²⁸ Gilberto Freyre, *Aventura e Rotina*. (Rio de Janeiro: José Olympio, 1953); *Um brasileiro em terras portuguesas* (Rio de Janeiro: José Olympio, 1953).

there were artifacts, customs, tastes, pieces of knowledge that both places seemed to share – in sum, there was somehow a shared culture that could only relate to a common history under Portuguese influence.

It did not take long for the Portuguese official endorsement of lusotropicalism as a basis for the justification of their increasingly anachronistic colonial rule in Africa and Asia. That happened in 1961, when Freyre's *O Luso e o Trópico* was published in three languages in the context of the Henry the Navigator 5th centennial celebrations; the work provided the wording for official discourse abroad and within borders.²⁹

At that time, in the very year of *O Luso e o Trópico*, Goa had become part of the Indian Union, through a process that some refer to as liberation and others as invasion.³⁰ That year, too, the nationalist guerrilla war started in Angola. The ideological engineering that promoted lusotropical-

²⁹ Gilberto Freyre, *O Luso e o Trópico: sugestões em torno dos métodos portugueses de integração de povos autóctones e de culturas diferentes da europeia num complexo novo de civilização, o luso tropical* (Lisboa: Comissão Executiva das Comemorações do V Centenário da Morte do Infante D. Henrique, 1961); simultaneously published in French and in English as *Les Portugais et les tropiques: considérations sur les méthodes portugaises d'intégration de peuples autochtones et de cultures différentes de la culture européenne dans un nouveau complexe de civilisation, la civilisation luso-tropicale* (Lisbon, Commission Exécutive des Commémorations du V Centenaire de la Mort du Prince Henri, 1961); *The Portuguese and the Tropics: Suggestions Inspired by Portuguese Methods of Integrating Autochthonous Peoples and Cultures Differing from the European in a new, or Luso-Tropical Complex of Civilisation* (Lisbon, Executive Committee for the Commemoration of the Vth Centenary of Prince Henry the Navigator, 1961).

³⁰ Maria Manuel Stocker, *Xeque mate a Goa*. (Lisbon: Temas e Debates, 2005).

lism had no real counterpart in a society marked by tensions and conflicts that lasted for another decade, until 1974, with Portugal stubbornly engaged in African colonial wars and still considering the territories of Goa, Daman and Diu as “overseas provinces.”

To none of this was Froilano de Melo a direct witness. I am not sure whether he ever came across the word “lusotropical”. At the time Freyre supposedly first uttered it in public, at the 1951 Vasco da Gama conference in Goa, Froilano de Melo was no longer in India. He was then living in the metropolis of São Paulo, Brazil, and there he remained until his death in July 1955.

What had brought this highly valued Goan scholar to Brazil in the 1950s, where he remained apart from the emerging Portuguese colonial politics that ended up promoting lusotropicalism as an ideology but turned away from any trace of confederation of the sort Froilano advocated? Some of Froilano’s obituaries refer to a lack of appreciation by his fellow Goans in the final years of his life. Brazil appeared like a place of exile where his merits had been acknowledged; there are suggestions that he taught at the University of São Paulo, like the one who receives abroad the acknowledgement he fails to get at home.

In 2003 I searched for traces of Froilano’s period at the renowned University of São Paulo (USP). I found out that he had been working at the laboratory of the celebrated Brazilian parasitologist Samuel Pessoa. Knowing that the latter had been a member of the communist party, and that Froilano de Melo was somehow outside the appraisal of the conservative Portuguese regime in the 1950s, I wondered if

our doctor had veered significantly towards the left. Although plausible, there was not a shred of evidence about such a move – and indeed there had not been one. I came to learn about it via a direct witness, his son, whom I met by chance and thanks to the good-will of USP clerks, plus a surprisingly efficient phone directory for the city. Although Indalêncio was not on the records of USP – which means he never took a formal job there – there was one Victor Froilano Bachmann de Melo, a former professor of engineering. A long-time resident of São Paulo and a prominent civil engineer, Victor generously received me at his home and provided valuable pieces of oral history about his father and family.

I learned that the connection between Samuel Pessoa and Froilano de Melo had been more of a bench scientists' comradeship than a political one. Froilano de Melo's politics remained quite idiosyncratic and he was not truly backed by an ideological option structured by the left-wing parties. His commitment to the promotion of the dignity of Goa and rights of Goans was framed as a political project that, in his understanding, could be presented within a parliament that was almost totally supportive of the regime. He did not speak like an activist, but like any other parliamentary member. His speeches in Parliament, between 1945 and 1949, were often applauded by the other members, who were almost exclusively people in Salazar's confidence. The only time his words were not applauded was when he considered himself to blame, due to personal inaptitude, for not having fulfilled

one of his political goals in the parliament.³¹ And yet even his modest proposal for more dignity and autonomy for Goa was not accepted by Salazar's regime. He lost the support he had counted on for most of his life, the one that made him representative of Portugal at many international conferences.

Froilano de Melo was too out-of-place in Salazar's regime and, for that matter, in the growing tensions that swept through Goa and Goan loyalties throughout the 1950s. He was a cosmopolitan scientist, one that had gone around the world and could keep doing so. He actually had some of his children in Brazil – not due to ancient colonial connections, but due to their own cosmopolitanism. Froilano had himself envisaged the post-WW2 scenario of an increasing predominance of the Anglophone world, contrasting with the Francophone high culture he was so intimately acquainted with; and he encouraged his children to go for higher education in Anglophone countries. After graduating from the U.S. and Canada, some of them chose to live in the vibrant society of Brazil, where the paradigm of modernization and rapid growth encouraged the placement of highly qualified engineers and scientists. Among them was the Goan-descended, MIT-trained, Portuguese-speaker and definitely cosmopolitan Victor de Melo.

Along with projects for growth and progress, some in Brazil attempted to make up for lost time and ease the pains of social and sanitary underdevelopment. Out of this grew an

³¹ The interventions of Froilano de Melo in the Portuguese Parliament between 1945 and 1949 can be consulted in full in the online archives for *Assembleia Nacional (IV legislatura)*.

important sector of public health, social medicine, and a locally appropriate biomedical knowledge that accounted for laboratories like the one headed by Samuel Pessoa, where Froilano de Melo finished his working days. His route to São Paulo had been that of a cosmopolitan scientist that moved along some of the pathways that his own life created; as a passionate researcher in parasitology and microbiology in general, he felt at home near a microscope, and by the microscope he worked until the end.

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