

“A Plague on Your Borders:” Disease Control and Administrative Reforms in Late Eighteenth-Century Ukraine

Oksana Mykhed

Devastated and unexplored, welcoming and opened to a stranger, – these were the characteristics a traveler would give to the land and people living in late eighteenth-century Ukraine. Danylo Samoiloivych, a Ukrainian surgeon who advanced his medical career in the Russian Empire, left a similar impression of the region in his writings.¹ Exhausted and ill after his prolonged service in the army battling in the Russo-Ottoman war, Samoiloivych travelled from Moldavia to St. Petersburg in late spring – early summer of 1770. To reach the imperial capital, the physician crossed Polish and Russian-controlled territories in Ukraine right before a severe outbreak of bubonic plague in Kyiv that occurred in 1770–71. The outbreak that began in the Polish Ukraine, spread to Kyiv, and struck many towns and villages in Left-Bank Ukraine was the largest documented epidemic of the pestilence in the region in the eighteenth century. Samoiloivych’s rare eye-witness traveler’s account confirmed that the Kyiv medical tragedy was both predictable and inevitable. The physician witnessed that the plague was already terrorizing small towns and villages in Right-Bank Ukraine several months before the catastrophe in Kyiv and was among the first medical observers who connected the tragedy to unregulated population movement and lack of special medical precautions organized by the governments in the two banks of Ukraine.²

¹ The work and life of Danylo Samoiloivych [or Danila Samoiloivich in some sources] did not attract much scholarly attention. For more information about this physician of Ukrainian origin, see Danilo Samoiloivich, *Izbrannye proizvedeniia*, (Moscow, 1952) and Mykola Borodii, *Danylo Samoiloivych* (Kyiv, 1987).

² Samoiloivych praised the population of Right-Bank Ukraine for their hospitality and willingness to assist numerous foreign travelers. Ironically, these values made them exposed to the dangers of unwanted gifts of contagious diseases brought by these guests. In many cases, the plague was transmitted to local inhabitants by soldiers, merchants or other travelers whom they hosted in their homes.

While the epidemics of bubonic plague played a major role in the creation of borders and quarantining complexes that divided off eighteenth-century empires and their people,³ the traveling physician observed that no such well-organized government initiatives existed to protect Kyiv and the two Ukrainian provinces bearing the city's name. Kyiv was not only a large hub connecting the Polish-Lithuanian Commonwealth, Russian, and Ottoman empires but also the major entry point to the Russian empire in its western borderlands. In the last quarter of the eighteenth century, the city was the major place welcoming diverse newcomers to the empire, energizing its commerce, quartering soldiers dispatched to the battlegrounds of the Russo-Ottoman war and hosting imperial officials exploring an open borderland region connecting the city to the Polish Kyiv palatinate and the rest of the Commonwealth.

Ambitious and eager to expand the empire through geographic exploration and acquisition of new territories, Catherine II did not expedite physical and administrative separation of the Kyiv province in the mid-1760s. In fact, early in her reign, Catherine II intervened into Polish-Ukrainian relations and facilitated an influx of Right-Bank Ukraine's political elites, church and religious communities as well as the peasant and Cossack population into the empire. Kyiv played an important role in these integrative initiatives and became a center welcoming and hosting these newcomers to the empire. The city and the Russian Kyiv province enjoyed a semi-autonomous status and relative freedom compared to similar cities in the inner provinces of the empire. The

³ For a discussion of this topic in the broader context of European and Mediterranean histories, see Tracy, James D., (ed.) *The Rise of Merchant Empires: Long-Distance Trade in the Early Modern World, 1350–1750. Studies in Comparative Early Modern History*. (Cambridge, 1990); Mark Harrison. *Contagion: How Commerce Has Spread Disease* (New Haven and London, 2012); and *Plague and Contagion in the Islamic Mediterranean. New Histories of Disease in Ottoman Society*, edited by Nukhet Varlik (Arc Humanities, 2017). The role of epidemics of plague in the making of Russo-Ottoman borders is explored in Andrew Robarts, *Migration and Disease in the Black Sea Region: Ottoman-Russian Relations in the Late Eighteenth and Early Nineteenth Centuries* (Bloomsbury Publishing, 2017).

outbreak of the bubonic plague in Kyiv, however, changed these conditions and called for an immediate action terminating such open door policies. This paper argues that the medical disaster of 1770–71 redefined the role of the city and the province in the empire, initiated its higher subordination to the major imperial political, medical, and military institutions; and turned it into the center of the Kyiv vicegerency, an administrative unit created in accordance with the provincial reforms conducted in the empire in the mid-1770s.

Treatment of the Bubonic Plague in Ukraine

The bubonic plague was among the most challenging cataclysms influencing people's life in the Ukrainian territories in the late eighteenth century. The population living during this period compared the pestilence in its destructive effect to wars, famines, and fires; and often experienced all of these disasters in their short and dramatic lifetimes.⁴ Indeed, the plague was difficult to diagnose at the early stages, especially for inexperienced medical professionals or people without any medical training. Usually, the rural population began to express alarm when they observed several swift and mysterious deaths with buboes visible on the bodies of the deceased. However, at this progressive stage, it was often too late to stop the pestilence in a town or village. To make matters worse, local medical professionals, if there were any, often confused the plague with other diseases because some symptoms of the plague, such as high fever or body aches, were similar to influenza or gastroenteritis. The term *chuma* in Russian or *dzuma* in Polish was the first precise name attributed to the plague and used in the late eighteenth century sources.⁵ The term was

⁴ Olena Zamura, *'Velykyi Shalenets': Smert' i smertnist' v Het'manshchyni XVIII st.* (Kyiv, 2014), 64–71; Jaroslaw and Dorota Burchardt, "Morowe powietrze – krótki szkic do historii zarazy na ziemiach polskich w pierwszej polowie XVIII wieku," *Nowiny Lekarskie* 77, no. 4 (2008): 334–338.

⁵ Bubonic plague was also mentioned as *morowe powietrze* in Polish and Ukrainian sources and literature.

borrowed from Turkish and was often applied to several contagious diseases including bubonic plague. Originally, it meant a bean or a small bubo referring to the swollen lymph nodes typical for plague patients. The lymph nodes as large as a walnut or an egg were the most visible sign of the plague used to identify the disease.⁶

The plague is caused by the bacterium *Yersinia pestis* often spread by fleas and their hosts, rodents, such as rats. Since irregular cleaning of the streets and proximity to domestic animals provided opportunities for rat infestation, these factors may have affected the spread of the plague. In addition, poor hygiene and malnutrition made people susceptible to other diseases and weakened their overall health, thus decreasing their chances to survive a plague epidemic. Townspeople and villagers living in eighteenth-century Ukraine were not aware of these facts. Before the discovery of germs, there were many theories explaining the nature of the bubonic plague, its treatment and the ways the disease was transmitted from one person to another. The majority of medical professionals supported the *miasma* theory that did not define the plague as a separate disease and linked the origins of all contagious diseases to polluted air. The air condition was linked to the weather fluctuations, and the likelihood of an epidemic of plague was mistakenly attributed to the temperature and precipitation. The assumption of the most prominent physicians that the plague was spread in wet and mild winters or falls, and that hot dry summers or cold snowy winters prevented its spread did nothing but mislead officials responsible for the defense of their towns or villages from the pestilence.⁷ Upon recommendation of the mainstream group of medical professionals, the governors of Polish and Russian towns often used cannonades or prolonged

⁶ Mykola Borodii, *Danylo Samoilovych* (Kyiv, 1987), 23–24; M. K. Borodii, “Do istorii borot’by z chumoiu na Ukraïni,” *Ukraïns’kyi istorychnyi zhurnal* 5 (1984): 82–90.

⁷ Fr. Giedroyc, “Obrona od zarazy morowej w Polsce (profilaktyka moru) w wiekach ubieglych,” *Krytyka Lekarska*, 2 (1899), rok III; Jarosław Burchardt and Dorota Burchardt, “Morowe powietrze – krótki szkic do historii zarazy na ziemiach polskich w pierwszej polowie XVIII wieku,” *Nowiny Lekarskie* 77 (4: 2008): 334–338.

church bell ringing to “stress” or “heat” the air. The leading medical professionals in Warsaw, Kyiv, Cracow, Moscow or St. Petersburg believed that these measures would “blow away” the polluted air that could bring the plague to their cities. These methods absorbed the energy and resources of the governments, thus not allowing them to manage quarantine facilities, organize sanitary cordons and dispatch police units controlling the territory.⁸

Another smaller group of medical professionals supported the *contagion* theory, which argued that the plague was transmitted through physical contact with the sick. This theory was developed based on the century-long observations made by government officials, sailors and merchants who saw effectiveness of the practices of isolation and quarantining to prevent the plague. The proponents of this theory, including Samoilovych, advised that the sick be isolated from the healthy and that sanitary cordons around towns be created. In the mid-eighteenth century, this theory was relatively new. It was based on intuition and the practices traditionally accepted in European ports and towns experiencing high population density and frequent outbreaks of the plague. There was no scientific explanation justifying the practices of isolation and quarantining, and without knowing the true nature and reasons for the disease, state governments and municipal councils used a combination of methods recommended by the followers of these two theories.⁹

The practice of constructing quarantines and sanitary cordons was not followed on a regular basis in Ukraine. The most wealthy and prominent towns strived to maintain the fortification serving as a physical barrier protecting their inhabitants as well as the quarantine facilities initiating the isolation of sick and suspicious individuals from the rest of the population. However,

⁸ Jaroslaw and Dorota Burchardt, “Morowe powietrze,” 334–338.

⁹ For Samoilovych’s exposition of this theory, see his *Izbrannye proizvedeniia*, 13; Numerous examples of the usage of the two methods in anti-plague precautions by the Russian imperial government may be found in: Afanasii Shafonskii, *Opisanie morovoi iazvy, byvshei v stolichnom gorode Moskve s 1770 po 1772 god s prilozheniem vsekh dlia prekrashcheniia onoi togda ustanovlennykh uchrezhdenii* (St. Petersburg, 1787).

these protective measures were often combined with such time and funds consuming initiatives as hiring police units to burn large fires on the streets, organize collective prayers or ring all the bells to “purify” the “foul” air. To make matters worse, the police, medical professionals and the church often wasted limited manpower to engage in scapegoating, i.e., searching for specific individuals who were believed to “spoil” the air instead of identifying those who were sick and quarantining them.¹⁰

Physicians, pharmacists, nurses and other professional medical personnel were not available in most Ukrainian towns and villages. Hence, their population often relied on quacks, priests, and astrologers who replaced lacking medical professionals but had no relevant training. They were hired by the nobility or the common population and did more harm than good administrating anti-plague precautions on the local level. Some of them explained the epidemics as the wrath of God or linked the plague to the movement of stars and planets, thus supporting ignorance, superstitions and misconceptions. Fear and lack of knowledge about the disease and well-coordinated government measures during plague outbreaks made these charlatans very popular and increased demand for their services.¹¹

Some quacks that were lucky enough to survive a plague epidemic became so rich that they were able to obtain noble status in the Commonwealth or admitted to town councils in Left-Bank Ukraine. They were so well respected by the population that they enjoyed absolute freedom to administer any anti-plague precautions they conceived. The population did not distinguish them from physicians or other medical professionals. For instance, during his trip to St. Petersburg, Samoilovych was able to stay in Vinnytsia for a short period of time and conduct isolationist anti-

¹⁰ Giedroyc, “Obrona od zarazy morowej,” rok III.

¹¹ M. K. Borodii, “Do istorii borot’by z chumoiu na Ukraïni,” *Ukraïns’kyi istorychnyi zhurnal* 5 (1984): 82–90.

plague measures that stopped the epidemic in early 1770.¹² However, when the town witnessed another outbreak several months later, the struggle with the pestilence was led by a local quack who ordered laying the bodies of the deceased on the outskirts of the town and conducted magic rituals on them. The plague stopped soon, and the population praised the quack for his actions. In reality, it was not the quack who helped the town to recover from the plague. A prolonged stay of the town dwellers outside of Vinnytsia, which happened during the outbreak, helped to isolate healthy individuals and decreased the spread of the disease. The population, however, ascribed this success to the quack's activity. The Vinnytsia quack became so popular that other towns and villages located on the routes connecting Moldavia and other Ottoman territories with Kyiv and experiencing outbreaks of plague in spring and summer 1770 invited him to help stop the pestilence.¹³ It is unclear how smaller outbreaks of the plague were defeated in those towns and villages. However, it is possible that the pestilence abated due to the dispersion of the population and separation of sick and healthy inhabitants as it happened earlier in Vinnytsia.

The clergy of different denominations believed that they could protect the population from the plague with their prayers and used the outbreaks to attract villagers to church activities. In September 1764, when there was an outbreak of the plague in Balta, a local Orthodox priest required all residents to fast for three or more days and pray in the church. Both Uniate and Roman Catholic priests in Ukraine proclaimed that prayers, fasting and even donations of money to the church would guarantee protection from the plague. Still, while the deaths continued, the priests believed that the flock did not demonstrate much needed devotion and obedience. Frequent public

¹² V. Otamanovs'kyi, "Do istorii medytsyny ta aptechnoi spravy u Vinnytsi i Vinnytskomu poviti druzhoi polovyny XVIII st.," *Zbirnyk pam'iaty akademika Teofila Havrylovycha Ianovs'koho* (Kyiv, 1930), 323–324.

¹³ Otamanovs'kyi, "Do istorii medytsyny ta aptechnoi spravy," 323.

ceremonies and prayers often led to even more deaths and were followed by rejection of the church and disbelief.¹⁴

It is not surprising that desperate and panic-driven peasant communities experiencing plague outbreaks often made quacks or priests the victims of mass hysteria and scapegoating. The popular imagination linked them to the dissemination of the foul air that caused the plague. For instance, when several people died from the plague in Voitivka, a village not far from Uman', in spring of 1770, the peasants accused their Orthodox priest as causing the deaths. The priest, named Vasyl', was believed to be a ghoul who walked at night, opened the windows of peasant homes, and exhaled poisonous air inside to make the homes infected with the plague. This story seemed to be so persuasive to the villagers that even the priest's family agreed with the accusation made against him by the community. The peasants found the priest guilty and executed him. After the execution, the plague did not cause new deaths in the village, which seemed to justify this unlawful act. Even the szlachta court which later investigated this murder accepted the peasants' argument and found them not guilty.¹⁵

Such activities distracted the population, government, church, town councils, and courts from the monitoring of neighboring territories, quarantining, border closure, and isolation. These methods contributed to the creation of sanitary cordons against the plague, an effective but expensive and time consuming measure used in disease control and prevention. The creation and closure of sanitary cordons was impossible without a well-developed infrastructure including one or two major roads with militia outposts guarding the entrances, well-defined city or provincial

¹⁴ Giedroyc, "Obrona od zarazy morowej," rok III; Rossiiskii Gosudarstvennyi Arkhiv Drevnikh Aktov (hereafter - RGADA), f. 248, op. 113, d. 505 (Ob opasnoi bolezni i karantinakh 1765-1766 g.), 1–34.

¹⁵ Ia. Sh. [Iakov Shulgin], "Ubiistvo upyria v Kievshchine vo vremia chumy 1770 goda," *Kievskaiia starina*, no. 2 (1890): 338–341. This case was considered in Kodnia court in 1770–1771. The author of this short article providing the court record (p. 341) argues that the decision of Polish szlachta jurors was also motivated by their anti-Orthodox bias and lack of interest in executing the peasants for the murder of an Orthodox priest.

borders, and fortification or other defensive constructions. A line of outposts could host quarantine facilities with warehouses and hospitals. Outpost guards and militia allowed newcomers to enter the province only after quarantining them and disinfecting all their belongings. The newcomers' clothes, merchandise and household items were disinfected by sprinkling with alcohol or vinegar, or aired with smoke from burning cedar or herbal powders either outdoors or inside the quarantine houses for several days. All newcomers were required to remain in quarantines, which accommodated them at hotels designated for this purpose or hospitals for the period from three to six weeks. Travelers paid high fees for the quarantining services, a solid source of income for provincial governments or town councils. Merchants who frequently traveled from one province to another to sell salt, food, textiles, wood or other commodities considered quarantine stays, disinfection, and preservation of merchandise in rented warehouse space an important expense item included in their accounting books.¹⁶

An effective protection from plague outbreaks required maintenance of highly paid human resources difficult to find and retain in the Ukrainian borderland territories that offered numerous career opportunities and were experiencing vibrant economic migration. Local city and provincial governments often lacked funding to maintain permanent militia units, large teams of quarantine medical professionals, and outpost guards. Hence, to save funds, they dispatched temporary militia regiments and hired medical professionals or quarantine personnel only during the periods when outbreaks of the disease were believed to be more likely, i.e., from late spring to mid-fall. These limited resources offered protection from some outbreaks of plague, especially during the trade fairs or other merchant activities conducted in late summer and early fall. However, even these

¹⁶ John T. Alexander, *Bubonic Plague in Early Modern Russia: public health and urban disaster* (Baltimore and London, 1980), 29-35; M. Tyshchenko, "Forposty, mytynysi ta karantyny na zakhidnomu pohranychchi u zv'iazku z zovnishnioiu torhivleiu Ukraïny v XVIII st.," in Mykola Tyshchenko, *Narysy z istorii zovnishnioï torhivli Ukraïny v XVIII st.* (Bila Tserkva, 2010), 5-76.

temporary protection measures were irregular and depended on the availability of sufficient funding included in the city and provincial budgets. In the late 1760s – early 1770s, these funds were spent on the support of militia and the army participating in the regulation of social turmoil in the Right-Bank Ukraine and the Russo-Ottoman war. During this period, Kyiv as well as other Ukrainian borderland towns and villages remained exposed to different newcomers, including those who skipped the quarantining and brought a dangerous disease and devastation to the local population.

Social Turmoil and Lack of Border Security

In his traveler's notes, Danylo Samoiloivych who crossed the two banks of Ukraine on his way to the empire's capital mentioned unregulated population movement and overall destruction of towns and villages in Right-Bank Ukraine. The physician observed that local inhabitants left their homes in great panic to find a forest or other safer place to stay away from the plague. Some population did not have stable homes, others considered their homes unsafe because their towns and villages remained ruined after the civil war which struck the area just a couple years earlier. Many towns and villages remained unprotected from pillagers, bandits, and soldiers who could spread the plague. In the towns that survived the recent social cataclysms, the most revealing sign of the coming plague was swift departure of the nobility and town councils. Their actions proved their helplessness and confirmed the perceived danger of the epidemics which shook the region in 1770.¹⁷

¹⁷ "Litopys monastyria Vasylian: rok 1770," *Dilo* 43, no. 11 (1890).

Just two years earlier, in 1768, the territories of Right-Bank Ukraine and the Russian Kyiv province were exposed to a political conflict and social unrest that destabilized the society of the region, disrupted its economy, and ruined quarantine and defensive complexes that could prevent the outbreaks and protect the population from the plague. Russian interventions in the political life of the Commonwealth conducted since 1764 triggered a conflict between different social and religious groups in the region. Shortly after the Confederation of Bar initiated by local szlachta,¹⁸ the Cossack and peasant Koliiv Uprising began.¹⁹ Both movements culminated in a civil war which resulted in the deportation of some Polish nobility from the region, violent destruction of Jewish communities, and arrests and executions of large groups of peasantry and Cossacks. While the conflict was orchestrated in Warsaw and St. Petersburg to increase Russian political influence in the region, and some tensions between the local nobility and peasants were expected; the civil war had quickly spiraled out of control of either the Russian or Polish authorities. The governments of both states were greatly alarmed and put maximum effort to quash both rebellions in 1768-1769. While the Polish side relied on small private militia regiments owned by szlachta and magnates, Russian imperial authorities dispatched a massive army gaining solid military advantage and centralized control over the Right-Bank Ukraine and the Kyiv region.²⁰

Between 1768 and 1774, the Russian army as well as administrative and military officials were constantly present in the area due to the empire's participation in the Russo-Ottoman war.

¹⁸ More information about the Confederation of Bar may be found in the following studies: Władysław Konopczyński, *Kazimierz Pulaski: życiorys* (Krakow, 1931); Also, see his *Konfederacya Barska: korespondencya między Stanisławem Augustem a Ksawerym Branickim, lowczym koronnym, w roku 1768* (Kraków, 1872); S. F. Ivanitskii, "Znachenie barskoi konfederatsii v istorii krestianskogo vosstaniia na Ukraine 1768 g.," *Uchenye zapiski Leningradskogo gosudarstvennogo pedagogicheskogo universiteta*, no. 19 (Leningrad, 1939): 211–253.

¹⁹ For a review of the literature about the uprising, see Zenon Kohut, "Myths Old and New: The Haidamak Movement and the Koliivshchyna (1768) in Recent Historiography," *Harvard Ukrainian Studies* 1, no. 3 (1977): 359-378. Religious motives for the uprising are discussed in Barbara Skinner, "Borderlands of Faith: Reconsidering the Origins of a Ukrainian Tragedy," *Slavic Review* 64, no. 1 (2005): 88–116.

²⁰ Ivanitskii, "Znachenie barskoi konfederatsii," 245.

Even though Ukrainian territories were not a zone of conflict directly involved in this war, continuous presence of the Russian army turned them into an open space exposed to unregulated population movement.²¹ The major and minor roads in Left- and Right-Bank Ukraine were used by Russian troops to get to the main battlegrounds in the provinces of the Ottoman empire. Local nobles, Cossacks and peasants frequently communicated with the Russian troops, and supplied them with forage, food, clothes, and other essentials. Taverns, guest houses, and churches often served as temporary shelters to quarter Russian soldiers. While these activities revitalized small trade, the region failed to recover from the civil war and suffered from a severe economic decline.²²

Ukrainian towns and villages paid a heavy price for being centers of the social turmoil and hosting the Russian army. Uman', Bila Tserkva, Korsun' and numerous villages were left in ruins with no town councils and militia garrisons to protect them. In the past, these towns had large quarantine facilities and hospitals, and hosted teams of medical professionals who could administer anti-plague precautions. After 1768, however, the quarantine facilities and hospitals were defunct, the medical professionals escaped the rebellions or were hired to assist the Russian soldiers, and militia service was discontinued.²³ City councils and other local government authorities often fled their jurisdictions and there was no one to organize effective work of the quarantines. The townsmen or villagers who observed the beginning of the epidemics left their homes in great panic, took some food and home essentials, and built ramparts in the fields where they lived in full isolation for several months. These hermits sent scouts to their former villages and towns to check whether the plague had subsided and returned to their homes or resettled in new places after that.²⁴ Many towns and villages remained unattended, witnessed bandit attacks, and were exposed to

²¹ Samoilovich, *Izbrannye proizvedeniia*, 34–35.

²² K. I. T-ii, "Kratkii ocherk istorii goroda Umani," *Kievskaiia starina*, no. 8 (1888): 381–394.

²³ RGADA, f. 248, op. 113, d. 505, l. 4–15; "Litopys monastyria Vasylian: rok 1770," *Dilo* 43, no. 11 (1890).

²⁴ "Litopys monastyria Vasylian: rok 1770," *Dilo* 43, no. 11 (1890).

travelers unintentionally spreading the plague. Kyiv chancellery as well as small courts and commissions functioning to resolve disputes between the Right- and Left-Bank Ukraine's populations considered a great number of banditry, invasions, and pillage cases in the early 1770s. These border courts and commissions were assigned by the Russian and Polish governments as temporary institutions investigating border-related crime and conflicts.²⁵

There was no clearly defined and fortified border between the two banks of Ukraine due to a prolonged political dispute between the Russian empire and the Commonwealth regarding this issue. The two states planned to demarcate and close the border in 1765-68, but social unrest and the beginning of the Russo-Ottoman war in 1768 interrupted these plans. According to earlier diplomatic agreements, the border was based on the Kyiv line of outposts located in Right-Bank Ukraine following the Dnipro river and marking the triangle of Irpin' and Stuhna rivers.²⁶ The town of Vasyl'kiv hosted the major outpost and the largest temporary quarantine facility on the line.²⁷ The five-mile zone surrounding this outpost line was supposed to be depopulated, a policy that both states were unable to execute due to increased colonization which took place in Right-Bank Ukraine until the mid-1760s. Numerous Russian officials who travelled to the region emphasized the need to demarcate and strengthen the border in order to secure the protection of

²⁵ Archiwum Głównie Akt Dawnych (AGAD), Archiwum Zamoyskich, sygn. 3031, 217/349 Memorial do komisyyi i rewidowania duktu granicznego między państwem Rossyjskim a Nayiasn. Rzeczpospolitą (Warszawa, 5/7/1766).

²⁶ The following document based on an inspection of the outposts in the mid-1760s provides important details about the Kyiv or Vasyl'kiv outpost line: RGADA, f. 248, op. 113, d. 1499 (Raznye bumagi, kasaiushchiesia do morovoi bolezni i karantinnykh domov, 1754-1778), l. 32. The length of the Kyiv line was about 393-395 miles. The outposts were located one to four miles from each other. The ability to timely pass fire or other signals from one outpost to another was a key factor defining their effectiveness. Vast forested territories, limited manpower and long distances between the outposts made the line open to illegal border crossings. More details about the outpost line are also provided in M. Tyshchenko, "Forposty, mytnytsi ta karantyny na zakhidnomu pohranychchi u zv'iazku z zovnishnioiu torhivleiu Ukraïny v XVIII st." In Idem, *Narysy z istorii zovnishnioi torhivli Ukraïny v XVIII st.* (Bila Tserkva, 2010), 5-76. For a discussion the Russo-Polish border demarcation problem, see O. Mykhed, "Not by Force Alone: Public Health and the Establishment of Russian Rule in the Russo-Polish Borderland, 1762-85," in *Borderlands in World History*, ed. Paul Readman, Cynthia Radding, and Chad Bryant (Palgrave Macmillan, 2014), 134.

²⁷ Serhii Shamrai, "Misto Vasyl'kiv," *Istoryko-heohrafichnyi zbirnyk*, no. 3 (1929): 40.

Kyiv and solve many Russo-Ottoman-Polish borderland disputes. They also argued that well-developed fortification and other defensive units constructed on the border could allow the empire to use the border infrastructure to temporarily quarter the army or empire's officials engaged in diplomatic negotiations or the Russo-Ottoman war.²⁸

Theoretically, the outpost line was supposed to be regularly maintained and updated by the Cossack Hetmanate and the empire. However, administrative authorities in Left-Bank Ukraine struggled to find sufficient funding and human resources to guarantee uninterrupted work of the outposts. A few small garrisons of land militia quartered in huts or old defunct fortresses were located in remote places, too far to effectively monitor the major roads and entrances to Kyiv.²⁹ Mounted troops which were supposed to guard the line, were divided into very small detachments sometimes forgotten or neglected. Peasants and permanent settlers in the area were expected to provide provision and forage for these detachments without any compensation or payment, which motivated them to ignore this important task. The outpost regiments were not able to compete with peasant and Cossack rebels, as well as large groups of illegal migrants who could easily quash them while crossing the line.³⁰

In the late 1760s, it was evident to the Russian imperial authorities that the border vaguely defined by the Kyiv outpost line did not have enough capacity to stop unsanctioned population movement and lacked manpower to guard entrances to the province. However, there was little to no attention to protection from the plague as an important motive to close the border on the Kyiv line and add quarantines to the border security system in the diaries and reports of Russian officials from this period. Sporadic source evidence about customs and quarantines on the Kyiv line

²⁸ *Sbornik Imperatorskogo Russkogo Istoricheskogo Obshchestva*, no. 57 (1887): 251.

²⁹ A. A. Bibikov, *Zapiski o zhizni i sluzhbe Aleksandra Il'icha Bibikova* (Moscow, 1865), 62.

³⁰ V. Antonovich, *Issledovanie o Gaidamachestve po aktam 1700-1768 g.* (Kyiv, 1876), 41–42.

confirms their temporary character and ineffectiveness.³¹ Due to the porous nature of the Kyiv outpost line, merchants and other travelers possibly infected with the plague could easily bypass Vasyl'kiv. Other supplementary quarantine facilities were designed as temporary institutions constructed for short periods of time and dismantled when the fear of the plague in the borderland subsided. The Kyiv line consisted of only three or fewer quarantine surgeons who did not have much experience in treating plague patients.³² Soldiers and outpost guards examined travelers who entered the outposts but lacked sufficient knowledge to identify individuals infected with the plague. Understaffed outpost teams did not have capacity to dispatch militia or soldiers to monitor neighboring territories, receive the news about the outbreaks of the disease happening nearby in time, and close all entries to the province or stop the population movement.³³ In spring and summer 1770, the plague broke out in the towns and villages of the Polish Kyiv palatinate. By that time, the pestilence crossed the Kyiv line and entered Kyiv, though on the Right Bank, the major city of the Left-Bank Hetmanate.

The Outbreak of Plague in Kyiv: 1770–71

In August 1770, the sporadic deaths from the plague were documented in Kozelets', Bila Tserkva, Boryspil, Brovary and Pereiaslav. Even though by that time both the Russian Senate and the Kyiv governor-general's chancellery ordered an increase in security at the outposts, it was difficult to implement this order in Left-Bank Ukraine in the late summer when seasonal trade fairs in Kyiv were opened and the Russo-Ottoman war continued. There were no physicians in the

³¹ M. Tyshchenko, "Forposty, mytnytsi ta karantyny na zakhidnomu pohranychchi u zv'iazku z zovnishnioiu torhivleiu Ukraïny v XVIII st.," in idem, *Narysy z istorii zovnishnioï torhivli Ukraïny v XVIII st.* (Bila Tserkva, 2010), 5–76.

³² Franz Doerbeck, *Istoriia chumnykh epidemii v Rossii s osnovaniia gosudarstva do nastoiashchego vremeni* (St. Petersburg, 1905), 115.

³³ RGADA, f. 248, op. 113, d. 430, l. 39.

nearby towns and villages who had experience organizing quarantining procedures in the past. A quarantine physician who worked in Vasyl'kiv was not in the town assisting a large number of Russian soldiers who participated in the war.³⁴

In August 1770, several persons perished from the plague in Vasyl'kiv. Approximately at the same time, in the late August, the plague claimed its first documented victims in Kyiv, a Polish merchant and his family. The neighbors of the merchant family who communicated with them and exchanged goods also perished soon. Unfortunately, at first, the city government did not pay attention to this tragic incident and turned a deaf ear to the voices of alarmed neighbors of the family. The police did not investigate the reason for these suspicious deaths, and the local merchant community continued their regular trade operations without any fear or understanding of the pitfalls stemming from this activity.

If the government and the police paid more attention to suspicious deaths in the merchant community, the city and its environs could have been able to avoid the plague. Unlike St. Petersburg, Cracow or Warsaw, Kyiv lacked an architectural and topographic unity and was effectively divided into several parts that were easy to isolate from each other. While the locals did not like this feature, it could have been a blessing for a medical team organizing anti-plague precautions in the city. Up until the early nineteenth century, the city's three major districts, the Old City, Podil, and Pechers'k, were surrounded with high hills and meadows that could have been an ideal barrier dividing and isolating healthy individuals from the sick.³⁵ The travelers to Kyiv

³⁴ Nikolai Zakrevskii, *Letopis' i opisanie goroda Kieva*, chast' 1 (Moscow, 1858), 86; Doerbeck, *Istoriia chumnykh epidemii v Rossii*, 115.

³⁵ In the 1770s, Kyiv had a plan that many foreigners called very unusual and inconvenient. The Old City, Pechers'k, and Podil were linked by roads; however, they were located about 1 to 2 miles from each other. Podil and Pechers'k were surrounded with high hills and fortress walls that isolated them from the remaining city territory, see Zakrevskii, *Letopis' i opisanie goroda Kieva*, 84. I. Pantiukhov, *Opyt sanitarnoi topografii i statistiki Kieva* (Kyiv, 1877), 98. The division of Kyiv into the three districts was preserved after the plague outbreak in 1770-71, see "Statisticheskoe opisanie g. Kieva, sostavlennoe v 1775 godu," *Kievskie gubernskie vedomosti: chast' neofitsial'naiia*, no. 12 (March 23, 1857): 73-74.

highlighted this unique feature of the city and even viewed the districts as three separate towns. For instance, the author of a diary describing the visit of Empress Elizabeth to Kyiv in 1744 stated that she visited “all three of the towns” and stayed in “one of them called Pechers’k.”³⁶ Sparse buildings and lack of substantial population movement among the districts could stop the spread of the disease and allow the authorities to close all city walls in a timely manner. Unfortunately, this opportunity was lost due to lack of timely government intervention and anti-plague precautions in late summer, 1770.

Unlike the architectural planning, the materials used in the construction of Kyiv’s homes and sanitary conditions of the city might have contributed to the swift spread of the plague. Even the houses of the wealthiest residents of Podil were made of wood, which was easily infested with rodents spreading bacteria and plague-infected insects. Many people experienced difficulties with maintaining good hygiene due to limited access to clean water. Podil was situated in a lower lying area that was very close to the Dnipro River, and part of it was often flooded by the Dnipro leaving the area humid and dirty. There was no regular garbage collection and utilization in Kyiv. Even though the municipal council had employees responsible for these services, the lack of supervision and regular funding for these workers did not allow them to fulfill their duties properly. Up until the early nineteenth century, Kyiv experienced problems with street cleaning and sanitation of public areas.³⁷ The quality of the roads in Kyiv was also a problem often mentioned in travelers’ accounts and other sources. Indeed, heavy rains often made roads in both Kyiv’s suburbs and the city center unusable and caused merchant carriages to be stuck in deep mud.³⁸ Experienced merchants who knew about this problem strived to pass Vasyl’kiv and other outposts and

³⁶ Pantiukhov, *Opyt sanitarnoi topografii i statistiki Kieva*, 102.

³⁷ Pantiukhov, *Opyt sanitarnoi topografii i statistiki Kieva*, 78.

³⁸ Zakrevskii, *Letopis’ i opisanie goroda Kieva*, 85–86.

quarantines before the fall season began by secretly negotiating with outpost guards and physicians and offering incentives for shorter inspections. When heavy rains began in September and early October, they would struggle with getting their merchandise delivered to Podil or suffer losses due to carriage damage. Despite constant active foreign and domestic migration to Kyiv, the city had no population growth and very high mortality rates triggered by unsatisfactory sanitary conditions and circulation of numerous diseases, including bubonic plague.³⁹

Podil was the first district where the outbreak of the plague began. As a major business center in Kyiv, Podil traditionally attracted large groups of diverse traders, sellers and buyers from Crimea, Europe, and the Ottoman and Russian empires. This part of the city hosted large trade fairs and headquartered many businesses. In the late 1760s and early 1770s, Kyiv had about 15 to 20 thousand inhabitants, most of whom resided in Podil.⁴⁰ Usually, large trade fairs took place three times a year and lasted for about fifteen days. However, in Podil, the commerce and the flow of diverse populations never ceased. The vibrant merchant community in Podil conducted trade and rented storehouses and private residences from the municipal council, in this way supporting the local economy. The municipal council benefited from the commerce and other merchant activities via collection of high fees granting permissions to trade in this busy and well-known part of the city. The peasant and poor population of Kyiv also welcomed merchants who often recruited them as high-paid assistants. Kyiv municipal authorities worked hard to ease the bureaucratic burden imposed on new merchants wishing to conduct their business operations in Kyiv. Sometimes, these efforts were not fruitful and corruption or negligence occurred. While registration in the city books was required for merchants who rented commercial space and residential houses in Podil, some of them are unknown to historians because their origin and

³⁹ Pantiukhov, *Opyt sanitarnoi topografii i statistiki Kieva*, 97.

⁴⁰ *Ibid.*, 104.

merchandise remained undocumented. Not surprisingly, it was a challenging task to identify specific people and commodities infected with the plague or other diseases brought to the city in 1770.⁴¹

Time is money, and long bureaucratic quarantining and registration procedures led to higher fees, rent payments and taxes for merchants eager to swiftly sell furs, textiles or food items at Podil's markets. Hence, some merchants offered fees or gifts to Vasyl'kiv guards and medical personnel to "persuade" them that they arrived from safe places without the plague and could skip quarantining. Some merchants presented falsified documents claiming previous quarantining or Catherine's II permission allowing for expedited entrance to the city. Earlier investigations of such cases initiated by Kyiv general governors revealed that many police officers, doctors and quarantine administrators in Vasyl'kiv participated in bribery and corruption.⁴²

Meanwhile, the deaths in Kyiv continued in early fall of 1770. Several dozen townsfolk perished in a short period of time, but authorities who investigated the reasons for these deaths found no buboes on the bodies of the deceased. Some barbers and pharmacists from this investigative team admitted that they did not know the reasons for the deaths. Others suggested that the deceased suffered from a severe case of influenza. Their reports to the municipal council and the governor-general confirmed the unusual character and potential danger of an unidentified disease but did not call for swift isolationist measures.⁴³ This confusion led to a delay in anti-plague precautions and became the major cause of the spread of the pestilence in all districts of Kyiv. In

⁴¹ Alexander, *Bubonic Plague in Early Modern Russia*, 110–115.

⁴² RGADA, f. 248, op.113, d. 1605 (O morovoi iazve v Moskve, ob opasnoi bolezni v raznykh mestakh Rossiiskoi Imperii i zagranitse, a takzhe o padzhe skota i stroenii karantinnykh domov, 1770-1796) l.168–169.

⁴³ Zakrevskii, *Letopis' i opisaniie goroda Kieva*, 86.

late September 1770, the population from all districts of the city participated in trade fairs in Podil where the plague had already begun.⁴⁴

The Senate and the Medical College assigned doctors Sila Mitrofanov, a quarantine physician, and Johann Lerche, one of the leading specialists on plague in the empire to fight the epidemic.⁴⁵ Both physicians arrived to Kyiv in September – October, 1770. While it was already impossible to stop the epidemic, their major task was to decrease the number of plague victims and to stop the pestilence from moving eastward.⁴⁶ According to Lerche's evaluations, by mid-September, 6,000 people had died from the plague in Podil alone. The failure to isolate Kyiv in a timely manner led to the spread of the plague by Russian soldiers, students of the Kyiv Academy, and merchants who fled the city in a great panic. The police estimated that about 1,000 residents were able to leave the city before all roads to and from Kyiv were closed.⁴⁷ In the fall of 1770, the plague reached Kozelets', Chernihiv, Nizhyn and the villages surrounding them.⁴⁸

After the decline of the epidemic in winter 1771, Kyiv authorities decided that the pestilence was over. In May 1771, access to Kyiv and all major roads entering the city were reopened. However, as Dr. Lerche predicted, in June 1771, the plague reoccurred in Kyiv and other borderland towns due to illegal trade in household items appropriated by garrison soldiers from infected houses. The pestilence started in the village of Pyrohiv and in Pechers'k, the places where this trade frequently took place.⁴⁹ In addition, the soldiers failed to prevent the Kyiv poor from settling in the abandoned houses of plague victims or runaways, thus contributing to further spread of the disease. The situation spiraled out of the control of the Kyiv government and the police was

⁴⁴ Ibid.

⁴⁵ Doerbeck, *Istoriia chumnykh epidemii v Rossii*, 115.

⁴⁶ RGADA, f. 248, op.113, d. 160, l. 91–92.

⁴⁷ Doerbeck, *Istoriia chumnykh epidemii v Rossii*, 115–116.

⁴⁸ Serhii Tokerev, "Borot'ba z proiavamy epidemii chumy v Nizhyns'komu polku v druhiu polovyni XVIII st.," *Nizhyns'ka starovyna*, 5, no. 6(9) (2008): 21–26.

⁴⁹ Borodii, *Danylo Samoilovych*, 33.

not able to guard or burn infected houses to prevent this practice.⁵⁰ Lerche's reports accused the Kyiv garrison commandants of lack of subordination to him and the governor-general and sabotaging of the anti-plague measures in the city.

The two major institutions of government in Kyiv, the governor-general and the municipal council, lacked coordination to organize effective anti-plague measures. The city legislature, police, and a part of medical services were subordinated to the municipal council that was also the major city government institution recognized by the merchant community in Podil.⁵¹ The governor-general was a person designated by the Russian empress and representing the empire in the province and was required to control the city garrison and the outpost guards in Vasyl'kiv. In 1770, the Kyiv general-governor experienced conflicts with the municipal council. The centuries-old institution and the empire's representatives competed for the right to collect taxes and the distribution of funds in the city. Their relations lacked trust, and initiatives offered by an opposite party were often rejected as unnecessary or too expensive.⁵² In addition, there were multiple problems not addressed by any of these two parties. Such initiatives as a renovation of old fortification structures and roads, the construction and maintenance of quarantines, hospitals and shelters were possible only when sufficient funding was allocated. However, the governor-general and the municipal council's members refused to take the initiative. As might be expected, both

⁵⁰ S. A. Verkhatskyi, "Chuma v Kieve v 1770–1771 godakh," *Materialy nauchno-prakticheskoi konferentsii posviashchennoi 225-letiiu so dnia rozhdeniia vydaiushchegosia otechestvennogo epidemiologa Danily Samoilovicha* (Nikolaev, 1969), 53–54.

⁵¹ As a city with Magdeburg Law, Kyiv had the municipal council as the major government institution. Later in the century, Catherine II realized the inconsistency between the legal rights and freedoms given by this law to some cities, and the office of governor-general. After the introduction of Kyiv vicegerency, part of the rights and freedoms granted to Kyiv by Magdeburg Law were abolished. However, the empress hesitated to liquidate it in full. Kyiv lost its remaining Magdeburg Law privileges much later, in 1835.

⁵² For instance, in 1766, only a few years before the major outbreak of the plague, the governor-general Fiodor Voeikov had a conflict with the Kyiv municipal council. When Voeikov requested an additional physician from the Medical College in St. Petersburg, the municipal council refused to accept this physician and defined his qualifications as unsatisfactory. Since the municipal council was responsible for funding and housing of the new physician, this new medical professional was forced to leave Kyiv. For more details, see "Predstavlenie gener.-gub. Voeikova o naznachenii doktorov v Kievskuiu guberniiu (1766 g.)," *Kievskaiia starina*, no. 12 (1903): 139–141.

parties governing the city were unprepared for the great challenges brought by the plague. The plague outbreaks of 1770–71 were the turning point for this conflicting duumvirate. Soon it became a subject of thorough investigation and imperial administrative reforms in the province.

Russian Reforms in Quarantining and Border Security

In the winter of 1771, imperial officials began to actively intervene in anti-plague measures in Kyiv and investigate ineffectual border security in the province. In addition to Drs. Lerche and Mitrofanov, Catherine II dispatched her assistant, Major of the Life Guards Mikhail Shipov, to help Fiodor Voeikov in reforming the border infrastructure and the quarantine system on the Kyiv line.⁵³ Shipov's first reports to the Medical and Military Colleges in St. Petersburg called for reconsideration of abandoned construction projects designed to enhance old and building new quarantine facilities on the line. The project began in 1771 and lasted until the early 1780s. Originally, this construction project was first introduced in the mid-1760s. However, due to the lack of funding, the beginning of the Russo-Ottoman war of 1768–74, and non-recognition of the bubonic plague as a serious problem challenging the security of the empire's borders, this plan was discontinued. There was no progress on the project after 1766. The reports and complaints of medical professionals, Fedor Voeikov, Petr Rumiantsev and other officials from Left-Bank Ukraine contributed to the decision to relaunch it in the early 1770s.⁵⁴

The project originated in May 1764 when the Senate and the Medical College issued instructions to the governor generals of the Kyiv and New Russia provinces to create and collect plans of existing quarantine houses, suggest locations for new ones, and provide budget estimates. A preliminary investigation demonstrated that besides the quarantine facilities in Vasyl'kiv and

⁵³ Zakrevskii, *Letopis' i opisaniie goroda Kieva*, 88–90.

⁵⁴ RGADA, f. 248, op. 113, d. 1499, l. 32.

Kremenchuk, there were no permanent quarantine houses on the Kyiv line of outposts. The plans for future quarantine facilities and information about their desired locations required by the Senate were prepared and sent to St. Petersburg in 1770-71, shortly before the plague outbreaks in the Kyiv province occurred. In January 1771, the Senate considered some of these plans. However, the construction of new quarantine houses only began in 1772.⁵⁵

Substantial funding allocated for the construction of quarantine facilities, outpost and custom complexes in the early 1770s confirmed great interest of the empire in the project. The investigative commission chaired by Shipov as well as the chancellery of the Kyiv governor-general were generously funded by the Medical College and the Senate to support the project. In addition to this funding, Kyiv Governor-General Voeikov and Mikhail Shipov received high personal salaries of 500 rubles each. Such funding was offered to the highest paid officials of this rank in the Russian empire. The large expenditures of the Kyiv chancellery excluding the salaries of the project leaders are summarized in Table 1.

Table 1. Expenditures of the Kyiv chancellery on the construction of quarantine facilities, outpost, and custom complexes, 1771–72.⁵⁶

Period	Amounts spent (in rubles)
Feb. 14 – October 10, 1771	1,776
Feb. 16 – June 11, 1772	745
June 11 – July 5, 1772	545.59
July 5 – July 23, 1772	1,066.89
July 23 – September 27, 1772	2,749
September 27 – November 15, 1772	230

⁵⁵ RGADA, f. 248. op. 113, d. 1535 (Ob opasnykh bolezniakh, 1770-1778), l. 230–31, 512.

⁵⁶ The Table is based on the data collected from RGADA, f. 248, op. 113, d. 1605, l. 179.

November 15 – December 31, 1772	1,060.35
Total	8,172.83

The Senate, Medical, and Military Colleges in St. Petersburg required Shipov and Voeikov to supervise the construction of new quarantine facilities and the advancement of the existing complex in Vasyl’kiv with new buildings, hospitals, and warehouses. According to Shipov’s inspection submitted to the Senate before the project began, Vasyl’kiv was the strongest quarantine and outpost complex on the Kyiv line. Still, the outbreaks of the plague in Kyiv proved that quarantining and border security in Vasyl’kiv were ineffective. One of the problems experienced by the complex was inability to accommodate an ever-growing flow of travelers and merchants in a small number of buildings belonging to it. To solve this problem, quarantine officers used the yard and the buildings of the Mezhihirs’kyi monastery to quarter travelers and to conduct some of the quarantining procedures. Because the monastery was close to the city and did not have the capacity to fully isolate visitors, they were able to exit it and communicate freely with city residents eager to sell them food and other items improving their stays. Voeikov and Shipov were right to request extension of the Vasyl’kiv complex so that it became the only institution controlling the visitors’ stays, selling food and other items, as well as collecting high fees from the services. Similar to Vasyl’kiv, the quarantine complex in Kremenchuk was extended and additional smaller quarantine facilities were built. Overall, the Kyiv line of outposts included large quarantine facilities in Vasyl’kiv, Kremenchuk, and Pereiaslav as well as smaller quarantine houses in Sorokoshychi, Dobrianka, and Perevolochna.⁵⁷

⁵⁷ RGADA, f. 248, op. 113, d. 1605, l. 168–169. For a brief discussion of the extension of the outpost line, see Mykhed, “Not by Force Alone,” 134.

A leading role in the quarantine construction project, generous funding, and recommendations of the imperial representatives in Kyiv strengthened the power of the governor-general of Kyiv. He became the major imperial official leading official demarcation of the border with the Commonwealth and overseeing reforms in border security and public health in Kyiv and the province.⁵⁸ The governor-general and his assistants became the major officials who received and reviewed all financial documentation of the complexes. From the early 1770s, they were also responsible for managing all operations of the border complexes, recruitment and retention of employees, and collection of all merchant and visitor taxes and fees. Some of these funds supplied the city and provincial budget, but the major part was directed to the imperial treasury. While operational expenses of the complexes were covered mostly by the Kyiv government, the empire took responsibility for continuous wages, food and forage supply in case of an economic turmoil, crop failure or famine to guarantee their uninterrupted work.⁵⁹

The empire strived to build diverse teams of outpost and quarantine employees consisting of local peasantry and Cossacks, as well as workers transferred from other provinces. Their jobs were considered high-paid and prestigious and could be compared to the status of officers in the imperial army. To supply the quarantine complexes with highly-qualified full-time medical personnel, the Medical College and the Senate issued the decrees of 1771–72 which opened new vacancies, regulated the salaries and offered subsidized housing for quarantine physicians, nurses, and pharmacists. An additional two thousand rubles were allocated by the Medical and Military Colleges to build this housing in close proximity to the Kyiv line.⁶⁰ To uncover any illegal

⁵⁸ Mykhed, “Not by Force Alone,” 134–135.

⁵⁹ *Polnoe Sobranie Zakonov Rossiiskoi Imperii* (hereafter – PSZ), vol .19 (St. Petersburg, 1830–35), 246 (13588, April’ 2, 1771, Senatskii [ukaz] “O proisvozhdenii provianta krestianam, nakhodiashchimsia na forpostakh dlia soderzhaniia karaulov”).

⁶⁰ RGADA, f. 248, op. 113, dd. 430, l. 31, 154–155 and 1499, l. 149.

activities among customs and quarantine personnel and increase their loyalty to the empire, the imperial government encouraged the personnel to report any abuses of power or any suspicious activities of their colleagues. Informants received up to 50% of uncovered bribes if any corruption was confirmed. All personnel was required to openly demonstrate loyalty to the empire and swear an oath of allegiance to Catherine II.⁶¹

Another reform contributing to the transformation of the quarantine and outpost complexes into the provincial institutions belonging to the empire was a merger of these complexes with existing customs units. Several years before the social turmoil and economic decline of 1768, the empire abolished the practice of leasing the customs to merchant representatives and transferred them into the state ownership.⁶² Combined with the quarantines, customs operating on the Kyiv line were a solid source of revenues for the empire and the provincial government. There is no data for 1771-72, but in 1766 the custom house in Vasyl'kiv collected 40,000 rubles from imported merchandise only.⁶³ In total, Vasyl'kiv and all other custom houses on the Kyiv line collected over 305,000 rubles annually in 1764-65. Back in the mid-1760s, this amount was equal to 35-40% of all customs revenues collected by the empire excluding the port customs in St. Petersburg.⁶⁴ Thus, the imperial officials expected that the new permanent quarantine, outpost, and custom complexes built on the Kyiv line would not only protect the province but provide substantial revenues that quickly compensated an initial investment of 8,172.83 rubles and reimbursed other expenses made in 1771-72.⁶⁵ On the one hand, these changes greatly improved the customs and quarantine

⁶¹ PSZ, 11829, 15:261 (Maia 23, 1771, Senatskii [ukaz] “Ob opredelenii shtab- ili ober-ofitserov v nekotorye tamozhni dlia prismoira i o proizvozhdenii im zhalovania iz tamozhennykh dokhodov”).

⁶² Compared to earlier years when customs were administered by leaseholders, custom revenues in 1764–65 were 1,5 times or about 55,000 rubles higher.

⁶³ S. Shamrai, “Misto Vasyl'kiv, IX–XVIII vv.,” *Istoryko-geohrafichnyi zbirnyk*, no. 2 (1928): 95.

⁶⁴ E. V. Litsoeva, “Dinamika tamozhennykh tarifov na Ukraine-Getmanshchine v XVIII v.” In *Torgovlia, kupechestvo i tamozhennoe delo v Rossii v XVI-XIX v.* (Kursk, 2009), 203.

⁶⁵ RGADA, f. 248, op. 113, d. 1605, l. 178–179.

services and procedures, and increased safety and profitability of the complexes. On the other hand, the Kyiv province and the city of Kyiv lost control over the revenues generated by customs and quarantines. As noted earlier, they received only a small part of these revenues. Even Kyiv governor-generals, who were the major representatives of the empire, eager to secure more cash for the province, were not able to change the distribution of funds without submission of numerous requests and justifications to the Senate in St. Petersburg.

Advanced quarantine and customs complexes operating on the Kyiv line not only became a rich source of cash filling the empire's coffers. They contributed to the development of the Kyiv province through changing the geographic, social, and economic landscapes of the region. While their construction erased numerous gaps in the defensive fortification and facilitated the demarcation of borders, Kyiv and smaller towns and villages surrounding them experienced an economic revival and influx of new population. The population benefited from new jobs, high demand for temporary housing and participated in economic activities supplying food, forage, and other essentials needed for an increased inflow of visitors using the complexes.

In the mid-1770s, foreign and domestic visitors considered Vasyl'kiv the major entrance to the empire located on its western border. Following their entrance to the border outposts, all travelers were required to document all their personal items and merchandise. These items were kept separately from visitors, and documents submitted by the owners served as inventories to redeem them upon completion of the sanitation process.⁶⁶ Because merchants and travelers were not allowed to have any contact with their merchandise and baggage after entering quarantine buildings, special employees were charged with the guarding and disinfection of these items.⁶⁷

⁶⁶ RGADA, f. 248, op. 113, delo 1499, l. 149.

⁶⁷ Rossiskii Gosudarstvennyi Istoricheskii Arhiv (hereafter – RGIA), f. 1374, op. 1, d. 90 (Donesenie Slobodsko Ukrainского gubernatora A. Teplova o merakh predostorozhnosti priniatykh vo vverenoj emu gubernii protiv rasprostraneniia morovoi iazvy), l. 1–11.

Quarantine workers prevented any access of the local population to the merchandise and baggage, especially if it contained textiles, clothes, or fur. Clothes of all guests were disinfected in the quarantine facility's airing rooms. Money, papers, or mail of quarantine customers were taken from them for disinfection through sprinkling with vinegar. Even though all buildings were usually located close to each other, the sick, suspicious, and healthy travelers were carefully separated.⁶⁸ The supervisors of hospitals and residences swore an oath to follow this rule. Quarantine employees regularly observed the health status of quarantined travelers and recorded it in their books. Every day quarantine employees aired hospitals and residences. While they used incense to air residences of the richest travelers and cedar smoke for middle class housing, wood resin served to air the quarters of poor travelers. Both the hospitals and residential quarters provided a full supply of food, clothes, and other household items.⁶⁹

Based on the example of the Moscow and St. Petersburg quarantine facilities, quarantine houses and hospitals on the Kyiv line imposed a monopoly on the sales of food and forage on their premises. The fees and prices for these services were regulated by the empire and did not always follow local standards. The Senate forbade changing customs and quarantine fees in the Kyiv province even when visitors complained that they were too high. The Senate decree allowed the poor or foreign travelers to borrow money, food, and forage from the provincial budgets to cover the expenses of their quarantine stays. However, servants, soldiers, and clergy were required to request funding from their supervisors or church.⁷⁰ No one was allowed to leave quarantine buildings without a certificate of safety and good health. After quarantining, medical exams and disinfection, travelers received special passports that served as official permission to enter all

⁶⁸ RGIA, f. 1374, op. 1, d. 90, l. 5–8.

⁶⁹ RGIA, f. 1374, op 1, d. 90, l. 1–9.

⁷⁰ PSZ, 19, 13599, (Aprel' 27, 1771, Senatskii [ukaz] – “O vydavanii deneg na propitanie soderzhashchimsia v karantinakh nedostatochnym liudiam”).

provinces of the empire. All passports were signed by the Kyiv governor general or his assistants, and the names of their owners were listed in the chancellery documentation. These new regulations allowed for information gathering and enabled the imperial authorities to trace who, when, and why entered the Kyiv province. The provincial reforms that continued in the late 1770s and the early 1780s redefined the administrative status of Left-Bank Ukraine in the empire and institutionalized the medical services existing in the region in accordance with the imperial standards established in St. Petersburg.

Administrative and Medical Reforms

The construction of large customs and quarantine complexes, the closure of the border with the Commonwealth, accumulation of substantial monetary and human resources, and increased control over the government actions in Kyiv allowed Catherine II to integrate the province into the empire based on general provincial reforms conducted in 1775.⁷¹ The administrative reform and the creation of the Kyiv vicegerency (*namisnytstvo*) in Left-Bank Ukraine was finalized in 1781. Beginning in 1771, it took the empire's governors of the province about a decade to prepare for the reform. This preparation began from the creation and closure of a border equipped with strong outposts, quarantine, and custom complexes. It continued with the introduction of public hospitals and other medical institutions subordinated to the Medical College in St. Petersburg. Catherine's

⁷¹ Major provincial reforms initiated by the empire were drafted and approved by the Senate in 1775. These reforms were based on the exploration and reports submitted by numerous governors and administrators, including Petr Rumiantsev, Grigory Teplov, Jacob Sievers, Zakhar Chernyshev, and Mikhail Krechetnikov who knew the Ukrainian territories well. The reports described general conditions of the provinces and borders, economy, as well as the level of medical services needed for the population. While a general reform plan of provincial development was created based on the evidence provided by specific provincial authorities, the governors received some freedom to introduce the changes specific for each province, aiming to modernize them and improve their administration. The reports of Rumiantsev and Teplov were the major source of information about Left- and Right-Bank Ukraine. They described it as an autonomous region ruled by the nobility who regulated local trade, tax collection and subordinated major groups of society. Regulation of the fiscal system and transformation of the elites were the major steps encouraged by the empress.

II instructions given to such Left- and Right-Bank Ukraine's provincial leaders as Piotr Rumiantsev or Mikhail Krechetnikov demonstrated attention to gradual changes and preoccupation with the attitude to the empire among the local population. In one of her secret instructions to the provincial governors, the empress required to avoid introducing any drastic changes that could provoke discontent or ambiguous reactions of the nobility, soldiers, merchants, and peasantry. Military actions, coercion or conflicts were considered as strategies to avoid. The instructions also suggested the governors maintain old institutions and traditions but make gradual changes that would slowly adjust them to the imperial standards. It became a common practice for the governors to call provincial assemblies and seek the opinion of the provincial nobility and their subjects about certain problems in the province and secure their support. The governors were also instructed to improve the medical services available to the population as well as demonstrate to them the progressive and innovative character of the new imperial institutions.⁷²

The Kyiv vicegerency system increased the power of imperial representatives (vicegerents) appointed by St. Petersburg and confirmed Kyiv as the capital and the center of the new province.⁷³ The system abolished the traditional for Left-Bank Ukraine old regiment (*polk*) system and introduced a standard for the empire division into eleven counties (*uyezdy*). The territory of Left-Bank Ukraine included Kyiv, Chernihiv, and Novhorod-Siversk vicegerencies and formed the Little Russian general-governorate (*general-gubernatorstvo*) headed by Piotr Rumiantsev.⁷⁴

⁷² “Reskript imperatritsy Ekateriny II na imia Generala Krechetnikova,” in *Materialy dlia istorii Podol'skoi gubernii Pribavlenie k Podol'skim Gubernskim Vedomostiam* (b.m.: 1885), 6–16.

⁷³ PSZ, 20, 14392 (Noiabr' 7, 1775, “Uchrezhdeniia dlia upravleniia gubernii Vserossiiskii Imperii, chast' pervaiia”).

⁷⁴ Piotr Rumiantsev was the governor of Little Russia governorate since 1765. His rule was interrupted by the Russo-Ottoman war when he served as a commander in the Russian army. Rumiantsev was well received by the local nobility and offered Catherine II different approaches to gradually attach the peasantry to specific locations and landlords. Some of these reforms projects were supported by the empress. On the one hand, the process of enserfment of the peasantry was perceived as a very unpopular step among the local population. On the other hand, depriving the peasantry of the freedom of geographic mobility greatly reduced population migration, thus making the government plague prevention initiatives more effective.

Vicegerency had a complex network of administrators assigned by the empress and approved by Rumiantsev and when Krechetnikov who temporary replaced him in the early 1790s. These government officials were required to report all outbreaks of the plague and other contagious diseases and inform about the quarantining and other measures they administered to protect the population. They were also required to demarcate all town and village borders and send detailed descriptions, atlases, and maps to the Senate, Medical and Military Colleges for final approval.⁷⁵ In 1783, the chancellery of the Kyiv vicegerency initiated a review of all government institutions and town councils in the vicegerency. All local officers and administrators received an order to prepare for the review and demonstrate the effectiveness of their work.⁷⁶

Among other changes, the vicegerency system increased the centralization of medical institutions by subordinating them to the provincial government chancelleries. This system made provincial governments responsible for a number of medical needs in the provinces including distribution of medical offices, requests for additional medical professionals from the Medical College in St. Petersburg, and the provision of guidance for medical teams during plague outbreaks. Regional medical councils introduced in the mid- and late-1780s partially released the provincial governments from the supervision of all medical professionals in the provinces and increased the standardization of medical services. The councils were subordinated to the Little Russian Medical Board, the institution which represented the Medical College in Left- and Right-Bank Ukraine. These innovations greatly centralized the public health system in the Ukrainian territories and allowed the medical institutions of the empire to regulate this system. Private medical practitioners, pharmacies, and hospitals sponsored by the landlords or town councils

⁷⁵ Kyiv received such a plan in 1784. The work on it was initiated by Fiodor Voeikov in the mid-1770s.

⁷⁶ Derzhavnyi Arkhiv Kyivs'koï Oblasti (DAKO), f. 1, op. 316, spr. 1864 (Tsirkuliar Kievskogo namestnicheskogo pravleniia, 1 noiabria, 1783), ark. 7.

became subject to audit and certification. While before the reforms of the 1780s these medical professionals and facilities were funded from private sources or patrons and fully depended on their support, the empire turned them into independent government institutions receiving continuous financial support. Medical professionals who worked without much supervision in towns and villages in Right- and Left-Bank Ukraine were required to send quarterly progress reports to the Medical Board. After the reforms, the work and experience requirements for these medical professionals were standardized, so they could have better career prospects in the empire and abroad.⁷⁷

The reforms in public health and the introduction of medical councils advanced public health services received by the local population. Prior experience with the anti-plague precautions in Kyiv in 1770–71 proved the importance of uninterrupted quarantine services and cooperation between medical and government institutions to increase plague awareness and organize prompt preventive measures. Thus, medical reforms in the provinces forbade physicians or related professionals to travel long distances and assist soldiers in remote garrisons or serve patients who were not included in their districts. During outbreaks of plague or other contagious diseases, local physicians continued serving their patients without interruption and were required to participate in anti-plague measures. The Medical College assigned additional medical professionals to attend patients in border quarantine facilities, so there was no need for local physicians to interrupt their work.⁷⁸

⁷⁷ RGIA, f. 1374, op. 1, d. 86 (Donesenie Kamenets-Podol'skogo gubernatora A.A. Bekleshova, minskogo gubernatora Z. Karneeva, kurskogo S. Burkesheva, orlovskogo V. Voeikova i smolenskogo I. Mezentsova o merakh, priniatykh vo vverenykh im guberniiakh protiv rasprostraneniia chumy), l. 1–2.

⁷⁸ RGIA, f. 1374, op. 1, d. 86, l. 1.

The creation of centralized medical services and joint work of medical institutions with the provincial governors greatly reduced difficulties in the organization of anti-plague measures during plague outbreaks in 1795–1800. All neighboring provinces were swiftly informed about the epidemic, the population movement was halted and the provincial governors received numerous resources to fight the plague outbreaks much more effectively than had happened in Kyiv in 1771. The cooperation between provincial authorities, the control of the border and quarantines by these authorities, and the presence of highly-qualified medical personnel allowed the reduction of plague related mortality among the population and stopped the spread of the disease to other provinces. For instance, this cooperation took place during a plague outbreak in Podolia, when the governor of Kam'ianets'-Podil's'k A. Bekleshov requested additional soldiers and quarantine personnel to assist with a border closure. The governors of other provinces swiftly sent the soldiers to Podolia as well as helped Bekleshov to swiftly recruit additional quarantine personnel.⁷⁹

Imperial reforms provoked by the epidemics of plague greatly increased the role of provincial medical institutions in promoting awareness about the disease and advocacy for the contagion theory. Good hygiene and cleanliness became subjects frequently discussed in popular newsletters and during church or other gatherings. The new provincial government strived to promote education of the population, and organize public campaigns that discouraged consumption of contaminated water and unprocessed food. The campaigns were oriented against malnutrition and poverty, which were believed to contribute to the spread of plague and other diseases. The influence of town or village physicians on the local population greatly increased by the end of the century. With the support of government institutions, medical professionals were finally able to compete with quacks and conjurers whose services were still popular among the

⁷⁹ RGIA, f. 1374, op. 1, d. 86, l. 1–2.

peasantry.⁸⁰ Using medical teams to reach the local population, the imperial government supplied grain, food or other essentials in case of a crop failure, famine or outbreaks of epidemic diseases.⁸¹

The responsibilities of the Medical Board went beyond the regulation of the work of regional medical institutions. The board empowered its members to strategically collect diverse information about the local population. For instance, it produced annual reports about the climate and weather conditions as well as described the most common seasonal medical problems experienced by the peasantry and discussed methods used to solve these problems. These reports were addressed to higher imperial medical authorities and sometimes exaggerated the effectiveness of the Medical Board and the local physicians. Still, they offered useful insights about the lives of the population and confirmed the increased attention of the imperial authorities to their subjects. Connecting the province to the empire, the reports called for government actions and funding to support local inhabitants. The Medical Board proposed that physicians assist the poor in struggling with human or cattle diseases via cooperation with local priests. Collaboration with the church became an important tool in fighting peasant superstitions and ignorance, and solidified the partnership between church authorities and the empire. The reports often concluded on an optimistic note and praised the empire for implementing progressive laws that made cooperation between provincial governments, physicians, priests, and police possible and productive.⁸² Even if exaggerated, the results of the work of numerous medical professionals in the Ukrainian territories contributed to the integration of the provincial population into the empire in the late eighteenth century.

⁸⁰ *Dvadsatipiatiletie Obshchestva Kievskikh Vrachei, (1840-1865)* (Kyiv, 1865), 5–6.

⁸¹ RGIA, f. 1374, op. 1, d. 88 (Perepiska po povodu poiavivsheisia v Litovskoi gubernii morovoi iazvy i padezhe skota, 1797), l. 1.

⁸² RGIA, f. 1294, op. 1(internal op. 9), d. 22 (Raport v gosudarstvennuui meditsinskuii kollegiiu iz Malorossiiskoi vrachebnoi upravly), l. 1–9.

Conclusion

While the outbreaks of the bubonic plague which begun in Right-Bank Ukraine in 1770 continued for several months before the disease reached Kyiv, the city met the challenge totally unprepared and suffered tremendous human losses. The Russian imperial authorities quashing the noble-peasant rebellions in Right-Bank Ukraine were fully aware of the destruction of roads, defensive fortifications, and quarantines in the region. Still, the empire failed to stop the plague and reduce the number of its victims in Kyiv and Left-Bank Ukraine. This unpreparedness was partially linked to the empire's participation in the Russo-Ottoman war consuming significant human and monetary resources as well as inability to close the border between the two banks of Ukraine due to lack of effective infrastructure and unregulated population movement. In the late 1760s, the creation of a strong system of quarantines and border security on the Kyiv outpost line was not the top priority both for the local administration and the imperial authorities in St. Petersburg. However, the outbreak of plague in Kyiv and the spread of the disease in major towns in Left-Bank Ukraine in 1770–71 alarmed the empire about the need to change this approach, secure the border defense complexes, and organize more effective measures to prevent new outbreaks. The reports of the governor-general of Kyiv, alarming complaints of physicians fighting the plague in Kyiv, and observations of imperial officials investigating the quarantines called for immediate action and reforms. As a result, the construction of large quarantine and custom complexes merged with customs was initiated in 1772. Highly profitable, the complexes not only strengthened the border but also generated substantial revenues collected by the empire.

This construction project contributed to the imperial reforms in Left-Bank Ukraine that continued for about a decade and culminated in the creation of the Kyiv vicegerency in 1781. Cities, towns, and villages in this new administrative unit appeared on the maps as units with well

demarcated borders which facilitated anti-plague precautions conducted by large teams or new governors and physicians. All of them were assigned personally by the empress and carefully monitored by the Military and Medical Colleges in St. Petersburg. These reforms allowed for swift and centralized government action during the outbreaks of the plague and facilitated administrative and economic integration of Ukrainian territories into the empire in 1781–1793. A highly centralized medical system, swift reporting of emergencies, and effective support by the neighboring provinces made the outbreaks of the plague much less severe and more preventable. Medical and administrative institutions created in the Ukrainian provinces after the Partitions of Poland followed the standards introduced in the Kyiv vicegerency and were often administered by the same imperial authorities entrusted by Catherine II. Thus, the provincial reforms introduced in Left-Bank Ukraine and replicated in other Ukrainian territories later in the century became a powerful instrument helping the empire integrate new territories and people into its orbit.