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### **“Unnatural, filthy, unclean and positively dangerous to health and life.”: Smallpox vaccine refusal and sectional violence in Montréal 1885**

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**“Unnatural, filthy, unclean and positively dangerous to health and life.”:  
Smallpox vaccine refusal and sectional violence in Montréal 1885**

By

**Mary Horman**

A Major Research Paper

Submitted to the Faculty of Graduate Studies  
through the Department of History  
in Partial Fulfillment of the Requirements for  
the Degree of Master of Arts  
at the University of Windsor

Windsor, Ontario, Canada

2024

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**“Unnatural, filthy, unclean and positively dangerous to health and life.”:  
Smallpox vaccine refusal and sectional violence in Montréal 1885**

by

**Mary Horman**

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## ABSTRACT

Montreal was stricken by an epidemic of smallpox in the year 1885 which resulted in over 3,000 deaths and which lasted 15 months. The disease was brought into the city by a pullman conductor arriving on a train from Chicago. The city of Montréal Health Department was confident that they would be able to manage the initial outbreak easily because by 1885 smallpox was considered to be a vaccine preventable disease. Unfortunately, many errors were made by the Health Department in the initial outbreak that allowed the disease to escape into the city of Montreal, where it was greatly aided by the already considerable vaccine noncompliance of many of the city's francophone working class residents. For various reasons, vaccine resistance was high amongst the working-class francophone population, who as a result contracted the majority of smallpox cases and represented the vast majority of smallpox related deaths.

By contrast anglophones and upper and middle-class francophones complied with vaccination and did not contract or die from smallpox. I argue that errors committed by the Health Department were exacerbated in both press-language environments, with the English-language press being uncritical of the Health Department even in the face of serious errors such as continuing to vaccinate with a supply of vaccine that likely was contaminated. The English language press was also critical of the francophone working-class to the point of being anti-francophone, without an understanding that health regulations served as significant barriers for the working-class. The French-language press by contrast was considerably more critical of the Health Department especially around the erysipelas outbreak. Together the two press environments caused a situation which had the probable effect of fueling vaccine refusal in the francophone working class community, prolonging the epidemic and increasing the death toll.

## DEDICATION

To London Public Library Collections Services staff for patience and encouragement.

To my cats Rose Mischief and Ivy Cuddle for company, warm laps and “assistance” with typing.

To my husband and children: you are everything.

## TABLE OF CONTENTS

DECLARATION OF ORIGINALITY .....	iii
ABSTRACT .....	iv
DEDICATION.....	v
Introduction:.....	1
Montréal Newspapers in 1885.....	5
Historiography .....	12
Montréal and the Origins of the Smallpox Epidemic .....	16
Vaccinations and Medical Knowledge in 1885. ....	20
Management of Montréal's Smallpox Epidemic.....	25
Erysipelas as a Factor in Vaccine Refusal.....	34
Erysipelas and Anti-vaccinators .....	47
Anti-Francophone Expressions in English Language Press .....	52
Smallpox Regulations and Francophone Resistance .....	57
Smallpox Riot .....	60
Conclusion: .....	63
BIBLIOGRAPHY .....	68
VITA AUCTORIS.....	72

## Introduction:

The city of Montréal was stricken with a smallpox epidemic which began February 28, 1885, and lasted for approximately 15 months, and which in the end resulted in 3,234 deaths in approximately 9,600 cases. The last cases were reported on May 21<sup>st</sup>.<sup>1</sup> The epidemic started when George Longley, a Pullman Conductor on a train in from Toronto by way of Chicago, was found to be infected with smallpox.<sup>2</sup> The gentleman was shuffled between the Protestant General Hospital and the Catholic Hôtel Dieu. The nursing sister at the Catholic Hôtel Dieu, where he eventually ended up, was not warned that he had smallpox, and ended up discovering this by herself. This was due in part to an incomplete understanding during the time of how vaccination worked. Mr. Longley was marked with at least one scar from the smallpox vaccination, and he had a mild form of the disease, known at the time as “Varioloid”, which was initially taken for chickenpox.<sup>3</sup> The recognition that a single smallpox vaccination could not confer sufficient immunity to last a lifetime against the disease was not universally acknowledged at this point. This, combined with poor communication, meant that the staff taking care of Mr. Longley did not recognize his illness as smallpox and failed to take proper precautions against the spread of the disease until it was allowed to escape into the city of Montréal. There the disease smoldered, until breaking out into a full epidemic by the end of the summer. By the time the epidemic had finally been suppressed, over 3,234 people had died of the disease in and around Montréal, the vast majority of whom were francophone children.<sup>4</sup>

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<sup>1</sup>Michael Bliss, *Plague: A Story of Smallpox in Montreal*. (Toronto: HarperCollins, 1991), 259.

<sup>2</sup>Bliss, *Plague*, 11.

<sup>3</sup>Bliss, *Plague*, 49.

<sup>4</sup>Bliss, *Plague*, 277.



The francophone working-class were considerably more resistant to vaccination and suffered the majority of smallpox cases compared with anglophones who by and large submitted to vaccination and did not as a result contract smallpox.<sup>5</sup> It is not decisively known why francophones were comparatively so resistant to vaccination. It has been suggested that francophones were whipped into a fervor of anti-English sentiment by the events of the Northwest Resistance led by Louis Riel. The Northwest Resistance was a resistance movement by the Métis (francophone and First Nations residents of the Northwest Territories) against the encroachment of the Canadian government onto Métis territory in 1885. It took place in what is now Manitoba and Saskatchewan. The thesis proposed by Micheal Bliss in his book *Plague* argues that the Northwest Resistance caused working-class francophones to be resistant to the advice of the predominantly English-speaking Health Department.<sup>6</sup> This discounts the fact that the sizeable Irish minority, like the English minority, for the most part complied with vaccination. This despite the fact that the Catholic Irish minority were most likely sympathetic to the Catholic Riel. The Irish Catholics by this time made up a quarter of Montréal's population.<sup>7</sup> Furthermore the francophone majority already began to resist the vaccine before the Northwest Resistance commenced. It further discounts that previous smallpox outbreaks in the vaccination era in Montréal were not nearly as fatal to the francophone population despite their relative resistance to vaccination in prior epidemics as well. It has also been suggested that working-class francophones fundamentally did

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<sup>5</sup> Donald C. Firth, "A Tale of Two Cities Montreal and the Smallpox Epidemic of 1885," (PhD Thesis, University of Ottawa, 1984. <https://search-proquest-com.ledproxy2.uwindsor.ca/dissertations-theses/tale-two-cities-montreal-smallpox-epidemic-1885/docview/303357002/se-2?accountid=14789>), 4-5.

<sup>6</sup> Bliss, *Plague*, xiii.

<sup>7</sup> Bettina Bradbury, *Working Families: Age, Gender, and Daily Survival in Industrializing Montreal*. The Canadian Social History Series. (Toronto: McClelland & Stewart, 1993), 40.

not consider smallpox to be as dangerous a disease as did English-speaking Canadians.<sup>8</sup> This is possibly true because the comparatively impoverished francophone working-class were significantly more affected by other infectious diseases which also killed thousands in that same year.

In 1885, the working-class in Montréal resided in densely populated, flood-prone areas with inadequate sanitary infrastructure, which fostered the rapid transmission of infectious diseases, exacerbated by insufficient wages to afford nutritious food. Certain low-lying working-class neighbourhoods were prone to yearly flooding from the heavily polluted St. Lawrence, exacerbating a perilous situation as many homes in some working-class neighbourhoods still had backyard privies as opposed to the indoor plumbing increasingly common in wealthier neighbourhoods. Furthermore, inadequate wages meant that the working-class did not have access to as much and as nutritious food as the wealthier classes, nor did they have access to the same quality of milk and water that the wealthier classes had. This meant that not only were they exposed to more disease, especially through contamination of water and milk, they were also more primed for disease due to their lack of nutritious foods.<sup>9</sup> This again is most likely the case with the Irish, who were also relatively impoverished, but who nonetheless submitted willingly to vaccination.

In her thesis on the anti-vaccination movement in Canada, Jennifer Keelen examines Drs. Joseph Emery Coderre and A.M. Ross's endeavors to incite anti-vaccine sentiment in Montréal amidst the 1885 epidemic. Keelen writes that Dr. Joseph Emery

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<sup>8</sup>Firth, *Tale*, 53.

<sup>9</sup>Sherry H. Olson, and Patricia A. Thornton, *Peopling the North American City: Montreal, 1840-1900*. (Carleton Library Series; 222. Montréal; McGill-Queen's University Press, 2011. <https://books-scholarsportal-info.ledproxy2.uwindor.ca/uri/ebooks/ebooks3/upress/2013-08-23/1/9780773586000>), 98.

Coderre had a significant influence on the anti-vaccination movement in Canada and that in contrast to other anti-vaccinators, Coderre was a longtime Montréaler. Keelen continues that Coderre was mostly admired by the other doctors in the city.<sup>10</sup> Dr. Coderre was affiliated with the Hôtel Dieu since 1857 and served as a professor of medicine at the Montréal School of Medicine and Surgery since 1847. He was not the only anti-vaccinator in the city, but the English-speaking Canadian American anti-vaccinator Dr. A.M. Ross did not influence the English-speaking English-Scottish communities or the English-speaking Irish Catholic community to the same extent. Dr. Alexander Milton Ross was an abolitionist, naturalist, and doctor of hydropathic medicine, who may or may not have been affiliated with a hospital but who arrived in Montréal in 1882 with the purpose of leading anti-vaccination efforts.<sup>11</sup>

A crucial difference between the coverage of the smallpox epidemic by the French-language and the English-language press was that the French-language press provided significantly more coverage to the risks posed by vaccines. This included stories about lawsuits that were brought against the city due to erysipelas, a skin condition caused by contaminated vaccines. The only English-language newspaper that wrote frankly about the dangers posed by the vaccines was *The Montreal Star*, a paper created to appeal to the working-class. Even the *Star* grew notably silent as the erysipelas outbreak began to impact vaccine compliance. This may partly have been due to Dr. Coderre's influence. Dr. Coderre, who according to Keelen, lost two of his children to erysipelas caused by contaminated vaccines,<sup>12</sup> was passionate on the dangers of vaccine. Nevertheless, the

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<sup>10</sup>Jennifer E Keelen, "The Canadian Anti-Vaccination Leagues, 1872–1892," (PhD Thesis, University of Toronto, 2004. <https://search-proquest-com.ledproxy2.uwindsor.ca/dissertations-theses/canadian-anti-vaccination-leagues-1872-1892/docview/305063067/se-2?accountid=14789>), 20.

<sup>11</sup>Keelen, *Canadian*, 160.

<sup>12</sup>Keelen, *Canadian*, 119.

English-speaking medical establishment and English-language press remained remarkably intransigent, even when confronted with highly credible reports of children suffering serious or fatal harm from vaccines. The French-language press displayed considerably more sympathy to these cases. The French-language press was also considerably more cognizant of the potential reaction of the francophone public to these stories. By contrast the English-language press hesitated to publish such narratives, and when obliged to do so they minimized the gravity of the situation, inevitably leaving the francophone community, which bore the brunt of these cases, feeling neglected and marginalized. I will argue that the francophone working-class' resistance to the vaccine stemmed partly from significant disparities in the narratives presented in the two distinct language press environments because French-language papers were notably more candid on the dangers of vaccination than their English-language counterparts.

### **Montréal Newspapers in 1885**

To investigate francophone vaccine refusal, I analyzed the coverage of four English-language and four French-language periodicals in Montréal during the smallpox epidemic. This comparative analysis aimed to discern language-based disparities in epidemic reporting. I read the coverage of smallpox vaccination in the following newspapers and newsmagazines: *The Montreal Gazette*, *The Montreal Star*, *The Montreal Herald*, *The True Witness and Catholic Chronicle*, *La Presse*, *La Minerve*, *L'Étendard* and *Le Monde Illustré*.

*The Montréal Gazette* was Montréal's preeminent English-language business paper as well as the oldest newspaper in Montréal in either language. *The Montréal Gazette* was founded in 1778 by Fleury Mesplet as a French-language weekly called *La Gazette du commerce et littéraire, pour la ville et district de Montréal*. In 1785 Mesplet founded a

second weekly called *The Montreal Gazette / La Gazette de Montréal*. Mesples's weeklies were respectively a French-language weekly and a bilingual weekly sympathetic to the American Revolution. In 1822 the newspaper was bought by Thomas Andrew Turner who converted the papers into a single English-language only paper. The paper was sympathetic to the English in their fight against les Patriotes. The *Gazette* was and is the longest running newspaper in Montréal. In his book on the Canadian Press in the nineteenth century *A Victorian Authority*, Paul Rutherford describes the *Gazette*'s editorial style as relatively highbrow and classified the paper as a "business" paper.<sup>13</sup> In 1885 the *Gazette* was sympathetic to the English-speaking establishment and was extremely pro-vaccination and supportive of smallpox regulations. Relative to other Montréal Newspapers the *Gazette* attempted to report truthfully on the epidemic causing other Montréal newspapers to complain that the *Gazette* was willingly trying to destroy the city's "reputation." The attitude to francophone-Canadians displayed by the *Gazette* was benevolent but condescending.

The *Star* was Montréal's foremost English-language paper aimed at the working-class, which soon exceeded the combined circulation of all of Montréal's other English-language papers. The *Star* was founded in 1869 by Hugh Graham and George Lanigan. The paper was referred to by Rutherford as a "one-cent paper." This referred to the price of the paper, which was inexpensive by the standard of the day, as the paper was deliberately aimed towards the working-class and aimed in the words of the paper to "however feebly" be an "organ of the people." By 1876 the *Star* had a larger circulation than all the other English-language dailies combined. The *Star* had an editorial policy, in

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<sup>13</sup>Paul Rutherford, *A Victorian Authority: The Daily Press in Late Nineteenth-Century Canada*. (Heritage. Toronto: University of Toronto Press, 2019. <https://doi.org/10.3138/9781487579975>), 53.

the words of Graham, that the items in the paper should be of the type “that if you saw it in some newspaper or book you would be tempted to read out loud to the next person to you.”<sup>14</sup> Of all the English-language papers the *Star* was by far the most sympathetic to Montréal’s francophone majority. The *Star*’s fervent advocacy for compulsory vaccination and smallpox regulations occasionally compromised its usual sympathy for the francophone population, particularly the working-class. For example, on July 16<sup>th</sup><sup>15</sup> the *Star* called for immediately building a new smallpox hospital, writing that “to do otherwise was nothing less than criminal negligence” and by September 4<sup>th</sup> the *Star* was openly petitioning the mayor to do “everything in his power” to stop the epidemic.<sup>16</sup>

*The Montreal Herald* was also a business paper whose pro-anglophone stance became controversial, and which was struggling by 1885 against the increasingly popular *Star*. *The Montreal Herald* was founded in 1811 as an English-language weekly. The *Herald* was considered a Tory newspaper and during the War of 1812, the *Herald* was opposed to United Empire Loyalists settling in Canada. By 1885 the *Herald* was an English-language daily. The *Herald* was also considered to be a business paper and tried to have a somewhat highbrow approach.<sup>17</sup> They were in direct competition to the *Gazette*, but it was the *Star* that provided the competition that cut into the *Herald*’s market share to the extent that by 1885 the *Herald* was struggling. During 1885 the *Herald* was also very pro-vaccination and pro-regulation. The *Herald* was also very pro-anglophone to the point of being accused of being anti-francophone. Their main rival, the *Gazette*, posted a story about a francophone alderman voting for the *Herald* to be

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<sup>14</sup>Rutherford, *Victorian*, 51.

<sup>15</sup>“Because the civic hospital is full of smallpox patients,” *Montreal Daily Star*. (Montréal, PQ), July 16, 1885.

<sup>17</sup>Rutherford, *Victorian*, 51.

censured for anti-francophone activity and *The True Witness and Catholic Chronicle* went so far as to accuse the *Herald* of being “race haters.”<sup>18</sup>

*The True Witness and Catholic Chronicle* was an English-language Irish-Catholic weekly founded in 1850 to counteract the Protestant bias of other Montréal English-language papers. *The True Witness* was politically sympathetic to the cause of Irish Home Rule. In 1885 *The True Witness* was pro vaccination but anti compulsory vaccination and anti-regulation. *The True Witness* displayed a notable indifference to the truth. *The True Witness* often attacked other newspapers that it felt diminished the reputation of the city of Montréal, especially the *Gazette* and the *Star*, by publishing too frequently on the smallpox epidemic. *The True Witness* was relatively sympathetic to francophone-Canadians, often taking it upon itself to translate the francophone mindset on behalf of other English-language newspapers.

*L'Etendard* was a French-language newspaper created by François-Xavier-Anselme Trudel in Montréal in 1883 as an organ for the Ultramontane movement in the Roman Catholic Church. The Ultramontane movement was popular among Roman Catholic francophones in Québec at the time. The Ultramontane movement in Catholicism referred to a movement in the 19<sup>th</sup> century calling for increased centrality in the Roman Catholic Church and for the increased centrality of the pontiff in all aspects of Roman Catholic life. Amongst francophone countries, adherence to the Ultramontane movement amongst francophones in Québec was particularly strong. *L'Etendard* started as a conservative newspaper but the Northwest Resistance caused the paper to take a more liberal turn.

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<sup>18</sup>“No honor for race-haters,” *The True Witness and Catholic Chronicle*. (Montréal, PQ), November 4, 1885.

During the epidemic *L'Etendard* largely avoided dwelling upon smallpox, favouring instead short, factual entries.

*La Presse* was a French-language “one cent” daily founded in 1884, which soon became the highest circulating French-language daily. *La Presse* had a reputation as a scandal rag, nonetheless, according to Rutherford it was a good paper that aimed for accuracy in its reporting. *La Presse* was founded as a conservative party organ for those who were disenchanted by the government of Sir John A. MacDonald. During the epidemic, *La Presse* was pro vaccination. However *La Presse* also balanced this by writing supportive articles in favour of those who suffered from vaccination injuries, most especially erysipelas which would turn out to be a significant component in vaccine compliance by francophones.

*La Minerve* was a French-language daily first published in 1826 as an organ of the Patriotistes. After the death of Ludger Duvarney, *La Minerve* became an organ for the Conservative Party. *La Minerve* was experiencing financial and circulation difficulties well before 1885.

*Le Monde Illustré* was a weekly published by Berthiaume & Sabourin, between 1884-1902. *Le Monde* mostly avoided publishing stories on the epidemic, but when it did, mostly stories about the erysipelas scandal, its writers could be quite scathing.

In general, the French-language newspapers lent considerably less space to the epidemic although this may have been mostly due to the smaller size of French-language papers at the time. Bliss writes “the French daily newspapers seemed hardly to notice the epidemic.”<sup>19</sup> French-language newspapers eschewed much of the editorializing on the

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<sup>19</sup>Bliss, *Plague*, 113.



epidemic in favour of short factual pieces. In fairness, French-language newspapers at this time were generally up to one half as small as English-language newspapers on average, because French-language newspapers struggled at the time due to low readership. Despite the population of Montréal being 56% francophone during this time, French-language newspapers would not catch up in readership until the beginning of the twentieth century. Rutherford notes that the “reading habit” was not as ingrained in francophone-Canadians. This is due to the tendency in the Protestant church to encourage the “reading habit” from the very beginning, which contrasted with the tendency in the Roman Catholic church not to do so. As well, the educated francophone elite preferred to read English-language papers such as the *Gazette*.<sup>20</sup>

Montréal newspapers prolonged avoiding mention of the smallpox epidemic as long as possible due in part to a desire to preserve the city’s reputation as well as the perceived need not to alarm the public. Newspapers wanted to avoid destroying the city’s reputation through casual discussion of smallpox, a fear that was warranted as the smallpox epidemic did palpably affect the trade and business in the city that year. In addition to safeguarding the city's reputation, the Health Department adhered to a misguided policy of refraining from alarming the public about smallpox unless deemed necessary. The *Star* reported that this was a coordinated policy by the Health Department that initially forbade Health Department officials from discussing the epidemic with reporters to avoid unduly alarming citizens. Even when the epidemic was at its peak, some newspapers took exception to what they considered to be excessive “smallpox literature” and some English-language newspapers took perhaps excessive pains to

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<sup>20</sup>Rutherford, *Victorian*, 62.

explain that the epidemic was confined largely to francophone working-class neighbourhoods. Perhaps not surprisingly given their disclosure about this policy of silence at the Health Department, the sole exception was the *Star*, which published stories about the smallpox outbreak well before other English-language papers and even before most French-language papers.

Cholera, the most feared of nineteenth century epidemics, was a topic of great concern in newspapers at the outset of 1885, which caused them to advocate ways of preventing a cholera epidemic arriving in Montréal in the spring. Cleanliness was believed at the time to be the best preventative for cholera, as it was thought that bad air or “miasmas” were to blame for many infectious diseases. At the time, Montréal, like many 19<sup>th</sup> century cities, was a dangerous and dirty place in the absence of modern-day sanitary practices. As a result, bad odors were present in the air, especially in the late spring, summer and early fall, when the frozen winter climate was not around to mitigate them, and these were considered to be dangerous harbingers of disease. In 1885 the city found that their “scavenging contractor,” tasked with cleaning and removing the debris which had built up during the winter, was undependable. This exacerbated the usual challenges in keeping the city clean. The press excessively emphasised the importance of cleanliness to prevent cholera “or any other infectious disease.” These stories were distinctly classist as working-class people were considered to be inherently dirtier than the middle class. While discussing the imminent threat of cholera, the majority of the press ignored the emerging smallpox epidemic until it was too late.

In my paper, I will explore the two different press environments with the aim of discovering differences in how these milieus encouraged divergent levels of vaccine

uptake between these two groups. I will first outline the historiography of 19<sup>th</sup> century infectious disease with an emphasis on the 1885 smallpox epidemic in Montréal. I will then describe how the smallpox epidemic broke out in Montréal during this year, despite the existence of a vaccine. Following this, I will provide a concise overview of the prevailing understanding of vaccines and infectious diseases within Montréal during the specified period. Subsequently, I will delve into an analysis of the strategies and approaches adopted by the city of Montréal to confront the smallpox challenge during this era. I will then discuss how the two different press environments dealt with the failures of Montréal health officials to act upon credible reports of painful and potentially fatal vaccine side effects in the French-speaking working-class and how reports of these side effects played into claims by the anti-vaccinators, Dr. J. Emery Coderre and Dr. A.M. Ross. These doctors were brutally slandered in the English-language press. I will finish by exploring how frustration at the length and seriousness of the epidemic led the English-language press, as well as writers of letters to the editor, to forcefully denounce the French-speaking working-class population for their failure to submit to vaccination. This in turn created fury amongst the francophone working-class that exploded into several violent episodes, the largest and most serious of which took place on September 28<sup>th</sup>, 1885, in direct retaliation to compulsory vaccination, introduced on that day.

### Historiography

Early medical histories and histories of epidemics and communicable diseases were written by doctors and were often about doctors. The causes and impact as well as the treatment and prevention of communicable diseases has roots within the society in which the diseases either thrive or do not thrive. Because of this, since the 1960's, the field of

history of communicable diseases has shifted towards social history which often provides a more realistic picture of how diseases impacted societies. An example is *the Cholera Years*, written in 1962 by Donald Rosenberg, which is a social history of the cholera epidemic in New York City in 1866. He found that the American people equated cleanliness in the city and town, to be equivalent to cleanliness of the spirit. It was only natural therefore that New York City, the largest, dirtiest and most vice ridden of all American cities, should bear the brunt of the 1866 cholera epidemic.<sup>21</sup> In 1980, Geoffrey Bilson wrote an influential history of cholera in Canada. In his book he wrote that cholera had a “massive impact” on nineteenth century society. Cholera created a great fear amongst people and mystification amongst doctors because there was no conception at the time of how cholera was spread, creating the impression that the disease was disseminated randomly.<sup>22</sup> In 1981, S.E.D. Shortt edited a collection of social histories by historians such as Geoffrey Bilson and Terry Copp. In his introduction Shortt argues that Canadian medical history should welcome the influences of social history, to a much greater extent than it had to that point. In his paper,<sup>23</sup> Bilson argues that health departments in cities during the 1866 cholera epidemic tried to advance the already discredited theory that cholera was spread by a miasma caused by widespread filth because it boosted their preferred cure of widespread sanitary improvements within cities.<sup>24</sup> Terry Copp, in his chapter, demonstrates that the widespread infant mortality of

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<sup>21</sup>Charles E. Rosenberg, *The Cholera Years: The United States in 1832, 1849, and 1866*. (Acls Humanities E-Book. Chicago: University of Chicago Press, 1987. <https://hdl-handle-net.ledproxy2.uwindsor.ca/2027/heeb.05735>), 17.

<sup>22</sup>Geoffrey Bilson, *A Darkened House Cholera in Nineteenth Century Canada*. Social History of Canada, 31. (Toronto: University of Toronto Press, 1980. <https://books-scholarsportal-info.ledproxy2.uwindsor.ca/uri/ebooks/ebooks3/utpress/2015-06-11/1/9781442656949>), 4.

<sup>23</sup>S.E.D. Shortt, (Samuel Edward Dole), *Medicine in Canadian Society: Historical Perspectives*. (Montréal: McGill-Queen's University Press, 1981), 12.

<sup>24</sup>Geoffrey Bilson, “Canadian Doctors and the Cholera.” *Medicine in Canadian Society: Historical Perspectives* (Montréal: McGill-Queen's University Press, 1981), 117.

the francophone working-class in Montréal was likely caused by tainted milk and water and that improvements in these areas in the early 20th century closed the infant mortality gap.<sup>25</sup> Nadine Blacklock wrote a major paper at the University of Windsor in 2008, called “Faith and Reason: An Examination of the Religious and Secular Response to the 1832 Cholera Epidemic in Montreal.” which explained how religious feeling informed responses to the cholera epidemic in 1832.<sup>26</sup>

Montréal’s smallpox epidemic has also received scholarly attention, much of which uses a social history approach, but all of which focus on different aspects of the epidemic. In 1984, Donald C. Firth wrote a PhD thesis at the University of Ottawa entitled “A Tale of Two Cities: Montreal and the Smallpox Epidemic of 1885,” which argues that while the English-speaking population of Montréal were obedient to medical professionals and therefore did not experience as much devastation as the francophone population, the francophone working-class population disregarded medical advice for a variety of reasons including poverty and overcrowding, but primarily because they regarded smallpox as a regular childhood ailment that children needed to go through to retain lifetime immunity. He further argues that the Health Department was unable to establish authority in enforcing health regulations due to errors.<sup>27</sup> This does not wholly answer the question of why the anglophone population was so obedient to medical officials while the francophone working-class were not.

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<sup>25</sup>Terry Copp. “Public Health in Montreal, 1870-1930.” *Medicine in Canadian Society: Historical Perspectives*. (Montréal: McGill-Queen’s University Press, 1981), 404.

<sup>26</sup>Nadine, Blacklock, “*Faith and Reason: An Examination of the Religious and Secular Response to the 1832 Cholera Epidemic in Montreal*.” (M.A. Major Paper, University of Windsor, 2008.)

<sup>27</sup>Firth, *Tale*, 5.

Historian Michael Bliss' 1991 popular history, *Plague: A Story of Smallpox in Montreal*, is to date the foremost work on the subject. This popular history demonstrated how a series of errors allowed the disease to spread into the community at large. This work also demonstrates how the epidemic devastated the lower-class francophone community of Montréal, who inflamed by the execution of Louis Riel were loath to follow the instructions of the largely English-speaking health establishment.<sup>28</sup>

Jennifer Keelen's 2004 PhD thesis for the University of Toronto titled "The Canadian Anti-Vaccination Leagues, 1872–1892" explores the anti-vaccination movement in Montréal. She found that "anti-vaccinator's" stressed that compulsory vaccination was a class-based domination of the working-class by those in the upper classes.<sup>29</sup> This idea resonated with anti-vaccinators in Montréal who added their own French Nationalist spin on the theory.

The media's impact on heightening anti-vaccine sentiments among the francophone working-class, while simultaneously bolstering vaccine acceptance among the English and Irish populations, remains underexplored. I hope to examine differences between the French and English-speaking media environments to discover the probable causes of these differences. I hope to speak to both Firth's thesis and to Michael Bliss's book, which does take ideas of social history into account that rarely comes into play in Firth's earlier thesis. I hope to complicate Keelen's findings by adding new ideas of racialization of francophones to the mix, as well as expand on how the two different media environments at the time escalated these differences.

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<sup>28</sup>Bliss, *Plague*, xiii.

<sup>29</sup>Keelen, *Canadian*, 13.

## Montréal and the Origins of the Smallpox Epidemic

By the end of the 19<sup>th</sup> century, the city of Montréal was majority francophone again although the anglophone minority still maintained their grip on the upper echelons of society. Some have said that the city was majority francophone thanks to the sky-high birthrate of francophone-Canadians sometimes referred to as the “Revanche des berceaux.” It is however, generally believed that significant in province migration from rural areas to the city can be credited with much of the increase in the francophone community in Montréal during this time. By this time there was also a significant Irish-Catholic population, thanks to significant immigration from Ireland to Canada.<sup>30</sup> In Montréal at this time the wealthier people, who generally were English-speaking Protestants, lived higher up on Mount Royal while the poorer population lived closer to the banks of the Saint Lawrence<sup>31</sup> in densely populated neighbourhoods. Here some neighbourhoods were subjected to yearly flooding from the very polluted St. Lawrence River.

Montréal, in the 19<sup>th</sup> century, had antiquated sewer systems inadequate to Montréal’s burgeoning population which resulted in a much higher mortality rate for francophone residents. In their book *Peopling the North American City*, Sherry Olson and Patricia Thorton call the higher mortality in cities in the 19<sup>th</sup> century the urban penalty.<sup>32</sup> Cities were much less sanitary than they are now. Methods of waste disposal were not to the scale needed to cope with the waste created by the people who lived in the city at population densities never seen before. Bettina Bradbury estimates that between 1851 and

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<sup>32</sup>Olson, *Peopling*, 90.

<sup>32</sup>Olson, *Peopling*, 90.

<sup>32</sup>Olson, *Peopling*, 90.

1891 the population of the city of Montréal grew by 260%.<sup>33</sup> Olson and Thorton observed that in a study examining the sewer systems of the era, it was found that neighborhoods characterized by high rates of infant mortality corresponded with areas of the city where sewer systems were identified as antiquated and in disrepair.

In most neighbourhoods, indoor water closets were fast becoming the norm, although this was not the case in the poorest neighbourhoods. The new water closets unfortunately flushed right into the soil below and contributed to the pollution in the city. Most neighbourhoods had water piped directly into the home. However, some poorer neighbourhoods had only one water source in most houses, and in some neighbourhoods, it was not at all uncommon to have two or three households share a single tap. In these same neighbourhoods, due to the defects in the sewer system, outdoor privies were still common, which proved an obstacle as they would be prone to overflowing with the yearly flood. Olson and Thorton's theory is that these defects in the sewer systems in some low rent, high density neighbourhoods, caused the mortality gap between the francophone working-class and the English, Scottish and Irish citizens of Montréal. This gap would only begin to close a few decades later when health authorities felt more compelled to correct these inequalities.<sup>34</sup>

Cholera was not present in 1885, however other diseases such as diphtheria, typhus and tuberculosis also thrived in overcrowded unsanitary conditions. Because the housing for the working-class was higher density, the working-class and poor also encountered more infectious diseases more often, and because poverty went hand in hand with poor nutrition and even malnutrition, they also were more susceptible to the ill effects of

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<sup>33</sup>Bradbury, *Working*, 19.

<sup>34</sup>Olson, *Peopling*, 122-124.



disease. In the year 1885, furthermore, the Health Committee spent much of their time urging their unreliable waste disposal contractor to perform the duties for which they were hired,<sup>35</sup> at least until smallpox became a bigger priority.

Tuberculosis also disproportionately affected the francophone working-class residents of Montréal at a higher frequency compared to their anglophone counterparts due to their milk and water sources being contaminated with the virus causing the disease. Tuberculosis killed on a yearly basis nearly as many as were killed in the 1885 smallpox epidemic in total.<sup>36</sup> The working-class were considerably more susceptible to tuberculosis than the middle and upper classes, because the water that was provided to their homes was more likely to be contaminated with the disease, as was the milk that was within the means of the working-class to buy. This further complicated the situation because without the benefit of laboratory medicine, it was not always clear which disease was affecting an individual. Scrofula, for instance, was a manifestation of tuberculosis that appeared on the skin and seemed superficially to be like smallpox. What *The Montreal Herald* referred to as “Milk adulteration,” a known cause of tuberculosis, was an ongoing concern at the time. *The Montreal Herald* wrote that the “duties of the sanitary staff” might properly include inspection of suburban dairy farms and of all milk sold in the city, which may be tested by lactometer and butyrometer by the Sanitary Inspector, and samples suspected submitted to the public analyst, who will give an official and complete analysis of these on payment of one-half regulation fees, the balance being paid by the Dominion Government.”<sup>37</sup>

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<sup>35</sup>Bliss, *Plague*, 61.

<sup>36</sup>Terry Copp, “Public Health,” 404.

<sup>37</sup>“Milk Adulteration,” *Montreal Herald*, (Montréal, PQ), March 12, 1885.

Although the working-class districts of Montréal were crowded with long-standing sanitation issues, the smallpox epidemic of 1885 originated from outside the city. It arrived in Montréal through the railway, and the aforementioned Pullman Conductor named George Longley who had come from Chicago by way of Toronto. He was brought to Hôtel Dieu, where his milder form of smallpox was initially mistaken for chickenpox, a completely unrelated disease. Additionally, Mr. Longley was marked with a vaccination scar. Therefore, the railway doctor, Dr. Thomas Rodger, was not sure at first of his diagnosis of smallpox. Upon determining Longley's diagnosis, Dr. Rodger ran into an obstacle; the Civic Smallpox Hospital had been closed four years previously. He attempted to have Longley admitted to the main hospital for Protestants, the Montréal General Hospital, but the attending physician, Dr. James Gray refused to admit him because smallpox was so contagious and the hospital was unsure of its ability to contain the disease.<sup>38</sup> Rodger's next stop was the home of Dr. William Hingston, a surgeon at the Catholic Hôtel Dieu, and mayor of Montréal during the city's most recent smallpox outbreak in 1876. Dr. Hingston wrote a letter admitting Longley to Hôtel Dieu. No one thought to inform the nursing sister that Longley was infected with smallpox, though she recognized it almost, but not quite, right away.<sup>39</sup>

Meanwhile, others in the hospital began contracting the disease. On March 23, a servant at Hôtel Dieu, Pelagie Robichaud became sick with smallpox, and she died on April 1<sup>st</sup>. Her sister Marie became ill with hemorrhagic smallpox on April 7, and she died on April 11. Dr Laroque, the Medical Health Officer at the time, was convinced to reopen

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<sup>38</sup>Bliss, *Plague*, 11.

<sup>39</sup>Bliss, *Plague*, 12.

the smallpox hospital by April 9<sup>th</sup>. By the 11<sup>th</sup>, Hôtel Dieu appeared already to be amidst a smallpox outbreak.

Early on, efforts were made to coordinate a vaccination program. By Mid-April, the city Health Committee had hired two vaccinating doctors, Dr. Nolin, and Dr. Bessey, who also was the chief provider of vaccine “lymph.” The vaccines, however, proved controversial when a contaminated vaccine supply led to cases of erysipelas. By May 1<sup>st</sup>, reports of multiple children contracting erysipelas due to vaccination started to circulate. Most of the English-language press did not credit these reports and neither did Dr. Bessey who claimed that with eight years’ experience he should “be able to tell good lymph when he sees it.” Nonetheless he suspended public vaccination on May 11 as a “gesture of good faith”.<sup>40</sup>

The smallpox epidemic was declared over for the first time on June 1<sup>st</sup> but the epidemic continued to simmer under the surface, breaking out with renewed fury at the end of the summer. It was at this point that the seriousness of the situation was fully appreciated for the first time. Amusements were ordered shut down, Montréal Mayor Honore Beaugrand announced the formation of a citizens committee to raise funds for families that were financially impacted by the epidemic, and the newly created Provincial Health Board started ordering compulsory vaccination.

### **Vaccinations and Medical Knowledge in 1885.**

At the time of the epidemic, smallpox was a highly lethal disease, killing up to a third of its unvaccinated victims. The disease had an incubation period of seven to ten days during which the victim seemed to be in perfect health. After the incubation period,

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<sup>40</sup>W.E. Bessey, “Bad Results from Vaccination,” *Montreal Gazette*, (Montréal, PQ), May 11, 1885.

the victim would develop an extremely high fever, followed by a rash which developed into pus filled pustules. The pus from smallpox as the pustules opened up gave off a particularly foul sickly-sweet odor. The pain from the smallpox pustules expanding was almost unbearable. Sometimes the pustules converged together. This was known as confluent smallpox, and it was inevitably fatal. These victims died of shock due to pain. Around 5% of all cases were a form of the disease known as hemorrhagic smallpox, wherein the pustules were filled with blood. This form too was inevitably fatal. D. A Henderson, speaking of his time as the director of the World Health Organization's smallpox eradication program between 1966 and 1977, called hemorrhagic smallpox a [literally] "bloody mess."<sup>41</sup>

Experiments were made starting before the first millennium to prevent smallpox or to at least mitigate its lethality by infecting oneself with a less lethal form, thereby contracting lifetime immunity to the disease. The practice of inoculation was believed to have started in India and spread along trade routes to China, eventually moving west along trade routes throughout Asia and into Africa. The practice was spread to Constantinople by the seventeenth century. The practice was not popularised in Europe until 1720 when Lady Mary Montagu brought the procedure, which she encountered in Constantinople, to England. The practice was popularized in North America by Cotton Mather, who was said to have learned the procedure from his enslaved person of African descent.<sup>42</sup> In 1796, Edward Jenner discovered a method of smallpox vaccination which involved infecting an individual with cowpox rather than smallpox. Jenner was a village

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<sup>41</sup>Donald A. Henderson, *Smallpox: The Death of a Disease : The Inside Story of Eradicating a Worldwide Killer*. (Amherst, N.Y: Prometheus Books, 2009),12.

<sup>42</sup>Henderson, *Smallpox*,44-45.

physician practicing in Gloucester in England in the late eighteenth century, who had a predisposition towards medical experimentation. Jenner made his discovery by paying heed to the long-held observation that milkmaids did not become infected by smallpox, nor did they as a rule bear the characteristic scarring of most smallpox survivors. This approach to inoculation was much safer as cowpox was not as dangerous to humans as smallpox. This rudimentary vaccine resulted in a much lower death rate by preventing smallpox or causing those vaccinated to get milder forms of the disease. By the end of the nineteenth century the effect on smallpox vaccination on life expectancy and the size of the world population was already palpable. The race was on to find other lifesaving vaccines.

Unfortunately, despite its success, the mechanism of how vaccination worked would not be fully understood for well over a century after its discovery, which proved consequential for the 1885 epidemic. Tragically for Montréal in 1885, it was many years in the future before it was discovered that the skin infection sometimes caused by vaccination itself, known as erysipelas, could be prevented if the vaccine and the vaccination site were properly sterilized. Erysipelas is a painful skin infection characterised by swelling, redness, and heat which is caused by the staphylococcus virus. It could quickly become fatal if not treated by antibiotics, not yet invented in the 19<sup>th</sup> century. Even the idea of sterilization, while quickly becoming an established medical fact in Europe, had not circulated everywhere at the same time.

Also not yet established by the medical community was the number of vaccinations required, and this proved critical in the course of the epidemic in 1885. It was not universally recognized that a single dose of smallpox vaccine did not provide lifetime

immunity, but rather, several doses of the vaccine as well as several booster shots were required. Even doctors who knew this, did not fully understand why this was. This became a crucial element in the trajectory of the epidemic when the train conductor who brought the disease to Montréal in the first place was not recognized by key medical staff as having smallpox.<sup>43</sup>

Some doctors in Montréal, however, were promoting the idea of needing more than one vaccine, even if they were not certain of the medical science behind the practice. In a speech made in 1876 during the previous serious outbreak of smallpox in Montréal, while he was Mayor of the city, Dr. Hingston quoted statistics that would suggest that the ideal number of smallpox vaccinations was four. Dr. William Hales Hingston was a physician who was educated at the Faculty of Medicine at McGill University. As an Irish-Catholic, Dr. Hingston was the head of surgery at the Catholic Hôtel Dieu. He was mayor of Montréal from 1875-1877, during which time smallpox was endemic, seemingly eradicated from the city in 1882. In patients treated in the General Hospital from 7 November 1874 to 1 November 1876, 493 recovered, and 161 died. Of the 161 deaths 114 were unvaccinated: 39 had one “vaccine mark”, eight had 2 “vaccine marks”, and none had three or four. He also commented that where a previously vaccinated person was “seized with smallpox not more than one in one hundred and thirty cases died.”<sup>44</sup> Again, there would be improvements to the smallpox vaccine in the future that would make the risk of dying from the vaccine vanishingly small.

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<sup>43</sup>Bliss, *Plague*, 49.

<sup>44</sup>“Vaccination,” *Montreal Gazette*, (Montréal, PQ), August 29, 1885.

That the virus could at the time cause a mild case of cowpox provided an opening for anti-vaccinators in Montréal during 1885 to attack vaccination, especially given that cowpox as it presented in humans was virtually indistinguishable from mild smallpox. Even in 1885, many doctors did not believe that they were different diseases. Dr. J. Emery Coderre, who was one of the most influential anti-vaccinators in Montréal at the time did not believe that smallpox and cowpox were in fact different diseases. He considered cowpox to simply be “smallpox of the cow.”<sup>45</sup> Add to this that some people who received smallpox vaccination also could at a later time contract the disease and the reasons for confusion become obvious. As seen from Dr. Hingston’s speech, some doctors realized as early as 1876 that more than one vaccination was needed to confer full immunity. This was by no means universally known, and many patients did not have the ideal “four vaccine marks.” Many died despite being vaccinated, although generally they were not sufficiently vaccinated. The messaging in the press regarding the number of required vaccinations, due to the lack of knowledge and consensus on this point, was opaque.

A lack of medical knowledge on the need for sterilization, contributed to erysipelas outbreaks arising from vaccination, which affected around fifty people in Montréal, the majority of whom were young children from working-class francophone families, and this gave anti vaccinators a strong vindication of their beliefs. Vaccines often became infected during this time by bacteria because Lister’s discovery of the necessity to sterilize medical materials, was not yet widely known or accepted. Dr. Bessey, who supplied the vaccine was defiant on Lister’s discoveries when he perceived he was being

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<sup>45</sup>Keelan, *Canadian*, 130.

attacked due to the issue with the tainted vaccine.<sup>46</sup> More than anything else, the fact that at least fifty children contracted erysipelas gave anti-vaccinators of the time ammunition to attack immunization and gave them credibility with the public needed to disseminate their misinformation. Furthermore, it also possibly contributed to the reluctance shown by francophone parents to vaccinate their children. That the French-language press wrote graphic descriptions of these cases might also have contributed to their reluctance. It did not help that the English-language press for the most part met these stories with skepticism and diminishment of their seriousness.

### **Management of Montréal's Smallpox Epidemic**

Although smallpox would be a major story in 1885, earlier in the year, the Montréal newspapers were more focused on cholera. This is perhaps not surprising. Cholera struck seemingly healthy individuals out of nowhere, causing uncontrollable vomiting and diarrhea until the victim died a horrible death, sometimes within hours of becoming sick. Death was usually caused by dehydration. How the disease spread was not common knowledge in 1885. During an 1849 outbreak in London, John Snow proved, by tracking the water gathering habits of the victims, that this outbreak was connected to a water pump whose water had been infected by a sick baby. John Snow was a London anesthesiologist, who was skeptical of the theory prevalent in the early nineteenth century that miasmas spread disease. Snow published his results in an 1849 paper “On the Mode of Communication of Cholera” establishing that contaminated water could play a role in the spread of the disease.<sup>47</sup> In 1884, Robert Koch isolated the virus

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<sup>46</sup>W.E. Bessey, “Bad Results from Vaccination,” *Montreal Gazette*, (Montréal, PQ), May 11, 1885.

<sup>47</sup>Steven Johnson, *The Ghost Map: The Story of London's Most Terrifying Epidemic-- and How It Changed Science, Cities, and the Modern World*, (New York: Riverhead Books, 2007), 140.



that caused cholera which he called the *vibrio cholerae*. The virus was spread through the fecal oral route often through contaminated water. Robert Koch was a German physician and microbiologist, who at the time was based in Berlin. His discovery of the bacterium that caused tuberculosis, anthrax and cholera were fundamental in the development of the germ theory of the spread of disease.

In 1885, the medical profession in Montréal were aware of these recent discoveries on the transmission of cholera, but older ideas about the disease being spread through the air lingered. In April of that year, Dr. J.B. O'Connell gave a learned lecture in Montréal at the Natural History Society about Dr. Koch's discovery. Dr. O'Connell exhibited a specimen of the virus *vibrio cholerae* to those who attended his speech. The method of how the disease was spread was not necessarily known and this theory was by no means universally accepted in 1885. One thing that was agreed upon was that filth had a role to play in the spread of cholera. It was also believed that cholera tended to die out in colder climates when winter temperatures froze everything and reappeared in warmer weather.

As the *Herald* wrote in a March 3<sup>rd</sup> editorial:

As spring approaches many people are scanning the paper for news of cholera in Europe. The frosts of winter put a stop to the ravages of that dread disease in France and there are many who are looking with apprehension for its breaking out again when the warm weather returns. If it does reappear in the seaboard cities of Europe, then there is almost a certainty of it being carried across the ocean to America. And if it visits America, there is hardly a chance of its passing by Montreal.<sup>48</sup>

Fortunately, according to the editorial in the *Herald*, there was a simple remedy to prevent "a visitation of the cholera": "All that is to be done is to make the city clean and to keep it clean."<sup>49</sup> It was not as simple as that of course. Cleanliness was an ideal of the

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<sup>48</sup>"Let us be prepared," *Montreal Herald*, (Montréal, PQ), March 3, 1885.

<sup>49</sup>"Let us be prepared," *Montreal Herald*, (Montréal, PQ), March 3, 1885.

middle and upper classes who preached the gospel of cleanliness to the working-classes. The working-class struggled to keep their overcrowded dwellings clean and bore the brunt of an inadequate sanitation infrastructure that left their environment unsanitary. It was thought amongst the upper classes that the working-class were dirty. “It must be borne in mind that sanitary regulations, no matter how rigidly enforced, can never make an unwilling people clean,”<sup>50</sup> said Chairman Gray, in a speech in early March.<sup>51</sup> Furthermore, the working-class failed to achieve an acceptable level of cleanliness as explained in the *Herald*, because they were unwilling to try acceptable sanitation methods. “Mere surface cleaning is of little use, neither is it of any avail to clear away the filth from one quarter of a town while other quarters are allowed to remain in an unclean condition.”<sup>52</sup>

The upper and middle classes often referred to the poor and working class as dirty, an especially unfair comment as the working-class neighbourhoods in Montréal at the time were unsanitary. The *Herald's* comments about certain Montréal neighbourhoods having “unclean conditions” was a veiled reference to the city’s working-class areas. In Montréal, the working-class districts were often next to the river and were prone to flooding on a yearly basis.<sup>53</sup> The sewer systems of the time were inadequate to handle these conditions and were a constant concern for residents and city officials. That information, however, was never mentioned in the newspapers, and the francophone working-class were often blamed for unsanitary conditions. That non-Anglo Saxons were dirty was a common slur used against the working-class francophones, who bore the

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<sup>50</sup>“Civic Affairs,” *Montreal Herald*, (Montréal, PQ), March 18, 1885.

<sup>51</sup>Henry Gray was a pharmacist elected to city council who had the support of the Mayor Honoré Beaugrand as the Chairman of the city of Montréal’s Health Committee.

<sup>52</sup>“Cholera prevention,” *Montreal Herald*, (Montréal, PQ), April 23, 1885.

<sup>53</sup>Bradbury, *Working*, 159.

brunt of the accusation of uncleanness as can be seen in this somewhat baseless accusation about the cleanliness of milk “It is well known that, as a rule, *habitants* do not take care to prevent the sewage from the byres and stables mixing with the water given to the cattle, and that is the principal seat of the evil that produces unwholesome milk.”<sup>54</sup> The use of the term “habitants” is telling, as it is a historic reference to the French-speaking people of Québec.

Indeed, *The Montreal Herald* was the most dependable of the English-language newspapers in maligning the francophone working-class population. The *Herald* seemed, for example, to use the term “intelligent people” as a synonym for the English-speaking middle and upper classes, whereas the term “unintelligent people” was their euphemism for the working-class, and most specifically, francophones. Furthermore, a *Herald* correspondent wrote that “unintelligent people” are “simply reeking with filth.”<sup>55</sup> Small wonder then that the francophone community expressed most of their anger towards the *Herald*. Although cholera never reached North America in 1885, the value of cleanliness still had a hold on the imagination of the mostly middle-and upper-class Montréal medical community.

Besides cleanliness, another issue that was discussed in Montréal’s medical community in March and April was vaccination. Because there was a vaccine for smallpox in 1885, the Medical Officer and the Health Committee were confident when George Longley’s case came to their attention, that they would have no trouble containing the disease, optimism that in hindsight was unwarranted. This confidence likely explains the lack of urgency shown in a news report on a mid-March Health

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<sup>54</sup>“Milk Adulteration,” *Montreal Herald*, (Montréal, PQ), March 12, 1885.

<sup>55</sup>“Cholera prevention,” *Montreal Herald*, (Montréal, PQ), April 23, 1885.

Committee meeting, summed up neatly in the following line: “The immediate recommencement of vaccination was recommended, and the plan proposed by Dr. Mount,<sup>56</sup> was advocated. The question, however, was relegated to the next meeting.”<sup>57</sup> This was several weeks after the first case was discovered at the end of February, but the committee showed no urgency in addressing it.

Dr. Mount’s plan was to appoint two physicians: one for the eastern half and one for the western half of the city, and for vaccination to be done systematically and yearly. Although it was a sound plan based on the known medical knowledge of vaccines at the time, the Health Committee waited until September, over six months after the initial outbreak, before discussing compulsory vaccination. Health authorities seemed to have been reluctant to even admit there was any smallpox in Montréal which perhaps explains the following comment by Alderman Mount. “He thought this would be much better than the present system, besides, their services (the city vaccinators, which he had earlier suggested hiring) could be made useful *in the case of epidemic*.”<sup>58</sup> [emphasis mine]

The Health Committee was reluctant to admit that smallpox was in the city due to a strategy of not causing undue alarm amongst the citizens despite francophones already contracting and dying from the disease. That health officials felt in March and especially April that reporting that there was smallpox in the city would cause undue alarm could be perceived as lack of regard for francophone citizens in whose neighbourhoods smallpox was rapidly spreading. One month later *The Montreal Herald* said this “It is interesting to learn that up to last evening there were sixteen cases of small-pox in the Civic hospital,

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<sup>56</sup>A French-speaking physician who was serving as an Alderman on the city council and was a member of the Health Committee

<sup>57</sup>“The Board of Health,” *Montreal Gazette*, (Montréal, PQ), March 18, 1885.

<sup>58</sup>“Civic Affairs,” *Montreal Herald*, (Montréal, PQ), March 22, 1885.

one of them having gone from the General hospital. There is not in the community the same dread of smallpox which once prevailed, but it may be as well for those who have not attended to the vaccination of the members of their families to give the matter early consideration.”<sup>59</sup> This remark is significant in that it is representative of the lack of concern in editorials about the smallpox outbreak, despite that there already were deaths reported as a result of the disease. There was not the same level of dread in the anglophone community, because they were untouched, for the most part, by the outbreak.

As mentioned earlier, French-speaking Canadians were less likely to be vaccinated and had a higher death rate. Being working-class and impoverished was not the only factor, however, as Montréal’s English-speaking working-class people of Irish descent were more likely to be vaccinated than French-speaking people. There may be several reasons for this difference. According to Olson and Thornton, Irish-Catholics in Montréal had considerably more class mobility than francophone Canadians, and more class mobility compared to Irish Catholics in other North American cities.<sup>60</sup>

The higher levels of vaccine compliance among the Irish Catholics may have been influenced by reading *The True Witness and Catholic Chronicle*, a Montréal English-language Catholic weekly which was founded specifically to counteract the Protestant slant of most of the English-language press. The newspaper supported vaccination, and in an April 1885, article entitled, “The Value of Vaccination,” *The True Witness and Catholic Chronicle* wrote in an unsigned article that,

Vaccination, even in those cases in which it is not successful in preventing the dreadful scourge of smallpox, is capable of modifying its deleterious action to so great a degree that death very rarely occur in patients who have been previously vaccinated. If persons are not vaccinated nine out of ten who are

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<sup>59</sup>“Smallpox,” *Montreal Herald*, (Montréal, PQ), April 18, 1885.

<sup>60</sup>Olson, *Peopling*, 25.

exposed to the contagion contract the disease and in most instances in a very severe form, -so severe, in fact, that, in round numbers, no less than one-half, or fifty per cent, die.<sup>61</sup>

This perhaps not entirely verifiable statement appeared at the end of April. As noted earlier, *The True Witness* felt at times free to take some liberties with the truth. Also, it is clear from this statement that due to the prevalence of infectious disease in the late nineteenth century, a great deal more perceived risk was acceptable in nineteenth century vaccines.

Although its medical claims cannot be verified, *The True Witness* nevertheless aimed to bring awareness of smallpox and vaccination. *The True Witness* went on to note that “in fact, of the children under five years of age, who are affected with smallpox, more than half perished, the exact percentage of deaths to 100 cases being upward of fifty-six.” It also attempted to downplay the downsides of vaccination, noting that “this immunity from the most fatal of all pestilences is owing entirely to the practice of vaccination, the good effects of which in millions of instances entirely outweigh the few cases of inconvenience that may have occurred from its practice.” The claim that in the practice of vaccination from “millions of instances entirely outweigh the few cases of inconvenience that may have occurred from its practice” cannot be credited to vaccination in 1885 because the risks of vaccination were still so large. Erysipelas, for instance, was a known and somewhat common sequelae of smallpox vaccination.

The Irish Catholic community were largely compliant with vaccination possibly due to optimistic commentary such as this, as well as the support given to vaccination by

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<sup>61</sup>“The Value of Vaccination,” *The True Witness and Catholic Chronicle*, (Montréal, PQ), April 29, 1885.

the clergy at their parishes. Their positive view of vaccination in 1885 may be responsible for the providence, as Father Dowd of Saint Patrick's Parish put it, that "the Irish people are alive to the benefits of vaccination." Father Dowd, furthermore, was an enthusiastic promoter of vaccination, crucial at a time when many people still looked to their priests and ministers for guidance. A barrier to vaccination and inoculation in earlier times and still present in Montréal in 1885 was the belief that vaccination disrupted the will of God in matters of life and death. Father Dowd and other priests who supported vaccination dispelled this notion by calling vaccination a gift from God. The English-Scottish and Irish Protestants were also supportive of vaccination, which explains why such a large percentage were vaccinated early or before the epidemic which resulted in their low death rate from the disease. For the vaccine resistant francophones however, ambivalence in the press, could allow room for doubt against vaccination to grow. Even the allegedly optimistic piece in *The True Witness* was hardly reassuring to a person who is afraid to be vaccinated. This, as we shall see, was a perfectly natural reaction to the vaccine used in 1885.

It is important to remember when assessing the actions taken by French-speaking Montréalers against the vaccine, that death rates from any number of infectious diseases was much higher for the francophone working-class than it was for certain other ethnic groups. This included Irish-Catholics, who often also were members of the working-class. This meant that they suffered many of the same problems possibly contributing to soaring death rates among the francophones. These included low wages which in turn contributed to malnutrition and overcrowding, as well as to concentration in low rent neighbourhoods which only had access to contaminated water and had antiquated

sanitation systems. That francophones had a higher death rate was not a trend discovered only in retrospect. Indeed, this was commented upon frequently in the contemporary press as in this characteristic comment in *The True Witness and Catholic Chronicle*: “Death was busiest among our French-Canadian citizens, carrying off 323 out of the total 450, thus leaving only 127 for all other nationalities.”<sup>62</sup>

Poverty was an underappreciated factor in fueling the 1885 smallpox epidemic, especially in earlier histories. In 1885 the smallpox epidemic effortlessly exploited the divisions between rich and poor. The rich and middle class were able if they wanted to pay to be vaccinated in the comfort of their doctor’s office.<sup>63</sup> The poor and working-class relied on free vaccination clinics that were inadequate for the potential demand, had limited hours, and were virtually inaccessible given the long working hours of the working-class labourers. Employers required employees to be vaccinated. To prove their vaccination status, they needed to submit to a vaccination in which they did not have confidence and furnish a vaccine certificate they had to pay for with money they could ill afford on their inadequate wages. The consequence of not doing so was to risk not being able to earn an income. Due to the high density of housing lived in by the working-class and poor, they were unable to control their exposure to the disease to the same extent as the middle class and upper classes, as advice by medical professionals to isolate smallpox patients in their homes was unrealistic at the housing densities in which they lived.

It took most of the English-language press some time to realize that the working-class were harmed by requirements for smallpox vaccination. This is not surprising as

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<sup>62</sup>“Montreal’s Death Rate,” *The True Witness and Catholic Chronicle*, (Montréal, PQ), July 22, 1885.

<sup>63</sup>Bliss, *Plague*, 53.



most of Montréal's newspapers except for the *Star* aimed their content towards the middle and upper classes. That most of the press did not understand this was confirmation, if any was needed, that they were out of touch with the needs of the working-class. Vaccine was provided free, however at the beginning of the epidemic, it could be time consuming to access especially to the working-class who often spent much of their lives working to barely get by. An example of this is that the *Herald* wrote on April 22, that the vaccine was available "gratuitously from 9-10 at the Health Office."<sup>64</sup> The indifference of the press and especially of the English-language press, was only one symptom of the indifference shown to the plight of the poor and the working-class in Montréal, who made up the majority of Montrealers at the time.

#### **Erysipelas as a Factor in Vaccine Refusal**

A major contributing factor to vaccine refusal by the francophone community, and arguably the major factor, were cases of erysipelas that affected some who were vaccinated. French-speaking working-class children were particularly susceptible, likely because they relied on the city vaccinators.<sup>65</sup> Subsequently alarming reports of children who were vaccinated by the city vaccinators developing this side effect were dismissed by the English-language press but notably not by the French-language press. The only English-language paper to credit these accounts at all was *The Montreal Star*, the newspaper that aimed to be an "organ for the working man." The *Star* reported as early as May 1<sup>st</sup> that there "were several complaints against the vaccination done by the health officers." They reported that Joseph Chabot complained that after his young son was

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<sup>64</sup>"The Smallpox," *Montreal Herald*, (Montreal, PQ), April 22, 1885.

<sup>65</sup>Bliss, *Plague*, 51.

vaccinated by Dr. Nolin that his sons arm became swollen and covered in sores.<sup>66</sup> Less than a week later however, the *Star* wrote that “the animal vaccine was doing its work in a very satisfactory manner” and that Alderman Gray and Dr. Bessey had distributed two thousand points of vaccine. They wrote furthermore, that “the medical practitioners who have received the vaccine “speak of it in very eulogistic terms.”<sup>67</sup> This is a strange statement to make of a vaccine which they had reported less than a week earlier was causing serious and painful reactions.

Faced with vaccine refusal in the francophone community even the *Star* became more dismissive of erysipelas. By June 6<sup>th</sup> they wrote that there was unfortunately a prejudice against the public vaccine due “to a few bad cases which had occurred.”<sup>68</sup> The English-language press likely downplayed the prevalence of side effects because they feared that discussing these side effects would affect the vaccines image. However, by dismissing the fears, they allowed room for exaggerated reports by anti-vaccinators to fill the vacuum left by their silence. The *Star* also stopped publishing reports on side effects of the vaccine once it became clear that vaccine compliance might be affected. Hugh Graham of the *Star* was known to be outspokenly pro-vaccination and pro compulsory vaccination. This likely blinded the *Star* in this instance to their stated mission to be an organ for the working man. The press of both languages was by and large supportive of vaccination, but the French-language press was not supportive to the point of dismissing the very real distress that these cases caused in the French-speaking population.

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<sup>66</sup>“The Smallpox,” *Montreal Daily Star*. (Montréal, PQ), May 2, 1885.

<sup>67</sup>“The Smallpox,” *Montreal Daily Star*. (Montréal, PQ), May 8, 1885.

<sup>68</sup>“The Smallpox,” *Montreal Daily Star*, (Montréal, PQ), June 6, 1885.

The French-language press at the time estimated that fifty children suffered from erysipelas, the majority of whom were francophone, out of three thousand who were vaccinated at the time. This likely low estimate was still excessive for the number of children vaccinated. This caused the vaccination program to be temporarily stopped on May 11<sup>th</sup>, a move which had the likely effect of causing more ambiguity around the importance of vaccination. The number of children who experienced the side effect of erysipelas was a tangible difference between the 1885 epidemic and a previous outbreak in 1876. In this past epidemic only around 700 people died of smallpox in that year as opposed to the over 3000 that died in 1885. This, despite the circulation during the mid 1870's of anti-vaccination rhetoric.<sup>69</sup> The evidence suggests that the outbreak of erysipelas contributed to vaccine hesitancy, especially in the French-speaking population who experienced the majority of these cases. This estimate of fifty cases was most likely a low estimate as not all cases would be recognized as erysipelas, and not all cases would even be reported. This is especially so given the diagnostic capabilities of the average doctor in the late nineteenth century. This is if a case was seen by a doctor at all, which in a mild case it might not have been.

The erysipelas outbreak was conceivably disastrous for vaccine compliance on at least four different fronts. It gave the francophone population a justifiable reason to fear vaccination, it provided an opportunity for cases of erysipelas to be diagnosed as “smallpox caused by vaccination,” it demonstrated to the francophone community the lack of regard in which they were held by health officials, and it provided anti-vaccinators with ample proof that vaccination was not safe. Pausing the vaccination

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<sup>69</sup> “Vaccination,” *Montreal Gazette*. (Montréal, PQ), August 29, 1885.

program for a time and acquiring vaccine from a different source might have solved the problem of children developing erysipelas, but it did not solve the problem with vaccine compliance. As seen from reports in the *Star*, doctors gave the erysipelas controversy as a reason to distrust vaccine from the city well into August.<sup>70</sup> The French-speaking working-class cited erysipelas as a reason to not be vaccinated until well into September.<sup>71</sup> We have seen that diagnosis was by no means a defined art during this time and that erysipelas could complicate the diagnosis of smallpox (and vice versa), as many cases of erysipelas could be misdiagnosed as smallpox. Worse, cases of erysipelas could be confused with one of the many serious diseases that the smallpox vaccine was reputed to cause. Smallpox vaccination had a reputation for causing syphilis, another disease which erysipelas could superficially be mistaken for. Next, the lack of concern that the English-language press showed, and that health officials demonstrated in the press for the victims of vaccine side effects likely diminished in the eyes of the francophone public, the ability of the health officials to be empathetic to any of their concerns about the vaccine. This is considering the fact that at the time (1885) there were many very valid concerns about the vaccine. Finally, the shadow epidemic of erysipelas proved the point that most of the anti-vaccinators at the time were trying to make about the vaccine, and this shadow epidemic gave misinformation about the vaccine ample room to grow and spread.

The French-language press was considerably more sympathetic to the plight of parents whose children contracted erysipelas from the vaccine, and they were incensed that most of the English-language press and the predominantly English-speaking medical

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<sup>70</sup>“French-Canadian Doctors on Vaccination,” *Montreal Daily Star*, (Montréal, PQ), August 15, 1885.

<sup>71</sup>“The Citizens Committee,” *Montreal Daily Star*, (Montréal, PQ), September 2, 1885.

establishment ignored or at best belittled the seriousness of these cases. This meant that they printed accounts of parents whose children had serious, in some cases fatal or extremely disfiguring or disabling cases. For example, on the 28<sup>th</sup> of May *La Presse* wrote about the case of the child of Monsieur Forget,

*“avocat, qui a été vaccine avec le vaccin de la ville, souffre depuis plus d'un mois des suites de cette inoculation. Après avoir eu un érysipèle qui a envahi tout le bras gauche, deux abcès se sont déclarés et l'enfant n'est pas encore hors de danger.”* (The child of M. Forget, Lawyer, who was vaccinated with the city vaccine, has been suffering for a month from the vaccination. After erysipelas invaded the entire left arm, two abscesses formed, and the child is not yet out of the woods.) *“Voici un cas à ajouter aux autres. Les vaccineurs de la ville ont beau dire que ces complications résultent du manque de soin, on est en mesure de prouver le contraire quand on le voudra.”* (Here is a case to add to all the others, The city vaccinators say these complications are caused by lack of care [on the part of parents] but we can easily prove the reverse if we want.)<sup>72</sup>

Another case was noted in the May 29th EDR version of *La Presse*:

*“On lit une lettre de M. P. Pelletier, prévenant le comité qu'il est sur le point de poursuivre la cité pour \$5,000 pour dommages occasionnés es par la mort de deux enfant, mort causée par suite de la mauvaise vaccination opérée par le médecin vaccineur de la ville.* (A letter was read from Mr. P. Pelletier, advising the committee that he is suing the city for \$5,000 for damages caused by the death of two children, caused by bad vaccination carried out by the city's vaccinating doctor)<sup>73</sup>

According to Dr. Bessey, as quoted in *La Presse*, he is not “responsible for the children’s poor constitution” and the city lawyer Monsieur Roy claimed that the city was not responsible for the condition of the vaccine and that this is the responsibility of the vaccinating doctor. In other words, neither the city nor the vaccinating doctor claimed any responsibility for these cases, though

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<sup>72</sup>“Le Vaccin de la Ville,” *La Presse*, (Montréal, PQ), May 28, 1885.

<sup>73</sup>“Commision d’Hygiene,” *La Presse*, (Montréal, PQ), May 29, 1885.

presumably the city and the vaccinating doctors should have taken responsibility for the speed at which they responded to these complaints. Dr. Bessey's comment that he was not responsible for the children's "poor constitution" is hardly expected to be acceptable to the parents whose children were affected by this problem. *The Montreal Gazette* not surprisingly, was not as sympathetic to the affected children and actively tried to downplay the seriousness of the side effect in support of Dr. Bessey: "Three thousand children have been vaccinated and of them only ½% have taken erysipelas. These cases were entirely confined to the grey nunnery and St. Joseph's asylum and were all sickly and weakly children."<sup>74</sup> That most of the children who were affected by erysipelas were "sickly and weakly children" is no doubt true, however, the children's parents were not necessarily the cause of this, nor were the children.<sup>75</sup> The working-class struggled to eat enough and nutritious enough food, which exacerbated their susceptibility to disease of all types. The situation could only be worse for children held in an orphanage. It is not at all surprising if many of them were "sickly and weakly."

The English-language press also downplayed the number of cases of erysipelas where they could. As an example, the *Gazette* reported that ½ % of three thousand children who received the vaccine reported erysipelas (fifteen), while the number reported in *La Presse* was fifty. The exact number will never be known, although there seemed to be at least five distinct cases specified in the French-language press. These most likely were only those cases that were

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<sup>74</sup>"The Public Health," *Montreal Gazette*, (Montréal, PQ), May 19, 1885.

<sup>75</sup>Olson, *Peopling*, 90.

distinctive enough to interest the press of the cases that were reported. Add to this the case written about in the *Star*, not to mention twenty-one possible cases from the orphanage as seen in the *Gazette* and there were considerably more reported cases than fifteen.

Earlier historians often did not mention erysipelas at all and if they did, they downplayed the number of cases and the result that this may have had on vaccine compliance. Micheal Bliss in his history of the epidemic *Plague* stated that the doctor who examined the children at the orphanage, Dr. Borque, exaggerated the number of cases at the orphanage. This is not something that could be definitively proven over a hundred years later and is based on the testimony of the possibly biased doctors employed by the city to investigate the erysipelas outbreak.<sup>76</sup> Bliss later commented that “there was no longer any evidence that rumours and complaints about the quality of the Montréal vaccine had any foundation.”<sup>77</sup> However, when the claims were made there is every evidence that they were highly credible. Dr. Bessey, who supplied the vaccine did not, in Bliss’ words “credit the claim” that there were 21 out of 24 vaccinated cases of erysipelas in the orphanage alone, and indeed Dr. Bessey continued to obstinately claim that after 8 years of experience he “ought to know good lymph when he sees it.” But Dr. Bessey appeared to be generally obstinate throughout in crediting any claims of erysipelas. Furthermore, he accused Dr. Borque of harboring anti-vaccination sentiments, which makes any claim he

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<sup>76</sup>Bliss, *Plague*, 57.

<sup>77</sup>Bliss, *Plague*, 207.

might have to be impartial unlikely.<sup>78</sup> His claim about Dr. Borque may be true, but hardly is relevant when there is a possible situation of tainted vaccine, which was not an unknown problem at the time. We will see that Dr. Bessey could hardly be considered an impartial actor in this situation, seeming, as he did to take criticisms of his vaccines as criticisms of his professional competence, which he dismissed out of hand.

Dr. J. Emery Coderre was the primary anti-vaccinator working in the French-language in Montréal in 1885 and his writings were often quoted in the French-language press as proof of the dangers of vaccine. Dr. Coderre was quoted in *Le Monde Illustré* as having warned the public of this sort of side effect from the smallpox vaccine several years before the epidemic: “*Les nombreuses observations faites, il y a quelques années, par le Dr. Coderre et celles plus récentes réunies par plusieurs médecins de différentes parties de la province de Québec, prouvent qu’on y va un peu trop À la légère.*” (The numerous observations made a few years ago by Dr. Coderre and those more recently brought together by several doctors from different parts of the province of Québec, prove that we are taking things a little too lightly.) *Le Monde* goes on to note that after vaccinating over three thousand people it was suddenly discovered that there were miasmas in the spring air which made the atmosphere too “unsettled” to vaccinate. This was a claim made by Dr. Hingston in the *Gazette* and was the official reason for suspending vaccination on May 11<sup>th</sup>. In short, the Health Department wanted citizens to believe that after vaccinating for over a month, they only just realized that the miasmas

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<sup>78</sup>W.E. Bessey, “Vaccination and Erysipelas,” *Montreal Gazette*, (Montréal, PQ), May 8, 1885.



floating around at that time of year made vaccinating dangerous. (“*Franchement, ne trouvez-vous cela bien étrange?*” “Frankly, do you not find this very strange?”)

*Le Monde* was generally very critical of the English-language press and mostly English speaking health officials for dismissing the seriousness of the erysipelas outbreak. *Le Monde Illustré* continues: “*Mais, dit le président de la commission d'hygiène, le mal n'est pas si grand qu'on le dit, et sur ces trois mille vaccinés vous trouverez À peine cinquante cas d'érysipèles, etc.*” (“But, says the chair of the hygiene commission, the harm is not so great, and among these three thousand vaccinated you will barely find fifty cases of erysipelas, etc.”) They continue that this is fifty cases too many but that if they looked, they could easily find double or triple that number. The English-language press never seemed at any point to acknowledge even as many as fifty cases, preferring instead to downplay the number any way they could. They further condemn health officials and the English-language press for claiming that the children who contracted erysipelas were already “unhealthy” or that the infections are the fault of the parents because they did not follow basic hygiene principles to care for the vaccination site. They (*Le Monde Illustré*) end by accusing the Health Committee of having to prove that they are the masters!<sup>79</sup> In short, the medical establishment is using the erysipelas crisis as an opportunity to prove their “racial” superiority. In the nineteenth century race had a much broader application than is used now, applying as it did to the differences between what would now be considered ethnic groups. This demonstrates the amount of anger displayed in the French-language press towards the Health Committee and towards Dr. Bessey for not paying attention to reports of erysipelas in a more

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<sup>79</sup>*Le Monde Illustré* (Montréal, PQ), June 6, 1885,

expeditious manner. It also illustrates that not taking this seriously may possibly have helped to give more credibility to anti-vaccinators such as Dr. Coderre.

Meanwhile, *The Montreal Gazette* countered the claims made in *le Monde*, defending officials, and downplaying the side-effects of the vaccines. It published an article asserting that according to the Board of Health, only six children at the St. Josephs' asylum were affected by erysipelas. This is still a large number out of twenty-four children vaccinated at the institution. The *Gazette* also wrote that Dr. Hingston wrote a letter to the Board of Health which attributed erysipelas to "the crude and unsettled condition of the atmosphere" and recommended not vaccinating children who were not in "perfect health." This in effect divested Dr. Bessey of blame.<sup>80</sup>

Dr. Bessey suspended vaccinations after May 11<sup>th</sup> in a "gesture of good faith" after which, the Health Committee rewarded Dr. Bessey by promoting him to an interim role of Medical Officer of Montréal. Dr. Bessey continued to speak to the press to defend vaccinations and the quality of his vaccine lymph. Dr. Laroque, who had been the Medical Officer at the time of the initial outbreak, had been inexplicably absent from his position since mid-April, around the time that smallpox spiraled out of control.<sup>81</sup> Although Dr. Bessey had expressed reluctance to continue as public vaccinator due to the controversy with the vaccines, the Health Committee of Montréal apparently had enough confidence in him to appoint him to serve as the head of the organization on an acting basis.

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<sup>80</sup>"The Board of Health," *Montreal Gazette*, (Montréal, PQ), May 13, 1885.

*La Presse*, by this time the most widely read French-language newspaper in Montréal, continued to show more sympathy to the victims of erysipelas. They reported on a story in which two children of Pierre Ouelette developed cases of erysipelas after being vaccinated by Dr. Bessey where “*Les deux petits corps étaient décomposés avant le décès.*” (“The two small bodies started to decompose before they died”). *La Presse* went on further to explain that cases like these created in the Western district a completely natural fear.<sup>82</sup> This most likely is referring to the Montréal suburb of St. Henri, which was a francophone working-class suburb which was significantly affected by smallpox.<sup>83</sup> If these were the stories the French-speaking public read or heard second hand this might have had the effect of making them more reluctant to be vaccinated. The English-language press generally did not publish such stories, but French-language newspapers were more willing to be critical of the Health Department.

After Dr. Bessey stepped down on May 11<sup>th</sup> as public vaccinator, the vaccination program was suspended until August. According to the *Gazette* “Dr. Bessey felt it was his duty to step down as public vaccinator due to the “unpleasant circumstances which have arisen in connection with public vaccination.” There were reports of fifty children in the French-language press who were sickened or perhaps killed by tainted vaccine. This is hardly a mere “unpleasant circumstance.”

Dr. Bessey continued to downplay the negative effects of the vaccine well into June. “The Medical Health Officer (Bessey) states that out of 3000 cases vaccinated by himself and Dr. Nolin, there have only been thirty cases in which erysipelas had broken out,” according to the *Gazette*. The *Gazette* further reported that Dr. Bessey showed the

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<sup>82</sup>“La Variole,” *La Presse*, (Montréal, PQ), May 27, 1885.

<sup>83</sup>Bliss, *Plague*, 155.

reporter a pamphlet by W.J Collins MD of London, England who states that according to Dr. Jenner (who discovered the vaccine) that the local vaccination reaction experienced in the smallpox vaccine which caused the characteristic scar on the (usually) left shoulder was itself a mild and local erysipelas.”<sup>84</sup> His numbers continue to vary every time from fifteen to thirty cases, while the French-language press remained consistent with fifty reported cases. Bessey seemed, as noted earlier, to view any unfavorable comment on the quality of the vaccine as a personal attack on his competence rather than consider the very real possibility that his vaccine was tainted. “Of course, the lymph used is always blamed, as if good results always must follow no matter how depraved the constitution, the surroundings, or the presence of a polluted atmosphere, influences that in the case of a surgical operation of greater magnitude would be called dangerous.”<sup>85</sup>

By late June, the Montréal Health Committee decided they needed to fill the position of Medical Officer, the post that Dr. Bessey had been handling since May. On June 23rd, the Health Committee dismissed Medical Officer Laroque who continued with his inexplicable absence.<sup>86</sup> To replace him, the Health Committee considered four candidates: Dr. Bessey, Dr. Farfard, Dr. Beausoleil and Dr. Laberge. For many on the committee, including Chairman Gray, the favourite was Dr. Bessey, despite his serious error in judgment in continuing to use the tainted vaccine after cases of erysipelas were being reported. Chairman Gray commented that Dr. Bessey was “undoubtedly the best man they could get!”<sup>87</sup> Alderman Archibald expressed the too common sentiment among the committee members that he favoured Dr. Bessey because he was the only English-

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<sup>84</sup>“The Public Health,” *Montreal Gazette*, (Montréal, PQ), June 8, 1885.

<sup>85</sup>“W.E. Bessey, “Bad Results from Vaccination.,” *Montreal Gazette*, (Montréal, PQ), May 11, 1885.

<sup>86</sup>“City Council,” *Montreal Gazette*, (Montréal, PQ), June 23, 1885.

<sup>87</sup>“City Council,” *Montreal Gazette*, (Montréal, PQ), June 23, 1885.

speaking candidate. Dr. Louis LaBerge received the position in the end, because Alderman Stroud was “determined to oppose Dr. Bessey as he had made a lot of mistakes and a man who had made a lot of mistakes was not fit for the position.” Dr. Laberge turned out to be a fortunate choice although the *Star* expressed frustration with the secretiveness of the selection process, most likely not wanting a repeat of the erysipelas outbreak. The choice of Dr. Laberge was fortunate especially because he worked at finding a reliable source of vaccine that did not seem to result in multiple reports of erysipelas. Alderman Stroud’s comment that Dr. Bessey made a lot of mistakes reveals that the problems with the vaccine were well known to the committee who by in large supported Bessey for the position despite this. Stroud tellingly commented that he regretted that Alderman Archibald brought up the “nationality question” indicating that Alderman Stroud felt that others on the committee as well as Archibald would certainly be swayed by the nationality (or “race”) question.<sup>88</sup>

Meanwhile, controversies surrounding the vaccinations continued even after the suspension of vaccination and after the selection of Dr. Laberge and not Dr. Bessey as medical officer. *The Montreal Gazette* reported on June 23rd that Mademoiselle Gondreau sued the city for \$1000 in damages due to forceful vaccination on May 15<sup>th</sup> by Drs. Bessey and Laroque after which she claimed to have suffered much. This story seems to be possibly unlikely as by then the vaccination program had been suspended and Dr. Laroque was missing. According to Dr. Bessey, as combative as ever, her mother had contracted smallpox at the convent Notre Dame and died of it at the civic hospital and that “the result is that the vaccinated girl has not contracted smallpox and died, as did her

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<sup>88</sup>“City Council,” *Montreal Gazette*, (Montréal, PQ), June 23, 1885.

mother and sister” and that furthermore if she suffered from the vaccination “through bad management or bad advice” neither the city nor I (Dr. Bessey) are responsible. The injury that she claimed to have received, inflammation of the lungs, is not as Dr. Bessey reported “a known sequel to vaccination.” Bessey further commented that “now, however, that the question of who shall be elected Medical Health officer has been settled, I presume there will not be as many people anxious to excite ignorant people to cause trouble in order to cast reflections on me.”<sup>89</sup>In short, some people were willing to encourage others to make up stories about their bad experiences with vaccination for the sole purpose of casting aspersions on Dr. Bessey.

### **Erysipelas and Anti-vaccinators**

Perhaps the most pernicious consequence of the erysipelas scandal was that it gave fuel to the anti-vaccinators fire and made members of the public more receptive to the misinformation that they spread. The two main anti-vaccinators who were active in Montréal in 1885 were Dr. Alexander M Ross and Dr. J Emery Coderre. According to Keelen, Ross and Coderre came to their cause through the most natural of reasons: grief for a child. If this is so it is an underappreciated reason in histories as well as in the contemporary press for their anti-vaccine campaign. That both doctors lost children who died of erysipelas due to smallpox vaccination gives the doctors a moral authority not necessarily shared by some who opposed them. This is not an uncommon reason for vaccine activism on either side. *The Montreal Star* quoted the Ontario Health Officer, who inspected Dr. Ross’ vaccinations on a train to Toronto, as denying the claim made by Dr. Ross that his children died from erysipelas caused by smallpox vaccine, so the

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<sup>89</sup>“The Vaccinators Again,” *Montreal Gazette*, (Montréal, PQ), June 23, 1885.

truth is of course rather murky.<sup>90</sup> Both men were treated in the contemporary press, especially the English-language press and also in many historical accounts as charlatans. Jennifer Keelen points out, in her thesis on the anti-vaccine movement in Canada that this did not necessarily track with the reputation that they enjoyed with the public during their lifetime.

Dr. Coderre was particularly influential amongst francophone doctors in Montréal at the time, which may partially explain the reluctance that francophones in Montréal showed towards the vaccine. This did not escape the notice of his contemporaries. In a reprint in the *Gazette* of a speech given during a previous outbreak of smallpox in 1876 by Dr. Hingston, then Mayor of Montréal, the *Gazette* referred to “a certain medical gentleman at the time” who was writing about vaccination,” who undoubtedly was Dr. Coderre. The *Gazette* further speculated that “perhaps part of the reason the prejudice against vaccination is so strong in the minds of the French is that the writings against it have been chiefly in that language.”<sup>91</sup> Dr. Coderre was prolific in writing against vaccination for decades, editing a medical journal in which he inveighed against vaccination called “*L’Anti-Vaccinateur Canadien*” which gained some traction within the francophone medical community.

Dr. Ross, the populist anti-vaccinator, was not as well known when he arrived in Montréal, mostly to drive the anti-vaccination campaign, and his educational path was not as straightforward as Dr. Coderre’s having instead chosen to apprentice in “hydrotherapy.” But his educational path, according to Keelen, was not that unusual for a doctor at the time, the field of medicine having not completed the shift to

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<sup>90</sup>Dr. Ross’ Marks,” *Montreal Daily Star*, (Montréal, PQ), October 19, 1885.

<sup>91</sup>“Vaccination,” *Montreal Gazette*, (Montréal, PQ), August 29, 1885.

professionalization. Dr. Ross preferred to communicate directly with the people, rather than through doctors. Bliss, on the other hand called Ross a “semi-trained illiterate” and commented that Dr. Coderre’s training was “equally suspect.”<sup>92</sup> Bliss has a tendency in his book to take the rather poor opinions expressed of Drs. Ross and Coderre by some for granted. He may have been right about their education and training. However, there is no doubt that there were people who were willing to listen to what both of them said and that they had some influence on the course of the epidemic.

The anti-vaccinators were catastrophically wrong with their theories, although there is every indication that they genuinely believed in them and were not the charlatans implied by their contemporaries and by some historians. As in many epidemics of vaccine preventable diseases, this was an epidemic of the unvaccinated and under vaccinated. As the English-language papers were all too happy to note “certain areas” of the city were predominantly affected by the epidemic and other areas of the city were almost completely free from the disease. The parts of the city most affected by smallpox were, not surprisingly, those areas where vaccine refusal were strongest.

Also, despite complications that still existed with the vaccination, it was apparent even at the time that vaccination saved lives. This would soon lead to changes that would result in a population shift and an increase in life expectancy already palpable to the middle class and upper class, but which was not fully apparent to the lower classes. Indicative of this is that many who initially resisted vaccination changed their minds once the epidemic accelerated, and the value of vaccination became more apparent. Life expectancy remained considerably lower for the working-class and poor than it was for

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<sup>92</sup>Bliss, *Plague*, 212.



the middle and upper classes, making the benefits of vaccination seem murkier. This likely is why middle- and upper-class francophones (mostly) joined the English and Irish citizens in accepting the vaccine. The benefits were more apparent to the upper classes.

Dr. Ross often attempted to have his anti-vaccine views, many of which were informed by the erysipelas outbreak, expressed in local newspapers by writing letters to the editor. In a letter to the *Herald* on June 10<sup>th</sup> Dr. Ross wrote “The Dreadful experience of the past month with Foul vaccine will not soon be forgotten. There are at present scores of persons struck by loathsome diseases from vaccination!!”<sup>93</sup> He is exaggerating here but Dr. Ross often used hyperbole in line with his populist writing style. By using words such as loathsome to describe erysipelas, Ross is attempting to tap into the natural instinct towards disgust. That *Herald* readers did not credit his opinion likely had more to do with the *Herald*’s usual editorial stance that vaccines were a harmless and beneficial preventative of smallpox as well as their readers own experience that their families were for the most part untouched by smallpox. The *Herald* and the *Gazette* both also largely discredited the reports of erysipelas and downplayed any seriousness of the problem any chance they got. For his part, Dr. Coderre circulated a photograph of a child’s arm that had become gangrenous from the smallpox vaccine in 1874 in a ploy to contradict the editorial stance of the English-language press that vaccine was harmless and an invaluable tool in the fight against smallpox.<sup>94</sup> Dr. Coderre also believed that the rise in tuberculosis cases including scrofula was due to an increase in vaccination.<sup>95</sup>

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<sup>93</sup>“Don’t Allow Your Children to be Vaccinated,” *Montreal Herald*, , (Montréal, PQ), June 10, 1885.

<sup>94</sup>Keelan, *Canadian*, 138.

<sup>95</sup>Keelan, *Canadian*, 133.

Vaccine refusal, fueled in part by anti-vaccine rhetoric referencing the erysipelas controversy, resulted in the deaths of over three thousand unvaccinated or under vaccinated people. It is fortunate that the vaccination program stopped using the erysipelas tainted vaccine before there were more than fifty victims and by delaying the suspension of the vaccination program as long as they did, the Health Committee did irreparable harm to vaccine compliance. The English-language press for their part tried to portray Dr. Ross and Dr. Coderre as charlatans and used any opportunity they could to diminish their reputation. For example, Dr. Ross was intercepted by doctors who were conducting inspections on the train he was using to visit Toronto. He was forced by the Medical Inspector on the train to show him his vaccination scars where he revealed, according to the *Gazette*, three vaccination marks, the last one that the *Gazette* claimed had been made within the last twelve months,<sup>96</sup> an accusation denied by Dr. Ross.

Ironically, despite being more critical of the Health Department for their role in the erysipelas scandal, French-language papers seem to have been cognizant of the risk presented by the epidemic much sooner than the English-language press. This would be due to the disease taking hold in francophone areas of the city earlier and more perniciously, as well as the preference of the English-language press not to alarm citizens more than they felt they had to. This was especially true while the disease remained primarily confined to francophone areas of the city. As early as April thirteenth, which is around when the first deaths of Pelagie (April 1<sup>st</sup>) and Marie (April 11) Robichaud from smallpox were reported, and around the time when the vaccinators first began their work,<sup>97</sup> *La Presse* reported that.

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<sup>96</sup>“Three Times Vaccinated,” *Montreal Gazette*, (Montréal, PQ), October 14, 1885.

<sup>97</sup>“A Travers la Ville,” *La Minerve*, (Montréal, PQ), April 13, 1885.

*“Cette terrible maladie que l’on a constatée exister à Montréal, il y a quelques jours, semble prendre un caractère épidémique. Un décès a eu lieu samedi soir. Nous ne saurions trop recommander aux citoyens de se conformer strictement aux règles de l’hygiène, et de désinfecter au plus tôt les caves et canaux de leurs demeures”* (“This terrible disease which was found to exist in Montréal a few days ago seems to be taking on an epidemic character. A death took place on Saturday evening. We cannot recommend citizens enough to comply strictly with the rules of hygiene, and to disinfect their homes as soon as possible.”)<sup>98</sup>

Even in the French-language press, cleanliness, and not vaccination was recommended as a preventative. Vaccination is not even mentioned despite Drs. Bessey and Nolin already undertaking the task of vaccinating those in the city who required it. Once again, the *Star* is the only English-language paper that does not follow this trend, reporting that there had been deaths from smallpox in the city around the time of Marie Robichaud’s death.<sup>99</sup> The majority of the English-language press was reluctant to acknowledge the nascent smallpox threat until it was inescapable. This showed considerable lack of regard for the francophone residents who were already starting to die of smallpox. This likely also gave the francophone working-class citizens a mixed message regarding the seriousness of the disease which may also have contributed to their reluctance to submit to vaccination.

### **Anti-Francophone Expressions in English Language Press**

The English-language press was all too willing to report that the disease was confined to the French-speaking areas of the city, often blaming the “habitants” for their perceived lack of cleanliness. This was especially true as smallpox was considered to be a disease of the unclean. Because the city’s reputation as a tourist destination was at stake,

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<sup>98</sup>“La Variole,” *La Presse*, (Montréal, PQ), April 13, 1885.

<sup>99</sup>“Smallpox in Montréal,” *Montreal Daily Star*, (Montréal, PQ), June 23, 1885.

they wanted to reassure potential visitors that visiting was perfectly safe so long as they avoided francophone working-class areas. Their fear was warranted as Montréal was not a favoured travel destination during the year 1885. The attitude of the English-language press could be summed up by the sentiments expressed in this letter to the editor of the *Gazette*: “Nearly every case has been observed within a certain quarter of the city – a quarter inhabited largely by those of the same nationality as the inmates of the Hôtel Dieu. The city as a whole therefore may be said so far to have remain remarkably free from the attack of the disease.”<sup>100</sup> This was an easy sentiment for the English-speaking readers of the *Gazette* to have as they could remain blissfully ignorant of the disease running rampant within their city’s borders.

Montréal newspapers started publishing letters to the editors and editorials that betrayed the frustration of many that the epidemic still continued into September. *The Montreal Gazette* wrote that vaccination was the “duty of the hour.” They continued that “Montréal’s ablest medical men” were working hard to reassure the “one part of our people who are prejudiced against vaccination.”<sup>101</sup> Intersectional bickering around vaccination rose to the point in the *Herald* that francophones expressed a great deal of anger towards the *Herald*’s coverage of smallpox.

On September 2<sup>nd</sup>, *The Montreal Herald* made the choice to publish on their front page a letter from “Pro bono Publica,” which proved to be controversial. “Pro Bono Publica” blamed the epidemic squarely on the francophone population about which they wrote “Your French operatives, they are dirty.” The anonymous letter writer suggested firing francophone employees and replacing them exclusively with anglophones because

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<sup>100</sup>“Letter to the Editor: The City Health,” *Montreal Gazette*, (Montréal, PQ), June 8, 1885.

<sup>101</sup>“The Duty of the Hour,” *Montreal Gazette*, (Montréal, PQ), September 7, 1885.

the anglophones were vaccinated.<sup>102</sup> The decision to publish this letter on the first page is unusual, a decision made by the *Herald*, no doubt, to increase visibility for the letter, despite their later claims of neutrality on the “race question.” In response to this letter *The Montreal Star* quoted the Mayor Honore Beaugrand as saying in a speech that “anyone who knew the French-Canadians would not have made such a statement for the French are a clean tidy and well to do people.”<sup>103</sup> On September 22<sup>nd</sup> *La Minerve* called upon their readership to boycott the *Herald* due to their decision to publish this letter by “Pro Bono Publica, as well as their many other questionable remarks about francophones. On September 26<sup>th</sup>, the *Herald* fired back that they had never been biased against the francophone working-class, a disingenuous statement if ever there was one. They also implied that *La Minerve* lacked numerous admirable qualities including intelligence, a common allegation by the *Herald* against francophones. On October 5<sup>th</sup>, a letter writer explained that in a previous letter he should have specified that the *Herald* discriminates against our nationality (francophone).<sup>104</sup>” On September 7<sup>th</sup>, a M. Louis Perrault complained that the *Herald* placed the blame for the epidemic on the francophone people and Roman Catholic clergy in reference to Pro Bono Publica’s letter, a claim that “Pro Bono Publica did indeed make.”<sup>105</sup>

*The Montreal Herald* might have protested this criticism, but their constant denigration of the francophone community would certainly be expected to anger francophones and they deserved any criticism they got for the “Pro Bono Publica letter.” The *Herald* often referred to English-speakers as “the more intelligent of the citizens”

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<sup>102</sup>“Boycotted,” *Montreal Herald*, (Montréal, PQ), September 1, 1885.

<sup>103</sup> “Turn of the Tide,” *Montreal Daily Star*, (Montréal, PQ), September 5, 1885.

<sup>104</sup>“Another Letter from I.O. David,” *Montreal Herald*, (Montréal, PQ), October 5, 1885.

<sup>105</sup>“The Public Health,” *Montreal Gazette*, (Montréal, PQ), September 7, 1885.

and the French-speaking community as the “more unintelligent of our population.” This happened so often that “the more unintelligent of our population” appeared to be their plausibly deniable euphemism for francophones, and most especially the working-class. An example occurred in the *Herald* on October fifteenth, where the paper featured a large spread of nearly two half pages in an eight-page paper. The central feature of this was a large map with the areas affected by smallpox outlined in black. The *Herald* referred to those living outside of the affected areas as among the “most intelligent” of our population, having paid proper attention to health and sanitary laws. The *Herald* pointed out that there were 1080 smallpox deaths among the francophones, and a hundred deaths amongst English-speakers, which they further divided into forty-eight Protestants and fifty-two “Irish and other English-speaking Catholics.”<sup>106</sup> Even before this, the *Gazette* reported that Alderman Grenier motioned for the city to refuse to work with the *Herald* because the *Herald* “insulted French-Canadians in the grossest manner,” most likely because of “Pro Bono Publica’s” letter. The motion was defeated but it says a lot of how the *Herald* was perceived by francophones of all classes.<sup>107</sup>

*The True Witness and Catholic Chronicle* was also critical of the *Herald* for their anti-francophone stance. *The True Witness* accused the *Herald* of giving a willing ear to a story of negligence by the (francophone and Catholic) nursing sisters at St. Roch Hospital by a girl who, according to *The True Witness*, “was altogether unreliable.”

For their part, *The Montreal Star* never slandered the French-speakers as “unintelligent” or “dirty” in the way that the *Herald* did and was critical of how the

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<sup>106</sup>“The Plague in Montreal,” *Montreal Herald*, (Montréal, PQ), October 15, 1885.

<sup>107</sup>“The City Council,” *Montreal Gazette*, (Montréal, PQ), October 13, 1885.

*Herald* antagonized the francophone community.” Because of the response to the “Pro-Publica” letter; however, they speculated that French-speakers had taken slurs in the press too much to heart. This reaction betrayed that they did not understand the francophone mind-set as much as perhaps they would like to think.<sup>108</sup>

Another letter to the editor which reflected the increasing frustration at the length and seriousness of the epidemic, especially amongst the anglophone community, was a highly pernicious letter appearing in *the Globe and Mail*. This letter resulted in scathing replies in *Le Monde Illustré* and *La Minerve*.<sup>109</sup> *The Montreal Gazette* reported that the letter writer proposed that Nova Scotia, New Brunswick, and Ontario should join and demand that English be the only legal language of the Dominion. To their credit the *Gazette* called the letter “stupid and mischievous.”<sup>110</sup> *La Minerve* was incensed by this letter that blamed the epidemic on as *La Minerve* wrote (in English) “the French people, the French language and ecclesiastical rule.” Things devolved to a point where the *Gazette* quoted Mayor Beaugrand as calling for “kindly cooperation.” The paper also printed excerpts from a resolution made by the Reverend D. Stevenson against any attempt to raise “jealousies and unpleasantness” between the “two races” on this question as stamping out smallpox affects both French and English.<sup>111</sup> This was at a meeting called because the francophone community was angered by the *Herald* printing “Pro Bono Publica’s” letter. The *Gazette* for their part wrote that there were pleased to see that

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<sup>108</sup>“Some of our French-Canadian Contemporaries,” *Montreal Daily Star*, (Montréal, PQ), September 5, 1885.

<sup>109</sup>*Le Monde Illustré*, (Montréal, PQ), September 26, 1885.

<sup>110</sup>“An Unwise Letter,” *Montreal Gazette*, (Montréal, PQ), September 21, 1885.

<sup>111</sup>“The Public Health,” *Montreal Gazette*, (Montréal, PQ), September 7, 1885.

*L'Etendard* is taking a firm stand in regard to measures taken to suppress the smallpox epidemic.<sup>112</sup>

### **Smallpox Regulations and Francophone Resistance**

Anti-vaccine sentiments among the francophone working-class were exacerbated by perceived indifference in the English-language press toward financial burdens and severe vaccine side effects, which disproportionately impacted the francophone working-class, ultimately leading to simmering violence against health regulations by francophone citizens. This included everything from removing smallpox placards placed by health authorities on houses affected by smallpox, preventing placard placement on these dwellings, assaulting health officials, and forcibly preventing authorities from removing members of a household to the smallpox hospital. The English-language press emphasized that most of the violence was carried out by francophone citizens. The Provincial Board of Health was formed in early September to combat the epidemic.<sup>113</sup> The creation of the Provincial Board of Health further infuriated francophone citizens. The length and severity of this epidemic caused the province to once and for all standardize health regulations. This included the standardization of the collection of vital statistics in the Province of Québec which was required by neither the province nor the city at the time, impeding the city's ability to vaccinate all children who were born within the city limits.<sup>114</sup> The epidemic also brought home the importance of having standardized laws for the control of infectious diseases. The Provincial Board of Health, which was formed in early September, had passed several regulations at the end, including the

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<sup>112</sup>"The Public Health," *Montreal Gazette*, (Montréal, PQ), September 28, 1885.

<sup>113</sup>Bliss, *Plague* 198.

<sup>114</sup>Bliss, *Plague*, 24-25.



enormously unpopular compulsory vaccination regulation, regulations enforcing placard placement, and regulations allowing for the removal of patients to the smallpox hospital for patients living in dwellings where isolation was not possible. By this time, the severity of the epidemic caused even French-language newspapers to be on board with the new regulations including compulsory vaccination according to Bliss.<sup>115</sup>

Because of the length of the epidemic there were increased calls from the anglophone community, but not the francophone community whose lives were most impacted by regulations, for these regulations to be passed. Regulations forbidding workers who had smallpox at home from going to work placed an unfair burden on the poor and working-class, who did not get paid if they did not go into work. Moreover, in a time before unions and worker's rights, workers risked losing their jobs for not going into work in compliance with smallpox regulations. The words of the Chairman of the Board of Shoe Manufactures (J.T. Hagar) that "it literally meant starvation to a man with a large family to put him out of work if one of his children had the disease"<sup>116</sup> suggested that the threat of losing a job or being forced to stay at home if someone in the family contracted smallpox could be a good incentive for working-class families to get vaccinated. The Mayor of the Village of St. Jean Baptiste, which lay mere blocks from the Hôtel Dieu and which in the present day is a long-established area of downtown Montréal, claimed that residents of his village were unable to follow smallpox regulations because they were too poor.<sup>117</sup>

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<sup>115</sup>Bliss, *Plague*, 161.

<sup>116</sup>"The Public Health," *Montreal Gazette*, (Montréal, PQ), August 19, 1885.

<sup>117</sup>"The Public Health," *Montreal Gazette*, (Montréal, PQ), August 28, 1885.

This is a highly plausible statement at a time when wages were rarely enough to support a family, and when multiple wage earners were needed to earn a high enough income to do so. These multiple wage earners included any children considered to be old enough to work and contribute to the family income. Additionally, labouring work was often insecure lasting for days or weeks at a time.<sup>118</sup> This was in the time before the concept of the family wage, or a wage in which a single wage earner could earn enough to support an entire family. This was also before the early twentieth century crusades to guarantee children the right to an education, so attendance at school for children was not yet compulsory if a family needed their wages more.<sup>119</sup> Often the mother of the family was the only person of age not earning an official wage, although she too contributed to the family income by doing the food shopping and cooking, and by making money under the table by taking in boarders or by taking in sewing or laundry for pay. She also “saved” money by forgoing her own meals so the rest of her family could eat.<sup>120</sup> Such families lived entirely too close to the financial precipice to lose a day of work in the absence of paid time off because a child was sick with smallpox, never mind the fortnight or more that was usually required.

Finally recognizing this, Mayor Beaugrand started a charitable fund for residents who were put out of work temporarily due to smallpox regulations. Although the relief given to families affected by smallpox regulations was by no means generous, Health Chairman Gray noted in October that relief assistance was influencing how the public was cooperating with health committee regulations.<sup>121</sup> Conversely, the lack of such relief

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<sup>118</sup>Bradbury, *Working*, 83.

<sup>119</sup>Bradbury, *Working*, 73.

<sup>120</sup>Bradbury, *Working*, 31.

<sup>121</sup>“The Public Health,” *Montreal Gazette*, (Montréal, PQ), October 1, 1885.

had a negative effect on how the public cooperated because the decision to cooperate with health regulations or not meant the difference between eating and starvation. In the *Gazette* on the eighth of October several announcements were made. It was announced that there was relief available for families affected by smallpox regulations. It was also announced that there were permanent vaccination stations available, and that there was free vaccination.<sup>122</sup> By then, however, it was far too late because the epidemic was raging and had established itself very comfortably in the community.

### **Smallpox Riot**

On September 26<sup>th</sup>, the Board of Health began to remove patients to the smallpox hospital in response to the new regulations, in dwellings where isolation was impossible, and immediately began experiencing resistance. At their very first stop at 6 Berri Lane the sanitary police attempted to remove five children from three families in that building, all of whom had the confluent form of smallpox. The families offered “determined opposition” to the removal of the children, in which they were assisted by several of their neighbours.<sup>123</sup> In the evening of the 26<sup>th</sup> the sanitary police asked the city police for assistance in a removal at 165 St. Louis Street. But when the sanitary police called upon the city police to assist, they were lent a couple of constables, who refused to enter the smallpox infected house.<sup>124</sup>

The morning of the 28<sup>th</sup>, the day that the Health Committee was planning to pass compulsory vaccination for adults, began with more violence against regulations and culminated in a riot against compulsory vaccination. When a crowd started gathering at

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<sup>122</sup>“Notice,” *Montreal Gazette*, (Montréal, PQ), October 8, 1885.

<sup>123</sup>Bliss, *Plague*, 161.

<sup>124</sup>Bliss, *Plague*, 166.

the east end Health Office, the city police, armed only with batons offered a half-hearted defense. By seven in the evening there was a large crowd of heavily intoxicated young francophone men and boys. They damaged the east end offices of the Health Department. They also damaged the houses of several people involved with the enforcement of health regulations. This included the house of Medical Officer LaBerge, Alderman Gray (acting mayor that day due to the actual mayor being seriously ill) and members of the Provincial Health Board. They also damaged the main office of the Health Department as well as *the Montreal Herald* most likely due to the *Herald's* hostile attitude towards francophones. At this point Mayor Beaugrand, who had been confined to his sick bed due to suffering from asthma, appeared in order to command the police to defend Victoria Square.<sup>125</sup> The crowd, described by Bliss as “not an ugly or very unruly crowd”, who mostly threw stones at buildings while drunkenly singing songs, was subdued by one in the morning. Bliss wrote that the property damage likely amounted to around a few thousand dollars.<sup>126</sup> Alderman Gray blamed the riot on the “lies of a few unprincipled doctors” most likely anti-vaccinators such as Drs. Ross and Coderre. There were several riots in Montréal during the year, but this was the principal riot specifically due to vaccine regulations, as well as the largest and most serious riot.

The newspapers including the French-language press by and large were sympathetic to the health authorities with French-language papers calling the riot an “unfortunate episode.” The English-language papers gave Honoré Beaugrand a platform to ask reasonable citizens to comply with health regulations and to publicly berate the

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<sup>125</sup>Bliss, *Plague*, 172.

<sup>126</sup>Bliss, *Plague*, 174.

police for their failure to act decisively. Most papers described the crowd as rowdy, intoxicated and predominately harmless. The *Star* commented that the city had reason to be ashamed “not so much because of the stupid and mischievous riot”, which by every evidence seems to be an accurate account of the events of the night, but “because of the “promptitude with which the police abdicated their authority to the mob.”<sup>127</sup> They also chastised the mob for their ingratitude in damaging the property of men “whose only offense was to try to save them and their family from disease and death.”<sup>128</sup>

Neither the *Star* nor the *Gazette* blew the riot out of proportion or made the riot out to be anything other than what it was. This riot was a drunken rampage by a crowd of a few thousand who were inflamed to some extent by anti-vaccine rhetoric against the new compulsory vaccine regulations, and who did a few thousand dollars’ worth of damage to buildings and injured some police officers. But they were not a particularly dangerous or vicious crowd, and they were subdued once the police put up some resistance.

The *Herald*, however called the riot “the most cowardly and senseless riot which has ever been recorded in any city or any country and described the crowd of “five thousand” (other newspapers estimated two thousand) “as being bent on destroying anything and everything that had a near or far connection with vaccination.”<sup>129</sup> True to form they made sure that their readers knew that the crowd was francophone. From the evidence presented in other newspapers, calling the riot the “most cowardly and senseless riot which has ever been recorded” was likely an exaggeration. The riot on the 28<sup>th</sup> of September would not end smallpox violence in Montréal that year. Violence would

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<sup>127</sup>“Last Night’s Riot,” *Montreal Daily Star*, (Montréal, PQ), September 29, 1885.

<sup>128</sup>“Self-Help,” *Montreal Daily Star*, (Montréal, PQ), September 29, 1885.

<sup>129</sup>“Mob Violence,” *Montreal Herald*, (Montréal, PQ), September 29, 1885.

continue to break out from time to time, typically in resistance to smallpox regulations, especially placarding of smallpox houses and protests of removals to the smallpox hospital. Smallpox related violence would continue to erupt with such frequency that smallpox riots began to be called “Montreal’s pastimes,” until the epidemic began to ebb near the end of the year.<sup>130</sup>

### Conclusion:

Montréal health officials had every reason to believe that they could quickly subdue with vaccination the smallpox outbreak that started modestly with a train conductor from Chicago bringing the virus into a Montréal hospital. What they did not count on was the number of unvaccinated in Montréal at the start of the epidemic, providing an opening for the disease to escape into the city. They underestimated as well, the level of resistance that they would encounter to vaccination and regulations, resistance that was exacerbated by their own errors. They did not act fast enough when cases of erysipelas started to be reported. This side effect was known, but the rates at which it occurred in Montréal should have at least alerted city health officials that the problem may have been the vaccine itself. This was also an error of judgment on the part of the Health Department. The vaccine itself was far from perfect. Because of medical knowledge at the time, errors made by the health officials were considerably more likely than they would be in a time of greater medical knowledge.

The press exacerbated the errors made by the Health Department to the extent that the epidemic, whose ferocity was fueled by low vaccine uptake, was impossible to

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<sup>130</sup>Samuel K Cohn, “Smallpox and Collective Violence” *Epidemics: Hate and Compassion from the Plague of Athens to Aids*. First edition. (Oxford: Oxford University Press, 2018. <https://books-scholarsportal-info.ledproxy2.uwindsor.ca/uri/ebooks/ebooks4/oso4/2018-09-18/1/9780198819660-Cohn>)

control without unpopular smallpox regulations, most especially the hated compulsory vaccination. The press initially due to a lack of knowledge during the time sent mixed messages to the population by refusing to report on smallpox cases and by giving mixed messages on the frequency of vaccinations needed. The English-language press understated the severity of erysipelas cases and denigrated doctors who complained of these cases in their patients. When the francophone community displayed more than the usual resistance to vaccinations, which might have been exacerbated by the erysipelas crises, the English-language press reacted with scolding rather than sympathy, with some members of the press attacking the francophone community in racially charged ways. The francophone community fought back with violence that lasted almost as long as the smallpox epidemic, which only started to die down at the end of 1885, culminating in the riot on September 28th.

The deadly, costly, and possibly unnecessary smallpox epidemic in Montréal would not be fully extinguished until May of 1886 with the final two reported cases. In total over three thousand lives were lost in the city of Montréal. The total estimated cost of the epidemic was \$142,835,<sup>131</sup> or an estimated \$4,541,532 in today's money. The Board of Health carried out a report on the causes of the epidemic which was published in many of the newspapers on January 9<sup>th</sup> through 10<sup>th</sup> 1886. Are there any lessons from 1885 for the present moment? Not as many as would be expected. The past is truly a different country, and this is never truer than it is here. By the twenty first century, vaccination truly had transformed the world. Even the smallpox vaccination, which still is by far the most dangerous vaccine, as it was when it was last used in the 1970's, became safe enough that

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<sup>131</sup>Bliss, *Plague*, 259.

only about one in one million died from the vaccine. This is still much safer than the up to a third that died from smallpox and the estimated one in a thousand who died from vaccination in 1885. Now as then, the present pandemic is largely a pandemic of the unvaccinated, although now the resistance is to a preventative which has transformed the world for better or worse. Resistance to the vaccine in 1885 was resistance to a vaccine that had not reached its true promise and which for many reasons was still very problematic. That Jenner's "discovery" would change the world was already palpable in 1885 in Montréal, especially if you belonged to the English-speaking middle- and upper-class minority.

Prevarication on the part of health officials and the press in 1885 provided an opening for misinformation. In 1885 the English-language press prevaricated due to a misguided belief that discussing smallpox too freely would cause panic amongst the public and would cause businesses in the city to suffer when other cities spurned Montréal created goods due to perceived risk. Panic amongst the English-speaking population and the middle-class French-speaking population, as well as risks to business was the most present risk to this population because the majority of them were vaccinated. However, the prevarication amongst the press had the potential to cause harm to the French-speakers by providing mixed signals to a population which had good reasons to be wary of the dangers of the smallpox vaccine of 1885. In hard numbers this is not the case. The vast majority of the over 3000 people who died were either unvaccinated or under-vaccinated. But this is from the hindsight of the present. If one lived in a densely populated area of 1885 Montréal with defective sewers and outdoor privies, where infectious diseases stalked the population, and where infections caused by



the vaccine caused death or disability for your neighbours, it might not seem that way. Vaccination would need to undergo many improvements before it was to fulfil its full promise. That the English-language press and medical establishment could not see that, had the probable effect of making the francophone working-class feel devalued.

By contrast, current vaccine refusal demonstrates that vaccines are victims of their own success, since present day vaccines are a safe and inexpensive way to prevent disease. When the polio vaccine was discovered, parents lined up around the block to have their children vaccinated. But by the end of the twentieth century, in an echo of the zeitgeist of the year 1885, infectious diseases did not hold the same fear that they once held. This allowed the fear of vaccines to take hold once again. After all, the battle against infectious disease had been won, hadn't it? This is far from the case. Even the smallpox vaccine, by the time it was discontinued in the seventies, was many times in magnitude safer than the vaccine from 1885. Smallpox is still the only disease ever to have been successfully eradicated. Even polio which came next closest to being eradicated has started to make a comeback due to vaccine refusal, as has measles. At the beginning of the third decade of the twenty-first century, the era of infectious diseases is most definitely not over. Since the 1980's, worldwide pandemics have been increasing, with diseases never even thought about in 1885. The new (in the late seventies) disease of AIDS ignited a worldwide pandemic for which there is still no vaccine. Tuberculosis still kills millions a year, just as it killed thousands a year in 1880's Montréal. Even cholera also killed several million a year until very recently. Multiple vaccines were created in short order for Covid-19, the disease which should have exploded any belief that we had beaten infectious diseases once and for all, but as we have seen, vaccine compliance was

very far from complete, this even though vaccines are as safe and as thoroughly tested as they have ever been. Few medical discoveries would prove to be as world changing at as little cost, as Jenner's 1796 vaccine, but yet so persistently controversial. In 1885 however, the smallpox vaccine still had a long way to go and would never prove to be the unmitigated success of newer vaccines. For the francophone working-class in Montréal in 1885, the benefits were obscure, and the risks were all too obvious. That the English-language press could not see that, left the francophone working-class feeling marginalized.

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