PORTS OF EMPIRE: IMMIGRATION, COMMUNICATION, AND CHOLERA IN NEWFOUNDLAND, NOVA SCOTIA AND NEW BRUNSWICK, 1830-1870.

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Abstract
Doctor of Philosophy, History
Hilary Term 2013

Madeline Joan Fowler
Green Templeton College, University of Oxford

This study explores the relationship between emigration and cholera in British North American port towns, between 1832 and 1866. It focuses specifically on three established and growing port towns located directly off of the Atlantic Ocean – St. John's, Newfoundland, Halifax, Nova Scotia and Saint John, New Brunswick. The pressures of mass immigration from the British Isles, the transmission of highly-feared diseases from emigrant and cargo ships to port towns in British North America, and the dependence, vulnerability and constraints felt by colonial governments and their citizens are three important themes that emerge and are continually challenged throughout this dissertation. This thesis presents the way in which colonial port towns managed the recurrent and unpredictable threats to their health, wellbeing and prosperity during this period, and highlights the increasing strain and growing dislocation felt by British North Americans under colonial rule.

The history of cholera in Canada has focused overwhelmingly on Upper and Lower Canada, with little exploration or comparative analysis of the outbreaks in the Atlantic region. The following research examines the interconnected, complex and at times distant relationship between Britain and its North American colonies, under the influence of emigration and transmission of disease from coloniser to colonised. High points of calamity and upheaval clarified the extent to which the colonies were responsible for themselves, forcing many towns to re-evaluate their ability to control emergencies on their soil, with or without the help of the mother country. This study contributes not only to the historical understanding how cholera was managed in British North American ports, but it also provides a unique perspective on understanding the greater struggles of nineteenth-century colonial life.

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This thesis explores the relationship between emigration and cholera outbreaks in British North American port towns, between 1832 and 1866. It focuses specifically on three established and growing ports located directly off of the Atlantic Ocean – St. John's, Newfoundland, Halifax, Nova Scotia and Saint John, New Brunswick. The pressures of mass immigration from the British Isles, the transmission of highly-feared diseases from emigrant and cargo ships to port towns in British North America, and the dependence, vulnerability and constraints felt by colonial governments and its citizens are three important themes which emerge and are continually challenged throughout the six chapters of this dissertation. This thesis presents the way in which colonial port towns managed the recurrent and unpredictable threats to their health, wellbeing and prosperity during this period, and highlights the increasing strain and growing frustration and dislocation felt by British North Americans under colonial rule.

Before the turn of the nineteenth century, British possessions in North America were growing steadily, primarily from exploration, economic pursuits, and controlled attempts at emigration by the Scottish, Irish and English, as well as the French and Portuguese. After the end of the Napoleonic Wars in 1815, populating British land abroad with settlers from the home country became an important strategy in the development of Britain's North American colonies. Britain's population was growing at an exorbitant rate, and with little social mobility at home, a demand for emigration came from those feeling limited in opportunities. Although Bristol was historically known as one of Britain's leading international trading ports, Liverpool was now emerging as a centre of emigrant trade, with ship owners drawing up contracts to take people all over the world. Many British and Irish choosing to emigrate left everything, found their way to Liverpool, Cork, or Dublin, and with their families, and at times waited for weeks, and even months, for the next ship to take them to the New World.

Emigration would prove hard to regulate however, resulting in overcrowded and leaky ships, and filthy living conditions, malnourishment and drunkenness onboard – conditions that would pose an acute threat of disease. While other ships destined for New South Wales, Van Dieman's Island, or the Cape of Good Hope, would also be wrecked with cholera, typhus, smallpox and various fevers, by the time they arrived in port, the crisis of sickness and fatalities would have most likely passed

during the voyage. Ships bound for British North America, on the other hand, would have reached colonial land much earlier, passing the south coasts of Newfoundland and Nova Scotia, or into the Gulf of St. Lawrence, making the strategic location of port towns in these areas vital sources of assistance for those in the midst of disease.

Residents in the trading towns of St. John's, Halifax and Saint John would receive many unexpected vessels, originally bound for Quebec or the United States. A number of emigrants on board would be sick and dying, and towns were expected to find shelter, food, medicine and charitable support for them. Emigrants penniless from the trickery and thievery of ship owners on the British Isles, before and during the voyage, would seek relief and justice from provincial governments and colonial representatives in British North America. The way in which towns took it upon themselves financially, medically and socially to care for poor and destitute emigrants, who were arriving much of the time without warning, underscores the reality of living in a colonial port town at this time. In particular, it brings to light the delicate balance between the importance of emigrants for growth and prosperity, and the threat they represented given the lack of resources and expertise available within these towns to accommodate many who were disembarking in such dire straits.

The second theme which characterises each chapter is the persistent threat of foreign disease, particularly cholera, in Halifax, Saint John and St. John's, throughout the period between 1832 and 1866. Although 1831-32 was the first global wave of cholera, most British North Americans felt its effects recurrently until well into the late 1860s. Local outbreaks of cholera became a part of greater global events, making cholera different from more common epidemic fevers. Moreover, the threat of cholera evoked a particular kind of terror and anxiety, particularly in areas where economic growth was entirely reliant on the successes of shipbuilding, fisheries and colonial trade. The unpredictable nature of cholera and the lack of resources and expertise to control it, would all influence the way in which disease was managed in the colonies. Emigrant traffic and cargo from Britain meant that small towns in British North America had a direct link to towns and cities in the British Isles, many of which were also in the midst of managing outbreaks of cholera. Information on how others were attempting to control the disease, as well as word of mouth from emigrants who had experienced cholera before, would shape the ways in which disease was managed by local governments, and by the resident and immigrant populations.

As C.A. Bayly argues in his book *The Birth of the Modern World*, there is a global interconnectedness through the influence of politics, society, disease and technology which emerges long before the notion of twentieth century 'globalisation'.[1] Local communication and correspondence between British North America and England and Ireland during an epidemic were vital to the health and well-being of the colonial populations. Over time, although each area focused on its own ventures and colonial pursuits, St. John's, Halifax and Saint John were all forced to deal with outbreaks of cholera and the management of sick emigrants, triggering not only an awareness of their connections to Britain, but also an enhanced consciousness and perception of each another as colonies. The treatment of cholera in these different port towns addresses the complex and multi-layered relationship between Britain and the North American colonies, both attempting to control the threat of cholera, and more broadly the evolving stresses and strains of nineteenth-century colonial life.

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[1] C.A. Bayly, *The Birth of the Modern Work 1780-1914: Global Connections and Comparisons* (London, 2004).

The final theme of this dissertation addresses the ways in which unregulated mass emigration, in combination with the afflictions of epidemic disease, shifted the relationship between Britain and its North American colonies in the nineteenth century. Countless economic, political and social factors contributed to the promotion of responsible government in the colonies throughout the late 1840s and 1850s, and the eventual Confederation of many of them in 1867. I argue that the persistency of emigration and the threat and reality of foreign disease during this period, however, was certainly one of these factors, accentuating the limited power and influence available in the colonies to protect themselves against perils not of their own making. A disconnection is highlighted between Britain and its North American colonies, under the pressure of epidemic disease, as colonies come to terms with their sudden responsibilities for the health and safety of emigrants arriving from England and Ireland, and their obvious lack of physical and financial resources to perform the necessary tasks.

Part I of this dissertation examines the historical and theoretical background of emigration, public health, epidemic disease protocols, and the social and economic development of the Atlantic region. Chapter One discusses the origins and development of Newfoundland, Nova Scotia and New Brunswick, in order to understand the growth of these colonies prior to the advent of early nineteenth-century immigration, with emphasis on the evolving relationship between those colonies and the mother country. Each colony's unique economic traits, societal make-up and government organisation are presented in order to help define comparative features of similarly situated colonies under British rule. Chapter Two presents an analysis of the early effects of increasingly unregulated forms of emigration into British North America after 1815. Although a large portion of emigrants were ultimately bound for Quebec or the United States during this period, the Atlantic port towns became somewhat of an unplanned and undefined pre-screening area, forced as they were to accommodate transatlantic vessels in dire condition, arriving unannounced, unable to proceed any further.

Part II presents distinct case study chapters on St. John's, Halifax and Saint John in order to understand the ways in which emigration and cholera, as well as other foreign diseases, were managed between 1832 and 1866. The importance of presenting the three towns in a case study format is to not only demonstrate each colony's particular rapport with Britain, but also the growing association and identification each was having with the others, a theme discussed in greater detail in the final section. Historians like Christopher Hamlin point out the significance of understanding local government and community response during a cholera outbreak.[2] An examination of each individual port during successive threats and realities of cholera provides greater insight into each 'periphery's' relationship with its 'core', as well as to one another.

The final section of the dissertation presents an analysis of the case studies, exploring the colonial relationship between Britain and the Atlantic region under the influence of emigration and cholera. It uses important connective concepts from Adam Lester and John Darwin to help explain the intricate colonial networks through terms such as webs, circuits, and multiple bridgeheads and trajectories. The purpose of the final chapter is to provide a comparative analysis of how the threat of foreign disease was managed in British North America, as well as a discussion of the unique

[2] Christopher Hamlin, 'Mumbling in Bumbledom: On the Enormity of Large Sanitary Improvements in Four British Towns, 1855-1885', *Victorian Studies* 32 (1988), 59-61.

difficulties present under colonial rule, and the increasing need for self-sufficiency felt amongst the colonies, throughout the recurrent cholera outbreaks.

The following research examines the interconnected, complex and at times distant relationship between Britain and its North American colonies, under the influence of the transmission of disease from colonizer to colonized. It argues that unregulated emigration, the continual threats of cholera, and the limited knowledge and resources available in these ports in the face of these crises highlight the lack of control and dependency still prevalent in the colonies at a time of crisis. Cholera struck these British North American communities at a time of immense growth and development leading to the eventual confederation of Canada. Governmental structures evolved quickly in the Atlantic colonies, all of them, one after another, being granted responsible government during that period. High points of calamity and upheaval, like unregulated emigration and outbreaks of cholera, would force the colonies to re-evaluate their ability to control emergencies on their soil, with or without the help of the mother country.

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To Dad, for your endless inspiration and encouragement

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Abbreviations

Admiralty Records	ADM
Archives of the Archdiocese, St. John's	AAD
Bodleian Library of Commonwealth and African Studies, Rhodes House, Oxford	BLCAS
Bristol Central Library, Bristol	BCL
British Library, London	BL
Centre for Newfoundland Studies, St. John's	CNS
Colonial Office	CO
Dictionary of Canadian Biography	DCB
Home Office	HO
Journal of the House of Assembly of Newfoundland	JHA
Library and Archives Canada, Ottawa	LAC
National Archives of Ireland, Dublin	NAI
New Brunswick	NB
Newfoundland	NL
Nova Scotia	NS
Nova Scotia Archives and Records Management, Halifax	NSARM
Oxford Dictionary of National Biography	DNB
Privy Council	PC
Public Archives of New Brunswick, Fredericton	PANB
Public Archives of Newfoundland and Labrador, St. John's	PANL
The National Archives, Kew	TNA
Wellcome Library, London	WL

Introduction

I guess our biggest problem was trying to explain to people where they were.

- Claude Elliott, Mayor of Gander, Newfoundland, upon receiving thousands of stranded passengers on 11 September 2001.[1]

On 11 September 2001, the world watched the shocking execution of terrorist attacks on the Twin Towers in New York City and at the Pentagon in Washington. As the United States government responded to the terror and destruction that morning, it ordered the effective closure of North American airspace, forcing thousands of in-transit planes to be grounded. As transatlantic flights searched for an immediate place to land, Canadian provinces along the eastern seaboard of North America became an obvious choice. Halifax, Nova Scotia, containing a regional municipality of nearly 400 000 residents, received over 7 000 stranded passengers, the largest number of passengers received by a Canadian airport that day.

Gander, Newfoundland, a town of 10 000 residents, received the second largest portion of diverted planes, 40, along with their 6 600 passengers, stranded until further notice.[2] Gander has a rich history of aviation – its airport was constructed to land the world's largest aircrafts, with runways ranging upwards of 10 000 feet, and was used as a Canadian and American Air Force Base during the Second World War. After the war, like its sister airport, Shannon, in Ireland, Gander became a major international refuelling station for transatlantic flights coming and going throughout the latter half of the twentieth century.

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[1] Barbara Crossette, 'Unexpected Guests Warm Hearts in the Frozen North', *New York Times Online* (published online 18 November 2001), accessed 20 November 2012.
[2] Jim Lewis, '"Plane People" from 9/11 Return to Newfoundland to Give Thanks', *New York Times Online* (published online 12 September 2011), accessed 20 November 2012.

The way Gander coped with this crisis suggested this was perhaps not the first time Newfoundlanders were needed in this way. As planes landed in Gander, residents, government officials and local volunteers worked to ensure that passengers were cared for. Having to accommodate a number amounting to over half its population in a town with roughly 550 hotel rooms, citizens made schools and community halls available, residents from neighbouring areas, as far away as Twillingate, sent large quantities of soup and sandwiches, and people took strangers into their homes.[3] Stranded passengers looking to reach loved ones, some requiring the replenishment of personal medication, others unable to speak English, were all attended to by volunteers. Amidst terrifying world circumstances, birthday parties were organised for stranded children, with cake and musicians brought in from the town.[4] Similar efforts were made in other airport towns in Newfoundland and Labrador and throughout the east coast of Canada that day. Known to most travellers as a forbidding island in the North Atlantic, usually flown over en route to London, Paris or New York, Newfoundland was now a place which the passengers, known as 'the plane people', would never forget.

The United States Ambassador to Canada, David Jacobson, came to Gander on the tenth anniversary of 11 September 2001. Jacobsen was joined by other dignitaries and several of the stranded passengers, many of whom had kept in touch with those they had met during that fateful time and had chosen to return to Newfoundland for the memorial service. At a service in Appleton, a town outside of Gander, Jacobson remarked, 'You treated them like family… Without waiting to be

[3] Crossette, 'Unexpected Guests'.
[4] Interview with Claude Elliott, 'Gander's Mayor Remembers 9/11 and His Town's Generosity and Heroism', (published online 15 September 2011) <http://www.petergreenberg.com/2011/09/15/claude-elliot-ganders-mayor-remembers-911-and-his-towns-generosity-and-heroism/> accessed 20 November 2012.

asked, the men and women of small-town Newfoundland opened their doors'; with one passenger terming Newfoundland as a 'solid rock of humanity'.[5]

The truth, however, was that Atlantic Canadian towns had been managing situations of this nature for centuries. With their origins dating back as early as the sixteenth century, port towns located along the Atlantic coast of British North America were no strangers to foreign incursions. In one of the first modern Canadian histories focused exclusively on the Atlantic Provinces,[6] W.S. MacNutt claims that the Atlantic Canadian territory acted as a transitional phase from Old World to New, stating that 'for geographic reasons alone, the region was destined to be passed by or passed through'.[7] By the nineteenth century, colonial ports became physical gateways to the vital traffic of goods, people, and ideas with the imperial centre. These connections exposed them to various forms of human misery, typically in the form of shipwrecks, destitute emigrants and disease outbreaks, forcing towns to respond to an array of predicaments whose origins were outside their control. Furthermore, survival in an isolated and often dangerous coastal environment bred a culture of interdependence in which the value of helping out those in difficulty made sense because at any given time any of the population might find themselves in a similar

[5] Oliver Gilmore, 'With songs, tears and hugs, residents of northern Newfoundland remembered the day 10 years ago that brought thousands of strangers into their homes', *Globe and Mail Online* (published online 11 September 2011), accessed 12 September 2011.
[6] James Hiller rightly points out that the term 'Atlantic Canada' has only been in use since Newfoundland's confederation with Canada in 1949. He acknowledges David Alexander as one of the first to classify Newfoundland within a historical 'Atlantic Canadian' framework. For more of a discussion on this topic, see: James K. Hiller, 'Is Atlantic Canadian History Possible?', *Acadiensis* 30:1 (Autumn 2000), 20.
[7] W.S. MacNutt, *The Atlantic Provinces: The Emergence of Colonial Society, 1712-1857* (Toronto, 1965), 1.

situation. Given this history, receiving and supporting thousands of stranded passengers during 9/11 came naturally to towns in the Atlantic region.[8]

This dissertation explores the relationship between emigration and the transmission of cholera into British North American ports in the nineteenth century. The notion that there was good fortune to be had in the British colonies, combined with a lack of upward mobility at home, forced a mass displacement of hundreds of thousands of Irish and British citizens to territories across the Atlantic, or even further – south to the Cape of Good Hope, and across the Indian Ocean to New South Wales and Van Diemen's Land. English, Irish and Scottish emigrants wishing to go overseas regarded British North America as the most attractive of the British overseas possessions until roughly 1870.[9] Although many emigrants left to reconnect with family in the United States, from 1815 through until 1840, the British North American colonies received the higher percentage of immigrants.[10] Jane Errington remarks on the Scottish, who were amongst the first emigrants from the British Isles to arrive into the North American colonies, claiming that, 'To many Scots, British America was very much part of a Scottish Empire'.[11] By 1867, the flood of immigrants from areas

[8] While the primary research of this project concerns itself with Newfoundland, Nova Scotia and New Brunswick, Prince Edward Island is also part of what is now known as Atlantic Canada. Without any other term available for grouping the three colonies, I will be referring to the 'Atlantic region' as an area comprising of Newfoundland, Nova Scotia and New Brunswick throughout the thesis. While Prince Edward Island also received expected and unexpected emigrants, as well as cholera, its exclusion simply comes from the need to contain the research of the thesis within its capacity. For information on epidemics and health care in nineteenth-century Prince Edward Island, see Douglas Baldwin and Thomas Spira (eds.), *Gaslights, Epidemics and Vagabond Cows: Charlottetown in the Victorian Era* (Charlottetown, 1988).

[9] Carl Bridge and Kent Fedorowich. 'Mapping the British World', *Journal of Imperial and Commonwealth History* 31:2 (2003), 4.

[10] John Darwin, *The Empire Project: The Rise and Fall of the British World System, 1830-1970* (Cambridge, 2009), 42. British North America received 56 per cent of emigrants between 1815 and 1830. Between 1830-1840, 45.8 per cent went to British North America, while 43.8 per cent were bound for the United States.

[11] Elizabeth Jane Errington, 'British Migration and British America, 1783-1867', in Phillip Buckner (ed.), *Canada and the British Empire* (Oxford, 2008), 151.

all over the British Isles transformed British North America, with roughly 60 per cent of those living in the newly confederated provinces of Canada born in Britain.[12]

In the Atlantic region of British North America, much of the land inward from the coast was uninhabited, but the port towns of Newfoundland, Nova Scotia and New Brunswick, originally established as gateways and stopping points for trade on the North American east coast, gradually became communities in their own right. Although over half of the emigrants found ways to migrate and settle in the U.S, the pricey passage to New York or Boston meant that the first point of arrival for many was a British North American port.

Before Canadian confederation, or even the advent of responsible government in the British North American colonies, the towns of St. John's (Newfoundland), Halifax (Nova Scotia), and Saint John (New Brunswick) formed vigorous trading connections with port cities such as Dublin, Cork, Waterford and Belfast in Ireland, as well as with Liverpool and Bristol in the United Kingdom. Newfoundland, for example, imported coffee, rum, coal, cottons, garments and cast iron from Bristol, and exported molasses, seal skins, blubber, train oil and salt cod to Bristol and beyond.[13] Similarly, a large mercantile and shipping trade developed between Halifax, Saint John, and the British Isles, and both Halifax and St. John's carried on trade with the West Indies. Consequently, the Atlantic region received much of its information about what was going on in the world from British, Irish and Caribbean newspapers. Growth and development within the Atlantic region was largely a reactive process. As Jerry Bannister points out in his work on the establishment of law and government in Newfoundland, 'The diverse colonies and territories which comprised the first British Empire never adhered to any uniform mode of development; the decentralised

[12] Errington, 'British Migration', 141. This statistic excludes Newfoundland, which did not join the Canadian confederation until 1949.
[13] 28 July 1849, *Bristol Times and Bath Advocate,* 7. BCL.

imperial system exerted a relatively low level of political control and legal coercion over local societies; and the constitutional doctrine of customary powers figured prominently throughout America'.[14]

While the Atlantic region economically benefitted from the influx of British and Irish immigrants and foreign goods, the rise in immigration and strengthening trade connections exposed its settlers to the inevitable though often unpredictable arrival of disease from abroad. The way in which emigration and cholera were perceived, the quarantine restrictions and trade prohibitions adopted, and the medical knowledge utilised to combat the illness travelled throughout these areas, created a network of understanding, and in some cases misunderstanding, revealing the stresses and tensions of a shrinking world.

The following chapters examine the ways in which St. John's, Halifax and Saint John managed the growing pressures of an incoming colonial settler population, the flow of transient emigrants, and the persistent threat of cholera, as well as other deadly diseases, including smallpox and 'typhus fever'. The study of port towns shows how immediate and direct the connection was between Britain, Ireland, and the North American colonies, revealing the networks which bound these centres together through medical resources, newspapers and public discourse. The following research provides insight into how separate areas of the world managed transmittable disease, and how they supported one another during successive challenges to public health, particularly during the threat and reality of cholera in 1832, 1834, 1854 and 1866.

In *The Empire Project: The Rise and Fall of the British World System, 1830-1970*, John Darwin argues that the expansion of British power was not an organised, structured or well thought-out process, particularly during the first half of the

[14] Jerry Bannister, *The Rule of Admirals: Law, Custom, and Naval Government in Newfoundland, 1699-1832* (Toronto, 2003), 16.

nineteenth century. He argues that the reality of Britain's overseas colonies was that they were '…a pile of possessions whose purpose or meaning was long since forgotten, half-opened packets of quickly waning appeal, and new acquisitions made on the spur of the moment'.[15] Darwin observes that there was no single response to the imposition of British authority in their colonial territories, with most regulations implemented '…by default not from design'.[16]

As C.A. Bayly points out in *The Birth of the Modern World,* what occurred at a local level was part of a wider global movement that preceded long before the post-1945 concept of 'globalisation'.[17] Throughout the nineteenth century, social and political change created 'global uniformities' that characterised and brought forth similar issues and outcomes in many different parts of the world, transforming boundaries into recognisable connections between countries.[18] Local events occurring under this system would simultaneously become global events, with separate areas of the world struggling with similar issues. While Bayly concentrates mainly on the political and social issues, diseases, like cholera, knew no societal, political or geographical barriers. The spread of nineteenth-century cholera from Europe to North America was influenced by colonialism, emigration and trade. Although St. John's, Halifax and Saint John were three port towns out of hundreds throughout Britain's Empire, the manner in which they conducted themselves under this framework, particularly under the stress of disease, highlights a broader context of the influence of the colonial office in London, the struggles for power and control abroad, and the limitations of those aspirations.

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[15] Darwin, *The Empire Project*, 2.
[16] Darwin, *The Empire Project*, 23.
[17] C.A. Bayly, *The Birth of the Modern World 1780-1914: Global Connections and Comparisons* (London, 2004), 1.
[18] Ibid.

Alan Lester's 'networked notions of empire' and John Darwin's concept of imperial 'bridgeheads' offer useful theoretical frameworks for analysing the influence of emigration and disease in the Atlantic colonies.[19] Understanding the colonial relationship through connective concepts such as webs and circuits provides enhanced methods for studying not only individual colonial connectivity to Britain, but also the increased frequencies of 'inter-colonial connections' occurring between colonies throughout this period.[20] Gary Magee and Andrew Thompson make this point in their work on the influence of economic globalisation in the British Empire: 'Part of the attraction of such a networked conception is that it helps us to see the empire more clearly for what it really was: an interconnected zone constituted by multiple points of contact and complex circuits of exchange; not just the preserve of an "official mind" in Whitehall, but, as… a field of enterprise for the whole of British society'.[21]

Ports such as Liverpool, Glasgow, Dublin, and Cork developed their own individual trading connections with St. John's, Halifax and Saint John, therefore the arrival of British, Irish and Scottish emigrants arriving from these ports into the Atlantic region will be analysed throughout this dissertation.[22] Some emigrant ships leaving from the east coast of Ireland, Scotland, or continental Europe, stopped temporarily into British ports, like Liverpool, before embarking across the Atlantic, which meant that ports of departure were not always indicative of the type of migrants

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[19] Alan Lester, 'Imperial Circuits and Networks: Geographies of the British Empire', *History Compass* 4:1 (2006), 130; John Darwin, 'Imperialism and the Victorians: The Dynamics of Territorial Expansion', *English Historical Review* 112:447 (June 1997), 626. For a wider conceptual study of the development of white-settler colonial societies, see James Belich's important study *Replenishing the Earth: The Settler Revolution and the Rise of the Anglo-world, 1783-1939* (Oxford, 2009).

[20] Gary B. Magee and Andrew S. Thompson, *Empire and Globalisation: Networks of People, Goods and Capital in the British World, c.1850-1914* (Cambridge, 2010), 18.

[21] Magee and Thompson, 16-17. Magee and Thompson also draw attention to some of the drawbacks to interpreting colonial history through circuits, which include the difficulty of evaluating and equating each network when used comparatively.

[22] Emigrant ships arriving from other areas of Europe during a cholera outbreak are also discussed throughout the case studies. During the 1866 cholera outbreak on McNabs Island in Nova Scotia, for example, many of the emigrants onboard the *England*, from Liverpool, were German. See Chapter Four – Halifax, Nova Scotia: A Case Study.

onboard. After 1800, Ireland was also considered a British colony, and much like the Atlantic region it experienced constitutional reforms over increases in political autonomy throughout the nineteenth century. The use of concepts like networks and circuits in the study of emigration and cholera outbreaks in colonies like the Atlantic region and in Ireland can evoke new understandings of their connective and comparative aspects with one another under an imperial, as well as a global historical framework.

The following study reveals the unique attributes and influences of the Atlantic region, and demonstrates that by concentrating on diseases, such as cholera in port towns, the trafficking patterns of people, merchandise, ideas and knowledge in the North Atlantic (or between the Old World and the New) become highlighted. Constructing regulations to manage transmittable disease elucidated any ambiguities concerning who should be responsible for sick emigrants, and the inadequacy of resources, physical and financial, needed for the relief of diseased newcomers and the protection of anxious residents. The process by which a port town in British North America attempted to come to terms with cholera provides an increased appreciation of colonial life, in particular how knowledge was transmitted between the Old World and New, and how 'solutions' in Britain and Ireland became problems in the British North American colonies.

Cholera

Although, as Margaret Pelling points out, other diseases such as typhus, smallpox and scarlet fever outbreaks threatened populations more regularly, causing larger mortality figures over time, outbreaks of cholera affected large parts of the globe at the same time, or least within a given 'cholera year', providing favourable avenues for comparison.[23] As Bayly suggests, local outbreaks became a part of greater global events, making cholera different from more common epidemic fevers. Moreover, the threat of cholera evoked a particular kind of terror and anxiety, particularly in areas where economic growth was entirely reliant on the successes of shipbuilding, fisheries and colonial trade. For most ports, cholera, according to Nancy Gallagher, – '…the most dreaded disease of the nineteenth century' – was construed in terms of warfare, as 'an invader'.[24]

Cholera is now known to be a water-borne illness but at the time there was great uncertainty over its causes and transmission. Its effects were shocking, and included embarrassing, uncontrollable and painful purging which destroyed the lining of the intestines and dehydrated the body. Its appearance reignited debates over contagion because while European and North American cities began to mount their traditional defence through ship inspection and passenger quarantine, many people who were carriers did not display symptoms.

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[23] Margaret Pelling, *Cholera, Fever and English Medicine, 1825-1865* (Oxford, 1978), 3-4. In a lecture given to the Liverpool Medical Institution in 1983, Pelling raises the comparison between cholera and fever, claiming 'Cholera killed its victims quickly, and the mortality rate was high; by contrast, an account of the management of a fever case could run to pages, with the issue often in doubt'. See Pelling, 'Epidemics in Nineteenth Century Towns: How Important was Cholera?', *Transactions and Reports: Liverpool Medical Institution Library* (1983-84), 31. The major years which cholera infected the western world were: 1831-32, 1849, 1854 and 1866.

[24] Anne Hardy, 'Cholera, Quarantine the English Preventative System, 1850-1895', *Medical History* 37 (July 1993), 250; Nancy Gallagher, *Medicine and Power in Tunisia 1780-1900* (Cambridge, 1983), 5.



Figure 0.1. 'Blue Stage of the Spasmodic Cholera', by Thomas Wakley. *The Lancet* MDCCCXXXI-XXXII Volume 1 (4 February 1832). Courtesy of Wellcome Library, London.

Although the western world has experienced devastating diseases throughout history, the nineteenth-century cholera epidemics were especially shattering. Because of the large increase in trade, migration, and economic development during that period, countries which considered themselves to be the most advanced and safe were at great risk of disease and turmoil. In 1832, cholera travelled extensively to areas of varying wealth, power and sophistication. London, Paris, and New York, were severely hit by the contagion, but the established port towns in Britain and Ireland, and developing towns and cities in British North America to which they were connected, certainly did not survive unscathed. Research on cholera has been based primarily on the first epidemic of 1831-32, with much less analysis provided on the later epidemics of the 1840s, 50s and 60s. Although 1832 was a shocking year for those cities and towns struck by the initial outbreak, by the 1860s a significantly larger portion of the world was, in one way or another, affected by this disease.

At the beginning of the nineteenth century, Britain was experiencing increasing political ferment as well as social, economic and industrial development. As cholera came closer in the autumn months of 1831, it revealed fault lines of political weakness and social neglect previously ignored prior to the disease outbreaks. Scholarly research abounds on the history of nineteenth-century cholera.[25] Many historians have argued that the cholera epidemics of 1832 were a catalyst for nineteenth-century public health reform; however, a revisionist view advanced by historians such as Pelling and Christopher Hamlin make the point that cholera was not an ongoing concern when compared to domestic fevers in Britain.[26] Cholera has been highly debated, therefore, in terms of its influence, and as Christopher Hamlin suggests, this period cannot simply be viewed as teleological, upward moving or singular.[27] There were a number of issues, arguments, and solutions surrounding public health, Hamlin insists, and therefore '…[praise for the public health movement] is not wholly compatible with the historical record, the explanations it

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[25] Historians who have written studies of cholera in Europe and the United States include: Michael Durey's work on cholera in Britain, *The Return of the Plague: British Society and the Cholera 1831-32* (Dublin, 1979) and R.J. Morris's *Cholera 1832: The Social Response to An Epidemic* (London, 1976). Catherine Jean Kudlick's *Cholera in Post-Revolutionary Paris: A Cultural History* (Berkeley, 1996), and François Delaporte's *Disease and Civilisation: The Cholera in Paris* (Cambridge, 1987), are both analytic works on cholera in nineteenth-century France. Many areas in the United States affected by cholera are covered in Charles E. Rosenberg's *The Cholera Years: The United States in 1832, 1849, 1866* (Chicago, 1962).

[26] Pelling argues that it was the influence of fever, more so than cholera, which instigated revolutionary change of health reforms and protocols, and that the cholera '…was not a constant social factor of the same proportions as fever, tuberculosis, or alcoholism;', Pelling, *Cholera, Fever and English Medicine*, 5. It would take decades for officials in Britain to regulate public health care initiatives, and the trend was certainly also seen in British North America. For literature on the controversies on contagion, public health, infectious disease and scientific discoveries in nineteenth-century England see: Pelling, *Cholera, Fever and English Medicine*, Christopher Hamlin, *Public Health and Social Justice in the Age of Chadwick: Britain, 1800-1854* (Cambridge, 1998), John V. Pickstone, 'Dearth, Dirt and Fever Epidemics: Rewriting the History of British "Public Health," 1780-1850', in Terence Ranger and Paul Slack (eds.), *Epidemics and Ideas: Essays on the Historical Perceptions of Pestilence* (Cambridge, 1992), 125-48, and Christopher Hamlin, 'Predisposing Causes and Public Health in Early Nineteenth-Century Medical Thought', *The Society for the Social History of Medicine* 5:1 (1992), 43-70. For a general European assessment of public health debates and the contagion vs anti-contagion debate, see Peter Baldwin, *Contagion and the State of Europe, 1830-1930* (Cambridge, 1999).

[27] Christopher Hamlin, 'Muddling in Bumbledom: On the Enormity of Large Sanitary Improvements in Four British Towns, 1855-1885', *Victorian Studies* 32 (1988), 55.

offers beg important questions, and it has implications for the way we think about social action that are deceptive and perhaps dangerous'.[28]

Initiation of public health measures also became an important issue in British North America in the nineteenth century; however, scholarship and debate surrounding it are less diverse and less extensive.[29] The literature on cholera epidemics in Canada stems mainly from the work of Geoffrey Bilson in his comprehensive study *A Darkened House: Cholera in Nineteenth Century Canada*, and Charles M. Godfrey, who focuses on Upper Canada in his short book entitled, *The Cholera Epidemics in Upper Canada, 1832-1866.*[30] Bilson was mid-career when he died in 1987, and is still regarded as the major authority in nineteenth-century cholera in Canada. During the 1970s, Bilson had papers printed by the Canadian Historical Association on Upper and Lower Canada's cholera outbreaks in 1832, and by *Acadiensis* on the cholera epidemic in Saint John in 1854, before publishing *A Darkened House* in 1980. While this study addresses all areas of British North America, the weight of his research is on Upper and Lower Canada. Godfrey's research does present the effects of the later cholera epidemics, but his research is less extensive and focuses solely on Upper Canada.

Bilson addresses cholera in the Atlantic colonies, opening doors on previously untouched material, but his analysis of towns in Newfoundland, Nova Scotia and New Brunswick is cursory at best. Although towns in these colonies were comparable with Upper and Lower Canadian towns in terms of physical size, economic prosperity and

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[28] Hamlin, 'Muddling in Bumbledom', 55.
[29] For a general overview of nineteenth-century Canadian public health, see Geoffrey Bilson, *A Darkened House: Cholera in Nineteenth-Century Canada* (Toronto, 1980). See also Geoffrey Bilson, 'Public Health and the Medical Profession in Nineteenth-Century Canada,' in Roy McLeod and Milton Lewis (eds.), *Disease, Medicine and Empire: Perspectives of Western Medicine and the Experience of European Expansion* (London, 1988), 156-75 and Geoffrey Bilson, 'The Cholera Epidemic in Saint John, NB 1854', *Acadiensis* 4:1 (Autumn 1974), 85-99.
[30] Bilson, *A Darkened House*; Charles M. Godfrey, *The Cholera Epidemics in Upper Canada, 1832-1866* (Toronto, 1968).

international connections, Bilson does not provide the same attention or detail to the Atlantic areas of British North America. The way in which cholera outbreaks were managed in Lower Canada in the 1830s, discussed in the final section of Chapter Two, contributed to growing imperial tensions between French Canadians and British authorities. Increasing political stresses combined with rich sources available on cholera in Lower and Upper Canada, undoubtedly made cholera outbreaks in that region an attractive avenue for scholarly research, and Bilson presents a well-documented analysis and interpretation of outbreaks in these areas. Despite its limitations, Bilson's work helps to define the advance of cholera in British North America throughout the nineteenth century, and provides detailed if uneven information and analysis on the colonies affected by this devastating and misunderstood disease. His legacy offers points of comparison as well as a base for further research in specific areas of British North America.

Large cities such as London and Paris have long been in the limelight of historical research on cholera. The heavy death tolls, political turmoil and social inequality, and the public health reforms which came about during that era, all make these urban centres popular case studies. Port towns in the Atlantic region, although they were deeply involved with the trade in goods, services, emigrants and disease, have not been as closely studied, particularly during the later cholera outbreaks.[31] Not only does the examination of emigration and cholera in St. John's, Halifax and Saint John provide new evidence for how diseases, such as cholera, were dealt with in the

[31] Several historians and archivists have produced short, documentary accounts of specific Atlantic Canadian towns during a specific cholera year. Melvin Baker's account of cholera in St. John's in the *Newfoundland Quarterly* was particularly useful when attempting to research and understand outbreaks of cholera in St. John's. J.S. Martell also provides a very useful account of the effects of immigration into Nova Scotia, with some reference to cholera, and a compilation of important sources on the subject, published by the Provincial Archives of Nova Scotia and organised by archivist, D.C. Harvey. See Baker, 'Disease and Public Health Measures in St. John's, Newfoundland, 1832-1855', *Newfoundland Quarterly* 78:4 (Spring 1983), 26-9 and J.S. Martell, *Immigration to and Emigration from Nova Scotia 1815-1838* (Halifax, 1942).

North American colonies; it also illuminates connections with emerging towns in the Atlantic colonies as the expanding trade routes constituted traffic in disease as well as people, merchandise and ideas.

Historians such as Howard Markel, Alan M. Kraut and Katherine Foxhall have taken particular interest in the study of the relationship between migration and the transmission of disease.[32] Understanding not only how diseases were transferred from Old World to the New, but also the perceptions of migrants as carriers of disease, notions of blame, and effects of changing environments to a migrants' body and constitution, are all topics which have gained historical ground over the past 20 years. Mark Harrison, David Arnold and Michael Worboys have provided significant analysis on perceptions of nineteenth-century transmittable disease, colonial migration and imperial medicine in India and Africa.[33] Arnold, in particular, has studied the effects of cholera in colonial India, and Foxhall has concentrated on outbreaks of disease during emigrant and convict voyages to Australia and how this influenced migrants in their transition from emigrant and immigrant.[34] As she points out, the '…organic arrangement with the process and conditions of travel lies at the heart of understanding disease on sailing ships as an interaction between human and material bodies and their environment'.[35]

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[32] Howard Markel, *Quarantine! East European Jewish Immigrants and the New York City Epidemics of 1892* (Baltimore, 1997); Alan M. Kraut, *Silent Travelers: Germs, Genes and the 'Immigrant Menace'* (London, 1994); Katherine Foxhall, *Disease at Sea: Convicts, Emigrants, Ships and the Ocean in the Voyage to Australia, c.1830-1860*. PhD. Diss. (University of Warwick, 2008). See also Philip D. Curtin, *Death by Migration: Europe's Encounter with the Tropical World in the Nineteenth Century* (Cambridge, 1989).

[33] Mark Harrison and Michael Worboys, 'A Disease of Civilisation: Tuberculosis in Britain, Africa and India, 1900-39', in Lara Marks and Michael Worboys (eds.), *Migrants, Minorities and Health: Historical and Contemporary Studies* (London, 1997), 93-124. David Arnold, *Colonizing the Body: State Medicine and Epidemic Disease in Nineteenth-Century India* (Berkeley, 1993).

[34] David Arnold, 'Cholera and Colonialism in British India', *Past and Present* 113 (1986), 118-51.

[35] Foxhall, *Disease at Sea*, 74.



Figure 0.2. 'Cholera on the bowsprit' by Graetz. *Puck* Magazine 18 July 1883. Bert Hansen Collection, New York. Provided by Jacalyn Duffin and printed in Duffin's *History of Medicine: A Scandalously Short Introduction* (Toronto, 1999), 175.

Increases in immigration and outbreaks of cholera go very much hand-in-hand, with Foxhall making the point that, 'Cholera lends itself to the study of human movements…'.[36] As Charles Rosenberg argues, 'Cholera could not have thrived where filth and want did not already exist; nor could it have travelled so widely without an unprecedented development of trade and transportation'.[37] After its initial outbreak in the western world in 1832, cholera came into the North American colonies along with hundreds of thousands of British and Irish emigrants, making the management of emigration in the ports of departure and reception essential to understanding the effects of cholera in British North America.

Understanding the way in which cholera was managed at a local level in St. John's, Halifax and Saint John, illuminates the strengthening circuits between ports on the British Isles and in British North America, as well as the continuing development of each colony's connections to the others. Port towns in the Atlantic

[36] Foxhall, *Disease at Sea*, 31.
[37] Rosenberg, *The Cholera Years*, 2.

region were confronted with several transmittable disease outbreaks, notably smallpox and 'typhus fever', arriving onboard emigrant ships prior to 1832; however, as Asa Briggs points out, cholera '…not only created panic: it posed puzzles'.[38] In the Atlantic region, cholera induced a particular sense of vulnerability in ports whose livelihoods depended on the successes of its growing mercantile or shipping economy. The lack of control already felt over the way in which emigrants arrived into their ports and the indignity of having to declare an international port unhealthy with cholera, forced officials and residents to scramble not only to care for destitute emigrants, but also to protect their own resident population from cholera. Local resources, already strained from the annual effects of emigration, were overwhelmed by cholera, clarifying the need for more local responsibility and increased self-sufficiency in the colonies.

The management of emigration and cholera in the North American colonies highlights important imperial and inter-colonial connections taking place simultaneously, providing comparable predicaments affecting colonial communities at similar times. As Magee and Thompson argue, interpreting settler societies under common circumstances, like cholera, is appealing to scholars, as 'their ideas and institutions stemmed from common roots; they also faced similar problems, especially with respect to their indigenous populations and the political rights and legal status they were to be accorded'.[39]

Epidemics proceeding from a highly populated colonial power, to undeveloped colonial lands, strained the relationship between those promoting emigration in Britain and those managing immigration in the colonies, with the emigrants themselves caught in between. The hierarchy of influence created

[38] Asa Briggs, 'Cholera and Society in the Nineteenth Century', *Past and Present* 19:1 (1961), 79.
[39] Magee and Thompson, 25.

confusion among residents of British North America over who was to blame for the occurrence of disease and who was the trusted authority to guide them back to a healthy state of being.

Sources and Records

The effect of the immigrant population on the resident population can only be partially appreciated through statistical information. Record keeping was irregular, and largely inadequate in both the departure ports and the receiving ports. Towns in the Atlantic region of British North America fluctuated in population throughout the pre-confederation period, as some emigrants made a permanent home there, while others left for other colonies or the United States shortly after they arrived. This is well illustrated by J.S. Martell's observation concerning Nova Scotia: 'When the Imperial government in 1830 asked for a report on immigration to the province, the Customs officers at Halifax in order to cover their ignorance sent figures for the years 1810-31 which were purportedly for the whole province but in fact only for Halifax – and even for that port they were inadequate!'.[40]

The statistical records on cholera, as well, are highly unreliable, varying considerably in the way in which each port chose to record hospital patients, death tolls and emigrant ships. Cholera was a subject of heated debate amongst medical practitioners as it was difficult to diagnose, even by trained physicians, which allowed many to speculate about, or downright deny, its existence. As Hamlin remarks, 'Often numbers of cholera deaths were not mere facts, but attempts to shock – or to deny'.[41] Record keepers were under pressure to present statistics on cholera, but without

[40] Martell, 8.
[41] Christopher Hamlin, *Cholera: The Biography* (Oxford, 2009), 3.

concrete information on those ill and dying of the disease, subjectivity enabled them sometimes to provide numbers that would please those making the decisions.

As Pelling points out, many other nineteenth-century diseases, including smallpox, scarlet fever, and 'common continued fever', a term used to include typhoid, relapsing fever and various forms of typhus, produced heavier and more consistent mortality than cholera.[42] The same point can be applied to cholera in the North American colonies, with death tolls ranging considerably depending on the port, and in some years, only infecting a few dozen emigrants and residents. In 1854, Halifax's *Acadian Recorder* remarked on cholera in Saint John, acknowledging that current death tolls could hardly be termed as an epidemic, pointing out that current death rates from scarlet fever had far surpassed the cholera figures at that time.[43] Even without extreme death tolls, however, the dread of cholera in ports whose livelihoods were dependent on smooth and consistent transactions of domestic and foreign trade provoked worry, distress, rumour and denial. While raw mortality figures may not seem that drastic, an examination of how cholera was transmitted and managed in the Atlantic ports allows for a deeper comprehension of the way in which colonies sought to deal with circumstances of this nature under an imperial framework.

Colonial Office and provincial government records figure prominently throughout the following case studies, providing statistical information on the arrival of emigrant ships, expense figures and budgeting for each colony, as well as regular reports and correspondence between governors and the Colonial Office. Provincial government records give a sense of state activity; in particular, how municipal groups such as boards of health, emigrant hospitals, and charitable groups were formed in

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[42] Pelling, *Cholera, Fever and English Medicine*, 2.
[43] 5 August 1854. *Acadian Recorder*, 2. NSARM. For a greater analysis of this particular newspaper article, see Chapter Four – Halifax, Nova Scotia: A Case Study.

response to emigration and cholera. Sources of this nature contain the operational records of colonial governments, and while some components are highly systematic and procedural, other entries provide important insights into the powers of local government, social expectations, and attitudes of colonial office officials.[44]

At the same time, however, board of health records, mortality figures, and colonial office correspondence can be highly variable, depending on the colony, the year, as well as other world events competing for public attention. Newspapers, therefore, can be extremely useful when assessing local response. Local papers, at times, published quotations directly from Board of Health minutes, providing irregular statistical data of death and sickness in St. John's, Halifax and Saint John, as well as general complaints and worries from residents. Although information was not consistent, with an abundance of reporting one week and little the next, newspapers did present recorded mortality figures, typically derived from the towns' board of health, during various weeks of outbreaks of cholera.[45] Statistics and commentary found in government records and newspapers can be pieced together and cross-referenced. While it represents the amount of data available during this time, it must be assessed with care; in any event, a broader study into the social history of disease is required in order to understand the circumstances of those under the threat of cholera in British North American port towns.

Newspapers, as well as private journals and correspondence, can provide a sense of how emigration and disease were regarded amongst the resident population. Under the heading, 'Colonial', the *Acadian Recorder*, a popular Halifax paper,

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[44] For a greater discussion on assessing correspondence between colonial governors and the Colonial Office, see Chapter Six, pp. 288-89.

[45] Board of Health records are not easily located for St. John's, Halifax or Saint John. Typically they are found amongst other government records, and this varies considerably depending on the time frame. In many cases, when I have not been able to locate official Board of Health documents in an archive, I have found the minutes in the corresponding newspapers of the town.

published information on the condition of emigrant ships in sometimes lurid detail, characterising accounts provided by passengers onboard the *Thomas Gelstone* from Londonderry, for example, as a '…horrid speculation in human flesh and human misery'.[46] The same article cites the *Belsey Castle* from Sligo as

> '…another instance of cold-blooded avarice. When this vessel was on the banks, she sprung a leak, which was not repaired for a month because the Carpenter was sick… *…she was baled by the passengers with their buckets and tin cans!!!* The result was, that the vessel got into port with famished passengers, for their own provisions were destroyed by the water, and all had not means to buy of the Captain, who as is not unusual with the Captains of passage ships from Ireland, was enabled to grow rich upon human suffering'.[47]

Insofar as they thought about it at all, some residents assumed that emigrants from the British Isles would arrive as value-added by virtue of their skills in labour, trade or the military.[48] The reality was that many emigrants were living in destitution before they left their port of origin. By 1834, newspapers throughout the colonies were vocal in their disappointment over the condition of some immigrants, specifically their lack of fitness for labour. The *Acadian Recorder* quotes an excerpt from the Upper Canadian newspaper, the *Hamilton Mercury*:

> We have again to notice the tide of emigration that flows upon us, both by way of Quebec and New York, but to attempt giving the number would be useless, as there is no possibility of ascertaining it, even with moderate accuracy. We are sorry to perceive that there are very few labourers among them, as such as quite as much wanted as capitalists. More labourers are wanted this year, than in any former one, on account of the Improvement of the St. Lawrence, and unless the number increases that valuable work will be retarded.[49]

Housing, roadways and farmland were required to advance the growth of British North America, and to accommodate the emerging emigrant populations. Developing

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[46] 13 September 1834, *Acadian Recorder*, 1. NSARM.
[47] Ibid.
[48] For more information on relationship between quarantine, immigration, and initiations into the industrial labour force, see Amy L. Fairchild, *Science at the Borders: Immigrant Medical Inspection and the Shaping of the Modern Industrial Labor Force* (Baltimore, 2003).
[49] 19 July 1834, *Acadian Recorder*, 2. NSARM.

land and the economy were regarded as necessary steps forward for the colonies; however, the growing population made it impossible to construct all that was needed without labour from new immigrants. The newspaper article expresses frustration with the lack of available manpower and alludes to the confusion of expectations surrounding the practical benefits of mass emigration to British North America.

Historian Graeme Wynn admits in his assessment of the Maritime Provinces that the documentation of this period tends to be fragmented, with the result that the history tends to take the form of small vignettes. He stresses that 'The challenge, for those who would make sense of places – be they travellers, geographers or historians – is surely to confront complexity in ways that can heighten understanding instead of simply adding to our store of factual knowledge'.[50] This is certainly the case in terms of medical documents, board of health records and colonial correspondence for areas in Atlantic Canada. Although there are years where board of health records are meticulously kept, there are other years, often when cholera was a real issue, where records are fragmented, or missing entirely.

I have made conscious efforts to present the bulk of the primary research of this dissertation, located in three case studies, in as balanced a way as possible; however, the available evidence on emigration and cholera in Newfoundland, Nova Scotia and New Brunswick varies considerably. Some provincial archives contain a rich collection of sources on public health and welfare records, while others provide detailed private correspondence from individuals during a cholera epidemic. The assessments made of immigration and cholera in St. John's, Halifax and Saint John are drawn from the available sources found in the provincial archives for each town, and within each colony's correspondence with the colonial office. While newspaper

[50] Graeme Wynn, 'Ideology, Society and State in the Maritime Colonies of British North America, 1840-1860,' in Allan Greer and Ian Radforth (eds.), *Colonial Leviathan: State Formation in Mid-Nineteenth-Century Canada* (Toronto, 1992), 308.

reports are not always as frequent or as detailed as one would wish, in most instances a rough consistency can be found in the use of local newspapers as evidence during cholera outbreaks.[51]

Structure of the Thesis

This thesis is divided into three main parts. Part I – Foundations of the Atlantic Region, presents the historical and theoretical background of Newfoundland, Nova Scotia and New Brunswick, and comprises the first two chapters of the thesis. Chapter One discusses the origins and development of Newfoundland, Nova Scotia and New Brunswick, to illustrate the development of these colonies prior the advent of early nineteenth-century immigration, with emphasis on the evolving relationship between those colonies and Britain. It provides a discussion of each colony's unique economic traits, societal make-up and government organisation, in order to help define comparative features of similarly situated colonies under British rule. Chapter Two presents an analysis of the early effects of increasingly unregulated forms of emigration into British North America after 1815. Although a large portion of emigrants were ultimately bound for Quebec or the U.S during this period, the Atlantic port towns became somewhat of an unplanned and undefined pre-screening area, forced as they were to accommodate transatlantic vessels in dire condition, arriving unannounced, unable to proceed any further.

Part II – Cholera Outbreaks, 1832-1866, comprises Chapters Three, Four and Five, three distinct case studies outlining the way emigration and cholera were managed in St. John's, Halifax and Saint John respectively. Presenting the research through case studies draws attention to the particular way each of these ports

[51] During the cholera epidemic in St. John's in 1854, for example, newspaper coverage of the epidemic is exceedingly sparse. For more information see Chapter Three: St. John's – A Case Study.

attempted to cope with the challenges of emigration and cholera from 1832 to 1866. At the same time, a study of each port individually demonstrates not only each colony's special rapport with Britain, but also the growing association and identification with each other as colonies, a theme discussed in greater detail in the final section. Once cholera ran its course and life came back to normal, it was tempting to believe that fears were exaggerated and preparations may have been excessive. This was especially the case if the impact of the disease was less than expected, and when trade was involved. Practical understanding of the attitudes of each community in the struggle to implement health and safety measures becomes important when analysing the later epidemics.

The final section, Part III – Cholera in Context, including Chapter Six and the Conclusion, explores the colonial relationship between Britain and the colonies of the Atlantic region, as well as the increased connections amongst the colonies that developed as a result of their attempts to cope with emigration and disease. Although the underlying arguments of the dissertation are evident throughout the case studies, a dedicated analysis of how emigration and cholera was managed in the Atlantic region is found in Chapter Six. The final chapter discusses the unique difficulties present under colonial rule, and the increasing need for self-sufficiency felt amongst the colonies, throughout the period of recurrent cholera outbreaks.

As stated in the abstract, numerous political, economic and social factors contributed to the growing sense of independence that led several of the colonies to unite in Confederation in 1867. Crises around the management of infectious diseases, however, clarified the extent to which the British North American colonies were on their own and helped colonial officials to realise the need to develop their ability to protect their own residents and care for emigrants. I argue that decades of mass

emigration, the persistent nature of cholera threats and the limited knowledge and resources available in these ports in the face of these crises all contributed to a growing sense of dislocation and a shift in thinking about the relationship between Britain and its North American colonies. Cholera afflicted towns throughout British North America between 1832 and 1866, a period which coincided with immense growth and development contributing to the eventual confederation of Canada. Governmental structures evolved quickly in the Atlantic colonies, all of them, one after another, being granted responsible government during that period. By the time of confederation in 1867, the persistent seasons of emigration and cholera outbreaks constituted one of a number of societal crises that contributed to a growing disconnect between Britain and its colonies, revealing to many British North Americans the need for self-reliance, and the possibility of independence.

PART I – Foundations of the Atlantic Region

Chapter One

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British North America and the Colonial Mindset

Britain's presence and colonial influence in North America dates back to the 1500s. Newfoundland, regarded by many as Britain's oldest overseas colony, began operating as a seasonal fishing station in the early sixteenth century. The British army succeeded in taking over Acadia, official French colonial territory in 1710 and renamed it Nova Scotia – an area that included what is now New Brunswick and Nova Scotia. By 1784, New Brunswick was established as a separate colony, with its land used to accommodate the arrival of Loyalist settlers from the Thirteen Colonies to British North America. Agriculture, forestry, and shipbuilding became important economic stimulants in New Brunswick, adding to the prosperity of Britain's overseas economy by the late-eighteenth century.[1]

By the nineteenth century, the British North American colonies of Newfoundland, Nova Scotia and New Brunswick developed their own separate histories of maritime capital and trade. The location of the colonies meant that ports such as St. John's, Halifax and Saint John developed primarily from colonial pursuits, be they economic, strategic or defensive. Increases in these initiatives eventually led to a significant investment in the port towns by merchants and ship-owners, creating advancements in social infrastructure, including education, health services, government and other means to continue the economic growth of these regions.

[1] For a current general history on the Atlantic Canadian provinces see: Margaret Conrad and James Hiller, *Atlantic Canada: A History* (Oxford, 2010); Phillip Buckner and John G. Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994).

By the early nineteenth century, emigration from the British Isles became more prominent throughout British North America. The transference of people, cultures and ideas across the Atlantic generated a hybrid of identities, cultural distinctiveness and the eventual growth of native patriotism in the settler colonies. Patterns of emigration came to characterise towns in Newfoundland, Nova Scotia and New Brunswick as the forging of identities under an imperial consciousness grew amongst colonial settlers. As C.A. Bayly points out, the exportation of nationalities overseas created an exploration of thought on who people were, and whom they identified with, within the larger realm of Empire.[2]

Although the primary research of this study is focused on the successive nineteenth-century cholera outbreaks in St. John's, Halifax and Saint John, the way in which these port towns understood and sought to control emigration and disease was in varying degrees influenced by their respective colonial relationships with Britain. Earlier settlers and newly arrived emigrants were all in one way or another linked to the British Isles, the majority of them having arrived on emigrant ships originating directly from a British, Irish or Scottish port. The purpose of this first chapter is to present the colonial origins and historical backgrounds of Newfoundland, Nova Scotia and New Brunswick prior to the first threat of cholera in 1832. Colonial initiatives, the development of trade and industry, the influence of early emigration, and the foundations of a colonial settler society are highlighted as important transitional phases in the history of each colony, used in order to more effectively understand how the colonies found their individual, as well as collective, place within the expansive British imperial network.

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[2] C.A. Bayly, *The Birth of the Modern World, 1780-1914: Global Connections and Comparisons* (London, 2004), 205. Bayly argues that many nations experienced such re-identification arising from transportation.

Agricultural and working-class people on the British Isles were prepared to leave behind poverty and unemployment at home in the hopes of finding work, space and prosperity on the other side of the Atlantic. Many merchants and businessmen, in some cases bringing with them substantial financial means, also decided to emigrate in order to further their careers or to gain independence from limitations at home.[3] At the same time, the colonial connection between Britain and its territories overseas induced a sense of assurance in the knowledge that the foreign land to which they were bound, and its people, were governed by the British crown. Benedict Anderson memorably explains in *Imagined Communities: Reflections on the Origin and Spread of Nationalism*, the connections that can be formed among people through an illusory sense of relationship: 'Communities are to be distinguished, not by their falsity/genuineness, but by the style in which they are imagined'.[4] As colonies in British North America quickly developed from barren landmasses dominated by trade and the exploitation of natural resources to communities accommodating an enormous surge in settler population, residents and emigrants arriving from Old World to New began to evaluate their own identities in order to better understand themselves, their relationship to one another and their evolving association with Britain.

A great portion of the historical research on Atlantic Canada has focused on regional variations and local identities within distinct communities. As Phillip

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[3] John Mannion explains that some Irish emigrants left for Newfoundland in order to relieve family pressures of property and finances in Ireland, mentioning that at times '…migration was partly a strategy of heirship'. See John Mannion, 'Old World Antecedents, New World Adaptations: Inistioge (Co. Kilkenny) Immigrants in Newfoundland', *Journal of Newfoundland Studies* 5:2 (Fall 1989), 145. In R.W. Hay's 1832 emigration report (which contains a compilation of extracts of reports from agents and commissioners on the status of overseas emigration, presented to Viscount Goderich), one report from the Resident Agent for Emigrants at Quebec to Viscount Aylmer, dated 12 December 1831, mentions that over £250 000 of capital came into the Canadas due to emigration in 1831, stemming largely from the importation of 'respectable and wealthy farmers'. See: CO 384/27. 15 August 1832. To Goderich, from R.W. Hay, 'Emigration: Report on Commissioners – Copies of any Reports from the Commissioners for Emigration to the Secretary of State for the Colonial Department, since the last Session of Parliament'. TNA.

[4] Benedict Anderson, *Imagined Communities: Reflections on the Origin and Spread of Nationalism* (London, 1983), 6.

Buckner states, 'Prior to Confederation how else can one study Canadian history except as a series of diverse geographical, economic and cultural regions, loosely united under the British flag after 1763'.[5] Buckner claims, moreover, that because of their past, Canadians are able to identify with 'multiple identities'; stating that it is impossible to reduce the nation to one single formula. David Alexander also discusses the power of 'primary regional identit[ies]' in Canada and their influence on specific areas within the country, using the provinces of Quebec and Newfoundland as noteworthy examples. Alexander emphasises that 'regional identities are not tidy, for they cut across provincial boundaries and they exist within them…', referring to regionalism as an important, influential, but not always clear-cut method of understanding Canadian identity.[6] In her research on emigrants in Upper Canada, Jane Errington similarly emphasises that in nineteenth-century British America, '[emigrants] continued to identify themselves as English, or Irish, or Scots, or Welsh, and maintained close ties with communities on the other side of the Atlantic; but colonists also increasingly identified themselves as British and claimed membership in an Empire that spanned the globe'.[7]

There is no doubt that there are stark regional and local variations found within the Atlantic provinces of Newfoundland, Nova Scotia, Prince Edward Island and New Brunswick, as well as throughout Canada in general; however, there are also potential avenues for connection, particularly within the framework of networks, webs

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[5] Phillip A. Buckner, '"Limited Identities" Revisited: Regionalism and Nationalism in Canadian History', *Acadiensis* 30:1 (Autumn 2000), 11.
[6] David G. Alexander, *Atlantic Canada and Confederation: Essays in Canadian Political Economy* (Toronto, 1983), 82. Alexander uses Labrador and Cape Breton as examples of regional variation within provinces, in order to stress the point that 'primary regional identities' are present within the set provincial boundaries of Canada.
[7] Elizabeth Jane Errington, 'British Migration and British America, 1783-1867' in Phillip Buckner (ed.), *Canada and the British Empire* (Oxford 2008), 141.

and identities.[8] As James Hiller remarks, there has been little in the way of a 'regional synthesis' when assessing the various locales within an Atlantic Canadian context.[9] Although the three regions of Atlantic Canada discussed in this dissertation have significant historical and cultural differences, an enquiry into events they were all commonly forced to confront, such as the management of emigration and disease in the nineteenth century, has the potential to produce some insight into how the struggles, strains and predicaments experienced by these distinct colonial territories become somewhat comparable.

Atlantic Colonies - Early Years of Development

> With the Atlantic Ocean serving as much to link them to Europe as to distance them from it, the eastern margins of North America became a stage on which imperial characters acted out their competing roles.
>
> - Conrad and Hiller, 39.

From the sixteenth century onwards, the colonies that became Newfoundland, Nova Scotia and New Brunswick grew and developed under the influence of European colonial ambition, and from the presence of foreign explorers, merchants, fishermen and emigrants. As early as 1504, fishing boats from Brittany and Normandy found their way to the coasts of Newfoundland in search of cod – a commodity which also attracted the early presence of the Portuguese and Spanish.[10] While these European powers enhanced their presence in the sixteenth century, it was not until the latter half of that century that England's West Country merchants found

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[8] Alan Lester, 'Imperial Circuits and Networks: Geographies of the British Empire', *History Compass* 4:1 (2006), 124.
[9] James K. Hiller, 'Is Atlantic Canadian History Possible?', *Acadiensis* 30:1 (Autumn 2000), 20.
[10] Conrad and Hiller, 34; Gerald M. Sider, *Culture and Class in Anthropology and History: A Newfoundland Illustration* (Cambridge, 1986), 13. Sider points out that the Portuguese continued to fish in Newfoundland until the mid-twentieth century, terming Newfoundland as 'Terra Baccalau' – the land of cod. John Cabot has long been famously credited for being the first to report back on the vast amount of cod off of the shores of Newfoundland during his trip across in the Atlantic from Bristol, in 1497, aboard the *Matthew*.

their way to Newfoundland's Avalon Peninsula to fish for cod, with Sir Humphrey Gilbert taking formal possession of Newfoundland on behalf of the British Crown on 5 August 1583. As James Hiller points out, at that time, the presence of the British on 'Newfoundland's "English Shore" was the first English foothold in what is now Canada'.[11]

Although not an ideal place for settlement because of its harsh weather and lack of agricultural land, Newfoundland became attractive to foreign traders for its strategic location, and for its abundance of fish, seal and other natural resources. The need for temporary onshore posts in order to properly salt and preserve fish would lead to the creation of roughly 30 small settlements on the Avalon Peninsula by the mid-seventeenth century, containing between 1000-2000 people, all with some form of attachment to the West Country.[12] By the 1670s, the fisheries production in Newfoundland was paying off for the British, who at the time were reaping over 220 000 quintals of salt cod in a given year.[13]

[11] Conrad and Hiller, 35.
[12] Conrad and Hiller, 60.
[13] Jean Daigle, '1650-1686 – Un Pays Qui N'est Pas Fait', in Phillip Buckner and John G. Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 72.



Figure 1.1. Map of Newfoundland, Nova Scotia and New Brunswick. Sidney Hall, *A New General Atlas* (London, 1860).

To the southwest of Newfoundland, and to the northeast of New England, stands present-day Nova Scotia. Although Nova Scotia and Newfoundland were both influenced by trade and immigration, the basis of their economies was quite different. The fertile fishing grounds of the Grand Banks were Newfoundland's source of wealth, but good soil was more abundant in Nova Scotia, which allowed for less dependence on the ocean for economic prosperity. In 1604, the French attempted to establish a number of settlements in 'la Cadie', which became known as Acadia, successfully creating a permanent base at Port-Royal in 1605. By 1608, the French explorer Samuel de Champlain sailed up the St. Lawrence River and founded New France, later to become the present-day province of Quebec. Meanwhile, the French continued to focus on territorial development throughout the Atlantic region, which in Acadia required existing alongside the land's main aboriginal population, the Mi'kmaq. By 1650, Acadia had a population of around 400. It had expanded under the French with little threat from the British, whose focus remained on the seasonal

economic prospects of the North Atlantic.[14] In 1662, the French established a colony and military fort close to British territory, on the western shore of the Avalon Peninsula in Newfoundland, to protect its North Atlantic fishing fleets. The settlement was named Plaisance and by the end of the century it had a population of about 200.

From the mid-seventeenth century onward, the Atlantic region's strategic, economic and naval importance to Britain increased. As tensions heightened and war ensued in Europe between the British and French, the territories figured prominently in negotiations – a '…testimony not only to the significance of the fisheries but also to the Atlantic region's strategic location at the junction of competing territorial claims for imperial control in North America'.[15] In 1654, the British military attacked Port-Royal, which marked the beginning of a series of battles, extending over a century, between the French, English and other European powers, in pursuit of territory in the Atlantic region.[16]

The attack on Port-Royal in 1654 meant that until 1670, when Acadia was officially declared a royal colony of France, both Britain and France claimed control over the territory, creating confusion and uncertainty in the lives of local Acadians and Mi'kmaq. Meanwhile, in Newfoundland, 'planters' from the West Country fishing agencies began to winter over in order to stake claim to fishing zones.[17] Britain was not interested in retaining Newfoundland as an official colony, and began to implement anti-settlement regulations in 1675, but before long, conscious of the

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[14] Conrad and Hiller, 53.
[15] Conrad and Hiller, 52. Phillip Buckner points out that negotiations over fishing rights in Newfoundland almost led to the downfall of the Treaty of Paris, in 1763, arguing that '…in the seventeenth and eighteenth centuries [Newfoundland] was more important to Britain in strategic and economic terms than a number of the Thirteen Colonies'. See Buckner, 'Was There a "British Empire?" *The Oxford History of the British Empire* from a Canadian Perspective', *Acadiensis* 32:1 (Autumn 2002), 117.
[16] The Dutch attacked Ferryland in 1673, Acadia in 1674, and Plaisance in 1676. See, Conrad and Hiller, 58; Daigle, 72.
[17] Sider, *Culture and Class*, 15. According to Sider, property claims in Newfoundland were not incorporated into the legal system until 1824.

potential for other European powers to enforce their rights to the land and sea, and recognising that the planters helped to protect the area from foreign settlers, Parliament relented somewhat. The 1699 Act to Encourage the Trade to Newfoundland, also known as the King William's Act, condoned but did not encourage settlement, and remained in place until 1824. As Conrad and Hiller point out, after the 1660s '…British policy reflected the assumption that Newfoundland was an industry, not a colony'.[18]

Throughout the seventeenth century, while the water- and land-based resources and strategic locations of Newfoundland and Acadia were certainly valuable to England and France, according to John G. Reid, they were not '…[considered] jewels in any imperial crown'.[19] From a British colonial standpoint, little attention was paid to Newfoundland or Acadia during most of the seventeenth century, particularly compared to the southern colonies. France explored, invested and even collaborated with the native population in Acadia; however, the settlement always remained secondary to New France, which became an official French province in 1663. French officials in Acadia reported to French headquarters and government officials in New France, who reported directly to France. Events such as war, increases in international trade, and emigration would be required in order to stimulate further developments by the French, and even more so the English, in the Atlantic region.

By the late seventeenth century, and into the early eighteenth century, conflicts between Britain and France occurred frequently on Newfoundland and Acadian soil. In 1690, the British raided both Plaisance and Port-Royal. In 1697, the

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[18] Conrad and Hiller, 61.
[19] John G. Reid, '1686-1720 – Imperial Intrusions', in Buckner and Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 78.

French attacked the British in Newfoundland, destroying a large number of English settlements. By 1698, the British built a military fort and established a garrison in St. John's. In 1704 the British raided Acadia, and in 1705 and 1709, the French attacked St. John's.[20] Britain's first successful takeover of a French colonial territory finally occurred in 1710, when 1500 British soldiers seized the French military base at Port-Royal.

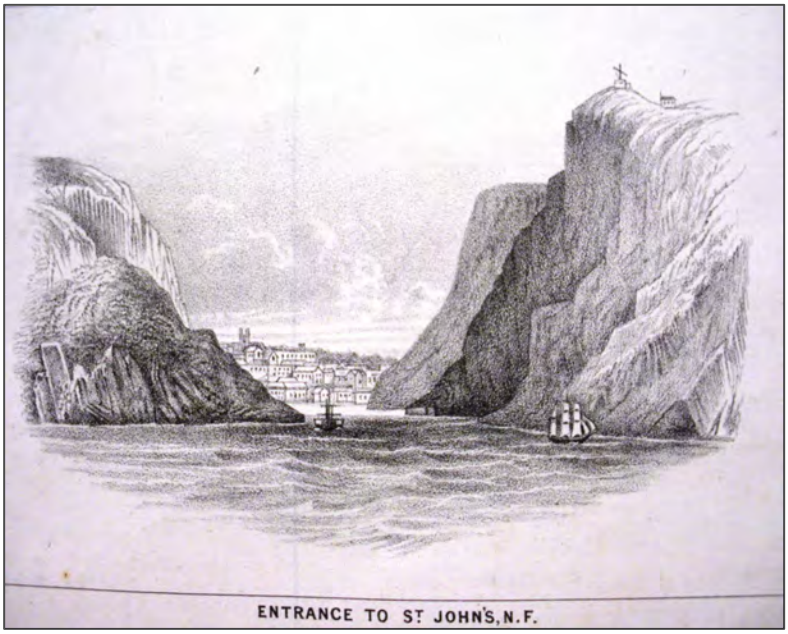

Figure 1.2. *Maps Compiled from Documents in the Colonial Department, To Accompany the Report of the Emigration Committee*. Bodleian Library Map Room, Oxford.

While the French surrender of Port-Royal was significant imperially and territorially for Britain, according to Jeffers Lennox, the British government was negligent when it came to the immediate development and expansion of its new territory, allowing the day-to-day lives of Acadians and Mi'kmaq to remain very much unchanged.[21] The Treaty of Utrecht in 1713 resolved that France would keep Île Royale (present-day Cape Breton Island) and Île Saint-Jean (present-day Prince Edward Island); however, other boundaries, particularly on the mainland, were still

[20] Reid, '1686-1720 – Imperial Intrusions', 84.
[21] Jeffers Lennox, 'An Empire on Paper: The Founding of Halifax and Conceptions of Imperial Space 1744-55', *The Canadian Historical Review* 88:3 (2007), 381.

contested and remained undefined. Although the French were forced to leave Plaisance, their migratory fisherman were still allowed on the shores of Northern Newfoundland, from Cape Bonavista to Point Riche.[22] The British renamed Port-Royal, Annapolis Royal, and Acadia, Nova Scotia, but struggled, unsurprisingly, to get Acadians to pledge allegiance to the British crown. While significant changes were made to territorial possessions during the Treaty of Utrecht, both the French and British were still very much present throughout the Atlantic region after 1713, making the structural alterations not nearly as obvious as one may have expected in the everyday lives of settlers.

In Newfoundland, Britain continued to focus on securing fishing rights off the coast, making it, according to Patrick O'Flaherty, a 'very important branch of the British commerce'.[23] In 1729, Captain Henry Osborne, the naval commodore in Newfoundland, was also appointed as 'naval governor' – a title created to enforce stricter legal and societal regulations on the island without having to construct an official role that would suggest a transition to colonial status. As Jerry Bannister has put it, Newfoundland's status for most of the eighteenth century was more like that of a 'naval state'.[24]

Agriculture continued to thrive in Nova Scotia after 1713, aided by the construction of dykes on the Bay of Fundy. The fertility of the land, enhanced significantly through Acadian engineering, discouraged French settlers from moving to official French territory on Cape Breton or Prince Edward Island. Most Acadians declared neutrality in order to remain on their land, which was tolerated by the British

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[22] Conrad and Hiller, 65.
[23] Patrick O'Flaherty, *Old Newfoundland: A History to 1843* (St. John's, 1999), 62.
[24] Jerry Bannister, *The Rule of Admirals: Laws, Custom, and Naval Government in Newfoundland, 1699-1832* (Toronto, 2003).

until the middle of the eighteenth century.[25] Inattentiveness characterised British policy towards the newly acquired territory. It was not until 1749 that the British decided to invest £700 000 to build and militarily enforce Halifax in order to defend themselves against the French, who occupied Louisbourg, on Cape Breton Island.[26] Even then, according to David Sutherland, it would take another twenty-five years before the town became anything more than '…an isolated military garrison, having only minimal commercial contact with the neighbouring region'.[27] Nevertheless, by the 1720s, while it had no elected assembly, Nova Scotia maintained a governor and appointed council.[28]

Newfoundland's resident population grew from 3 000 to 10 000 between 1720 and 1785, many of them settlers from southeast Ireland. According to Conrad and Hiller, the population grew '…slowly, informally, and without official encouragement'.[29] By the time of the American Revolution, there were still no formal political institutions in Newfoundland. According to Philip McCann, 'Newfoundland was regarded, together with New South Wales, as an "anomalous society", one which lacked a sufficient number of men of property, education, and loyalty to form a viable political entity'.[30] As Jerry Bannister points out in his work on the management of convicts in Newfoundland in the late eighteenth century, 'Government in

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[25] After living in British territory for nearly forty years, in 1755, Acadians, with a population of around 14 000, were given their last opportunity to pledge allegiance to the British crown. They refused, which lead to the deportation of over 11 000 Acadians to other British colonies in North America, between 1755-62. For more information on the Acadian Expulsion, or 'le Grand Dérangement', see James Laxer, *The Acadians in Search of a Homeland* (Toronto, 2006).
[26] Lennox, 'An Empire on Paper', 380. For more general information on the French presence in British North America, see Chapter Two – Emigrant Ships and Public Health Protocols.
[27] David Sutherland, 'Halifax Merchants and the Pursuit of Development, 1783-1850', *The Canadian Historical Review* 59:1 (1978), 2.
[28] Conrad and Hiller, 69.
[29] Jerry Bannister, 'Convict Transport and the Colonial State in Newfoundland, 1789', *Acadiensis* 27:2 (Spring 1998), 108; Conrad and Hiller, 91.
[30] Philip McCann, 'Culture, State Formation and the Invention of Tradition: Newfoundland 1832-1855', *Journal of Canadian Studies* 23:1/2 (1988), 87.

Newfoundland, as in many other British territories, was essentially reactive, limited by available resources and shaped by individual incentive'.[31]

Although there was a lack of official political governance throughout the eighteenth and early nineteenth centuries, magistrates, governors and merchant-settlers in Newfoundland ports gradually organised themselves to establish authority and public order, basic conditions to ensure law and civility within their communities. Lacking colonial councils, legislatures or assemblies, it is natural to assume that the island was barbaric and unruly. Bannister points out, however, that the British were aware of what was going on in Newfoundland, and had a rapport with officials in St. John's, who supplied detailed information, accurate statistics and valuable documentation to London. 'Despite the declaration by Grenville that Newfoundland was in no sense a colony', Bannister observes, 'London knew that settlement, government and law operated year-round after 1729'.[32]

Britain continued to gain North American territory from France, with its decisive victory in 1763. Conquered at last, New France was renamed Quebec. In the same year, the Treaty of Paris organised the entire Atlantic region and Quebec, under British jurisdiction.[33] Whether the colonial government was preoccupied with growing tensions in the Thirteen Colonies, or with their ongoing territorial wars with the French, Britain maintained a relatively distant relationship with Nova Scotia, and more deliberately, Newfoundland, up until the latter half of the eighteenth century.[34]

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[31] Bannister, 'Convict Transportation', 97.
[32] Bannister, 'Convict Transportation', 120. Bannister is making reference to a statement made by William Grenville on the status of Newfoundland, a quotation which has been used, and misused, by several historians: 'Newfoundland is in no respect a British colony, and is never so considered in our laws'; Grenville to Fitzgibbon, 2 December 1789, *Dropmore Papers,* vol.1, p.549. BL. Bannister makes the point that Grenville's statement was made in an attempt to solve a specific issue on the arrangement of transportation for Irish convicts from Newfoundland, reasoning that it must be taken within its context and claiming that his words '…formed neither a general nor an accurate statement on the operation of the island's government'. Bannister, 'Convict Transportation', 116.
[33] Conrad and Hiller, 85.
[34] In 1791, Quebec was divided into Upper (English-speaking) and Lower (French-speaking) Canada.

As Conrad and Hiller point out, even if they wanted revolution similar to their southern counterparts, none of the populations in the Atlantic region were politically or economically self-sufficient to successfully seek independence. Regional developments progressed slowly, with local authorities carrying on with what was needed in their communities, regardless of whether or not London chose to remain at arms-length. Local officials continued to enact protocols and support much needed improvements; however, on an international level, the Atlantic region wholly relied on the British Crown for representation.

Prior to the advent of mass emigration, the history of Nova Scotia (which at the time still included New Brunswick) and Newfoundland reveals discrepancies between settlers on the ground and the aims of London's colonial office. While development and progress occurred more readily in Nova Scotia, as it was an official colony, any direct attention paid to the territories was usually in response to international war or through the protection or advancement of colonial goals in more valued areas of North America. The reactive framework with which policies were implemented in the Atlantic colonies during the eighteenth-century would continue to influence the way in which issues such as the economy, immigration, public health and disease, were managed in the following century.

Economic Growth and Early Migration: Prosperity in the Atlantic Region

After the American Revolution, Britain was forced to shift its focus towards its remaining possessions in North America. After years of gradual, haphazard development, the Atlantic region would undergo rapid political, social and economic change amidst the break up of the southern colonies. Close to 50 000 Loyalist settlers from the United States moved northward in search of land under British leadership –

more than doubling the population of British North America.[35] The population boom forced immediate structural and geographic reorganisation in Nova Scotia. While thousands of Loyalists fled to areas of south-eastern Nova Scotia prior to the outbreak of war, an overwhelming number of settlers crossed the boarder during and after the Revolutionary War. Their presence effectively created a new colony, New Brunswick, in the densely forested, north-western mainland portion of Nova Scotia, in 1784.[36] 15 000 Loyalists arrived on the Saint John river alone, immediately populating the colony, which included Saint John, an area effectively transformed from a small village into a culturally distinct town, maintaining a population of 3 500 by 1785.[37]

The river system in New Brunswick was integral to the colony's rapid development. It was useful in transporting settlers and material goods to various towns and villages, but it also became crucial in transferring large amounts of wood directly to Saint John, which soon became an industrial centre.[38] The economic success of the timber trade came to define New Brunswick's commercial prosperity, and created a natural avenue for the development of shipbuilding in Saint John. Throughout the nineteenth century, Saint John maintained the largest shipping fleet in British North America, and built the largest vessels in the Maritime region.[39] Where St. John's and Halifax had experienced centuries of desultory development under English and French colonial regimes, Saint John was quick to catch up. By the end of

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[35] Conrad and Hiller, 87.
[36] Cape Breton Island also became a colony in that year. It would exist on its own until its re-annexation with Nova Scotia in 1820. Over 3000 Black Loyalists came to Nova Scotia as well, although nearly 1200 left shortly afterwards, in 1792, for Sierra Leone. For an in-depth study on this topic see: James W. St. G. Walker, *The Black Loyalists: The Search for a Promised Land in Nova Scotia and Sierra Leone 1783-1870* (Toronto, 1992).
[37] T.W. Acheson, *Saint John: The Making of a Colonial Urban Community* (Toronto, 1985), 10.
[38] Acheson, *Saint John*, 4.
[39] Acheson, *Saint John*, 18.

the century, it became the first town in British North America to be granted a charter and to receive Common Council in 1785.[40]

Timber, shipbuilding and a new Loyalist population in New Brunswick stimulated political reforms and economic initiatives in the area; nevertheless, according to Graeme Wynn, in the early nineteenth century '[New Brunswick] was a backwater by contrast with Nova Scotia'.[41] Nova Scotia's long status as an official colony meant that Halifax continued to possess strong strategic military and naval importance for Britain in the North Atlantic. Nova Scotian commerce and industry was considered more sophisticated than New Brunswick's or Newfoundland's. The colony had coinage by 1790, roads were developed to access smaller settlements and the British military continued to construct new military fortifications in and around the Halifax area.

Although most Loyalists did not attempt to cross the Gulf into Newfoundland, the island experienced its own economic and societal shifts after the American Revolution. Newfoundland's trade increased with towns and cities in Europe, Upper and Lower Canada, and the West Indies. Although Britain continued to govern Newfoundland along a 'path of least resistance',[42] the island continued to push local initiatives and social development, which included the establishment of a Supreme Court in 1791, its own Roman Catholic bishop by 1796, and the appointment of year-round resident governors after 1817.[43] According to Bannister, governors and magistrates constituted a type of informal legislature in Newfoundland throughout the

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[40] S. Morley Wickett, *Municipal Government in Canada* (Toronto, 1907), 228. Wickett mentions that Halifax petitioned for a charter, but was not granted one until 1841; Acheson, *Saint John*, 28.
[41] Graeme Wynn, '1800-1810 – Turning the Century', in Buckner and Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 215.
[42] Bannister, 'Convict Transportation', 121.
[43] Conrad and Hiller, 99; 116. In 1817, Nova Scotia was granted its own Roman Catholic bishop, Edmund Burke, who also held jurisdiction over New Brunswick. Prior to this, both colonies were under the jurisdiction of the bishop of Quebec.

eighteenth and early nineteenth centuries, arguing that their governance was impressive – 'compris[ing] much more than the sum of its bureaucratic parts'.[44]



Figure 1.3. 'A view of the Town and Harbour of Halifax from the Dartmouth Shore', Joseph F.W. DesBarres, *The Atlantic Neptune* 1 (London, 1780).

The presence of the military was influential in Nova Scotia's formation and identity, but as David Sutherland argues, by the latter half of the eighteenth century, conflict and tension from the Revolutionary War and the increase of American traffic northward, modernised Halifax's economic growth and international trading capacity. By the early 1780s, opportunities for development and prosperity in Nova Scotia grew from increased trade with the West Indies, American imports generated from the temporary exclusion of U.S vessels from British Caribbean ports, as well as the effects of the American, British, and French conflicts.[45] As Sutherland notes, 'Halifax merchants found themselves essentially playing the role of middlemen, handling a two-way flow of goods between the island planters and the United States, an arrangement which yielded profits but which left the Maritimes vulnerable to external

[44] Bannister, 'Convict Transportation', 122.
[45] Sutherland, 'Halifax Merchants', 2. Sutherland argues that Halifax benefitted greatly from the 'profits of war'.

pressures'.[46] Britain supported colonial initiatives in Nova Scotia, particularly during the War of 1812, where the British government employed 1600 men to the naval dockyard in Halifax.[47]

Wood, fish and foreign goods were all commodities traded in the Atlantic region and shipped internationally. Once considered areas compromised and wretched during international tension and war, St. John's, Halifax and Saint John now reaped the benefits of commercial success of wartime conflict in North America. Halifax and Saint John were declared free ports in 1807, a tactical move by Britain in the face of tensions with New England. Both ports, however, benefited greatly from the increased presence of New England and British goods bought and sold in town. At a similar time, the migratory fisheries from the West Country came to an end in Newfoundland, allowing St. John's merchants to construct their own international industry. Local initiatives in the fishing industry greatly enhanced Newfoundland's economy, which continued to benefit from a successful international market for cod, particularly with Spain and Portugal.[48]

The geographic location of Newfoundland, Nova Scotia and New Brunswick provided a middle point for British and European trade to the southern United States, the Caribbean, and South America, with W.S MacNutt describing the Atlantic colonies as '…the apex of a lucrative triangular trade'.[49] Within the first decade of the nineteenth century, St. John's, Halifax and Saint John developed their own particular industrial strengths, as all three ports became international commercial centres. Although by the end of the century, Ontario and Quebec came to be considered the

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[46] Sutherland, 'Halifax Merchants', 3.
[47] D.A. Sutherland, '1810-1820 – War and Peace', in Buckner and Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 239.
[48] Conrad and Hiller, 103.
[49] W.S. MacNutt, *The Atlantic Provinces: The Emergence of Colonial Society, 1712-1857* (Toronto, 1965), 171.

most industrially developed and economically successful areas of Canada, this was not the case earlier on. In 1812, for example, the capital stock in Newfoundland was £368 per capita while that of Upper and Lower Canada combined was £27.[50] The success of the shipping industry in the Atlantic region would continue throughout the nineteenth century, with 73 per cent of British North American shipping still registered in Newfoundland, Nova Scotia, New Brunswick and Prince Edward Island in 1880.[51]

In 1800, Nova Scotia and New Brunswick were official British colonies, albeit at varying stages of political growth and development, but it would take another quarter-century for Newfoundland to be granted colonial status. By 1815, the permanent population was over 20 000 with a successful fisheries industry based increasingly in St. John's. Newfoundland was overdue for political development. Although society had grown accustomed to change and progress based on the needs of the population, the lack of corresponding modifications of its colonial status by Britain stimulated a growing reform movement in Newfoundland. Colonial status was eventually granted in 1824, a civil governor, John Cochrane, was assigned to Newfoundland in 1825, and representative government instituted in 1832.

As industrial and commercial initiatives strengthened Newfoundland, Nova Scotia and New Brunswick, emigration became essential to the overall enhancement of life in the colonies. An Irish passenger trade with Newfoundland, largely centred in Waterford, grew significantly after 1763, creating a sizeable southeast Irish presence on the island, rivalling the historical West Country English population by the turn of the century.[52] From 1811-1816, particularly through the success of the fisheries in St.

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[50] Eric W. Sager with Gerald E. Panting, *Maritime Capital: The Shipping Industry in Atlantic Canada 1820-1914* (Montreal, 1990), 14.
[51] Sager with Panting, 3.
[52] Bannister, 'Convict Transportation', 100-101.

John's, the annual rate of immigrants to Newfoundland shot upwards from 1200 to 6000 people.[53] Over 17 000 Highland Scots arrived in Nova Scotia and Prince Edward Island between 1783-1803, contributing especially to the population in eastern Nova Scotia.[54] New Englanders continued to populate New Brunswick after 1784, as well as a great portion of the southern shore of Nova Scotia. By 1800, Halifax reached a population of 8000, nearly twice that of St. John's or Saint John.[55]

Prior to 1815, according to H.J.M. Johnston in his important study on emigration from the British Isles, *British Emigration Policy, 1815-1830: 'Shovelling Out Paupers'*, Nova Scotia, Cape Breton Island and Prince Edward Island were the only colonies to attract a regular number of British emigrants on an annual basis, from the late eighteenth century.[56] Emigrants from the British Isles continued to follow and identify with connections and opportunities available in the Atlantic region, an area which contained a collective population of roughly 200 000 by 1815 (a population which quadrupled in size over the next fifty years).[57] Many friends and family members already living in the New World helped secure and fund the voyage across the Atlantic for new emigrants. In the case of Newfoundland, as John Mannion explains, the networks created through seasonal migration became incentive for many young Irish male labourers from places such as Inistioge (Co. Kilkenny), New Ross and Waterford, to consider settling there. Mannion points out: 'Payment of passages several months after arrival was a salient feature of Irish Newfoundland migration'. By 1836, Newfoundland's population had risen to 38 000, with the Irish comprising over half of the total.[58]

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[53] O'Flaherty, *Old Newfoundland*, 122.
[54] Conrad and Hiller, 99.
[55] Wynn, '1800-1810 – Turning the Century', 212.
[56] H.J.M. Johnston, *British Emigration Policy, 1815-1830: 'Shovelling Out Paupers'* (Oxford, 1972), 7.
[57] Conrad and Hiller, 107.
[58] Mannion, 'Old World Antecedents', 109.

Newfoundland, Nova Scotia and New Brunswick all experienced periods of industrial success, political reform and population growth during the late eighteenth and early nineteenth centuries. Although London provided varying levels of opportunity and support to each region, a great portion of its North American focus remained in protecting its sought-after Lower and Upper Canadian territories from the Americans, particularly during the War of 1812. Important structural or economic changes in the Atlantic region, such as the development of timber trade, accommodating the mass displacement of Loyalists, or the need for additional British military enforcements, usually occurred as a result of external circumstances, such as colonial war, social instabilities or economic ventures in other areas of the world. Settlers and local governments in Nova Scotia and New Brunswick continued to adapt and move forward as external colonial conditions changed, while in the case of Newfoundland, until 1824, industry developed, population grew and society expanded without any form of acknowledged colonial status.

Although the Atlantic territories remained peripheral players on the colonial stage, economic and industrial development during this time created a belief in their region's potential to achieve prosperity and attain some form of international stature. Timber, shipbuilding, the fisheries, shipping and the military became significant components in the initial growth and local prosperity of the Atlantic region, which in turn, generated an influential base in the formation of individual colonial identities. After 1815, increased forms of connection and communication, led primarily through mass emigration from the British Isles, not only enhanced the successes of these industries, but also helped to influence and characterise the growth of specific colonial settler societies.

Circuits of Empire – Settler Migration

Until 1815, Newfoundland, Nova Scotia and New Brunswick had developed for the most part independently, although in many cases similarly, to one another. They were geographically proximate, and experienced similar economic, political and social influences; however, they were also historically and even culturally distinct. In terms used by Alan Lester, they created their own 'circuits' and acted as different 'nodes' within the British imperial network.[59] The colonies did not extensively collaborate, and were largely self-reliant and resilient, using their own natural resources, incoming settler populations and individual patterns of development to define their values and identities.

This is not to suggest, however, that they lived in total isolation. Towns in Nova Scotia and New Brunswick were used to accommodating Irishmen who had initially landed in Newfoundland, but who were unable to find employment or opportunities within their specific lines of work. Resident Newfoundlanders, then as now, also followed this trend at times, particularly if the fisheries were unstable, with many choosing to migrate westward in search of new prospects.[60] Loyalists settled and relocated throughout New Brunswick and Nova Scotia, and military men, migratory by profession, moved between Saint John to Halifax, depending on the specific needs of the British army. Ports in each colony knew to rely on each other for domestic supplies, food and other basic commodities, particularly during a harsh

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[59] Alan Lester, 'British Settler Discourse and the Circuits of Empire', *History Workshop Journal* 54 (2002), 25.

[60] Mannion, 'Old World Antecedents', 134. Mannion claims that Miramichi, New Brunswick, received a large group of immigrants from southeast Ireland and Newfoundland, terming it as '…an extension of the Waterford-Newfoundland migration corridor'. Judith Fingard also mentions the presence of Newfoundlanders in Nova Scotia, in the latter half of the nineteenth century, referring to a boarding house keeper, Nicholas Berrigan, a Newfoundlander of 'bad character', living in Halifax. In 1876, Berrigan was charged with a number of offenses, largely related to the sale and distribution of liquor in town, and was accused of being affiliated with a gang of harbour pirates. See Fingard, 'Masters and Friends, Crimps and Abstainers: Agents of Control in 19th Century Sailortown', *Acadiensis* 8:1 (Autumn 1978), 24.

winter, severe storm or food crisis. As St. John's, Halifax and Saint John grew into busy international ports, schooners travelled regularly between them, and into the smaller domestic ports of each colony, carrying clothing, tobacco, molasses, flour, butter, pickles, tea and gin.

After 1815, emigrants from the British Isles continued to find their way to British North America. As Mannion explains, much of these migration patterns were localised, creating variability in the way in which British, Irish, Scottish and Welsh emigrants arrived and settled in the Atlantic region.[61] Regardless, however, most migrants chose their destinations based on land availability, specific employment opportunities, as well as their individual family connections in North America. Saint John maintained significant Loyalist influence, attracting British settlers, however, its growing Irish population came from various areas of Ireland (unlike Miramichi, whose Irish emigrants were almost entirely from the southeast).[62] Nova Scotia maintained a substantial New England population on its south shore, and by 1825, a large influx of Scots had begun to transform the traditional cultural values of Cape Breton Island.[63] As Mannion points out, many single young Irishmen from places like Inistioge continued to migrate to Newfoundland into the 1820s, having to modify their historically agrarian backgrounds to adapt to a sea-faring existence. Many chose to marry Irish women on the island, most of whom they would not have otherwise interacted with, creating a new hybrid of Irish identity formed from 'multiple identities', on the other side of the Atlantic.[64]

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[61] Mannion, 'Old World Antecedents', 104.
[62] Mannion, 'Old World Antecedents', 134.
[63] Judith Fingard, 'The 1820s – Peace, Privilege, and the Promise of Progress', in Buckner and Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 269.
[64] Mannion, 'Old World Antecedents', 121. Mannion claims that there was little in the way of marriage amongst the Irish and the English, stating that: 'Ethnicity and religion were paramount in shaping the cultural character of Newfoundland communities. A growing sense of Irishness replaced the parochialisms of home'. Mannion, 'Old World Antecedents', 133.

Residents became increasingly inquisitive concerning the geography of the territories, with explorers like Scottish-Newfoundlander William Cormack, who in 1822, under the guidance of a Mi'kmaq Indian, Joshua Sylvester, became the first white man to trek across Newfoundland.[65] Continued industrial and population growth in Newfoundland, Nova Scotia and New Brunswick made the exciting opportunities available on the 'colonial frontier' increasingly attractive to those feeling confined by work and society in the Old World.

By the 1820s, the mercantile elite, some of whom were now first-generation colonials, began to invest in local and international business ventures from their respective bases. Samuel Cunard, born in Halifax, substantially invested in New Brunswick's timber trade, and in 1840 supported the establishment of steamship companies transporting passengers across the Atlantic.[66] Economic advancements in New Brunswick, driven by increased international investments in forestry, led to the creation of the Bank of New Brunswick in 1820.[67] Enos Collins, born in Liverpool, Nova Scotia, helped to establish a number of highly successful business ventures out of Nova Scotia, and was one of the main partners in the formation of the Halifax Banking Company in 1825.[68] In Newfoundland, Benjamin Bowring, born in Exeter but a permanent resident of St. John's by 1815, was a successful clockmaker and

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[65] W.E. Cormack, *Narrative of a Journey across the Island of Newfoundland* (St. John's, 1822). See George Story, "Guides to Newfoundland" in Melvin Baker, Helen Peters and Shannon Ryan (eds.), *People of the Landwash* (St. John's, 1997), 137-140 as well as G.M. Story, 'Cormack, W.E', *DCB Online* 1861-1870 (Volume IX) (Toronto, 2000).
[66] Conrad and Hiller, 113.
[67] Graeme Wynn, *Timber Colony: A Historical Geography of Early Nineteenth-Century New Brunswick* (Toronto, 1981), 46.
[68] Diane M. Barker and D.A Sutherland, 'Collins, Enos', *DCB Online* 1871-1880 (Volume X) (Toronto, 2000). Collins was one of a number of mercantilists in Halifax who benefitted from the War of 1812, profiting from cargo sold after capturing American vessels during the war; Dan Bunbury, 'Safe Haven for the Poor? Depositors and the Government Savings Bank in Halifax, 1832-1867', *Acadiensis* 24:2 (Spring 1995), 26. Samuel Cunard was also a partner in the formation of the Halifax Bank Company.

retailer, and one of a number of businessmen who contributed to the enhancement of local industry and development in St. John's.[69]

The growth of industry, economy and people in Newfoundland, Nova Scotia and New Brunswick by the 1820s generated a base for the development of culture and society within the region. By the turn of the century, newspapers emerged throughout the Atlantic region, many of which were initiated or heavily influenced by political or religious groups in the major towns, and used to publicise current debates and opinions on their respective positions.[70] Local news, advice and opinions were written under their own headings, and information on events overseas were re-printed from foreign papers in the world news or colonial sections of papers such as *The Royal Gazette and Newfoundland Advertiser* (Newfoundland), *The Novascotian* (Nova Scotia) and *The Weekly Observer* (New Brunswick).

Newspapers offered greater accessibility to information, stimulating a heightened awareness not only of current affairs within communities but also other towns in the Atlantic region and places throughout the world. Their growth not only made information more readily available to the Atlantic region, but their content helped residents define and understand the societal and colonial implications of where

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[69] Melvin Baker, 'Bowring, Benjamin', *DCB Online* 1836-1850 (Volume VII) (Toronto, 2000).
[70] The religious and political influence of newspapers was particularly evident in St. John's. The *Royal Gazette and Newfoundland Advertiser* was the first newspaper established in St. John's in 1807. Although the motto of the *Public Ledger* was 'Open to all parties – Influenced by none', the paper was considered largely Protestant in its views, and publicised 'rhetoric' on the Catholic church and the Irish. Home rule advocate Dr. William Carson was a regular contributor to the *Public Ledger*, a paper which re-printed many of its articles from the *London Times*, but in 1833, he began the *Newfoundland Patriot*. While the majority of these papers were influenced in one way or another by religious or political thought, the *Newfoundlander* was considered a paper which did not participate in local politics. For more analysis on religious influence on local papers see, John P. Greene, *Between Damnation and Starvation: Priests and Merchants in Newfoundland Politics, 1745-1855* (Montreal, 1999), 77-85.

they were, and how their affairs compared with other regions situated within the larger nineteenth-century notions of Empire.[71]

Education and literacy in the Atlantic region had also grown in importance by the early nineteenth century. British evangelical missionaries created the Newfoundland School Society in 1823 to promote educational opportunities around the island.[72] Halifax Grammar School was established in 1789, and in 1818 Dalhousie College was created with a £7000 endowment and a £3000 construction fund from Lord Dalhousie. Fictional writing gained in popularity with local writers like Thomas McCulloch of Nova Scotia and Julia Catherine Beckwith of New Brunswick producing some of the first pieces of British North American writing in their respective works entitled *Stepsure Letters* and *St Ursula's Convent*.[73] Traditions were created, with events like the St. John's Regatta, an annual boat race first organised in 1826, which continues to take place on Quidi Vidi Lake each summer.[74]

As already indicated, Newfoundland lagged behind Nova Scotia and New Brunswick in achieving representative and responsible governmental structures.[75] The island's lack of colonial status and elected representation leading into the nineteenth century spurred growing nationalist sentiment in the form of writing, public discussion and an eventual political reform movement in the 1810s. In 1793, John Reeves, Newfoundland's first Chief Justice, published *History of the Government of the Island of Newfoundland* and famously stated in his introduction:

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[71] Anderson and Lester both refer to the influence of newspapers as an important tool in manufacturing collective identity within societies. According to Lester, the colonial coverage worked both ways, as papers like *The Times* published 'settler press', in order to provide updates from the colonies, claiming that '…settler newspaper[s] became a channel through which the metropolitan reading public created an imagined geography of empire', Lester, 'British Settler Discourse', 32. For a more comprehensive discussion on ' the newspaper as a cultural product', see Anderson, *Imagined Communities*, 32-6.
[72] McCann, 'Culture, State Formation', 92.
[73] Conrad and Hiller, 120.
[74] Ibid.
[75] Nova Scotia received representative government in 1758, while New Brunswick was granted an elected assembly upon receiving colonial status in 1784. Even Cape Breton Island, after re-annexation, had its own representation with two allocated seats within the Nova Scotia House of Assembly.

> I intend to give a short history of the Government and Constitution of the island of Newfoundland. This will comprise the struggles and vicissitudes of two contending interests – The planters and inhabitants on the one hand, who, being settled there, needed the protection of a government and police, with the administration of justice: and the adventurers and merchants on the other; who, originally carrying on the fishery from this country, and visiting that island only for the season, needed no such protection for themselves, and had various reasons for preventing its being afforded to others.[76]

Bannister stresses that nationalist writings in Newfoundland in the eighteenth and nineteenth century must be assessed and maintained within their historical framework, noting that Reeves' narrative begins by '…setting out the heroes and villains'. Nevertheless, works of this kind do provide insight into the early tensions and growing dissatisfaction with British government in Newfoundland in the late-eighteenth century.[77] By 1812, St. John's physician, Dr. William Carson, who later became District Surgeon from 1827-34, wrote Newfoundland's first 'protest pamphlet', fuelling public debate and remonstration on the need for updated law and order, eventually leading to the establishment of an elected local assembly, and political equality with the rest of the Atlantic region by 1832.[78]

By the 1820s, towns in the Atlantic region, through increases in connection and communication, became influenced by nineteenth-century thought, culture and society. As the economy expanded and society diversified, so too did the needs and expectations of those living in the colonies. Early sentiments of native patriotism resonated in the consciousness of first-generation colonials in search of a richer understanding of their place in the New World. Phillip McCann argues that in

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[76] John Reeves, *History of the Government of the Island of Newfoundland* (London, 1793), 1. For an in-depth analysis on the influence of nationalist thought from Reeves and others, and more generally on the history of nationalism in Newfoundland, see Jerry Bannister, 'Whigs and Nationalists: The Legacy of Judge Prowse's *History of Newfoundland*', *Acadiensis* 32:1 (Autumn 2002), 84-109.
[77] Bannister, 'Whigs and Nationalists', 87.
[78] Bannister, *Rule of Admirals,* 258-59. Carson would also play an important role as District Surgeon during the cholera preparations in St. John's in 1832. For more information, see Chapter Three: St. John's – A Case Study.

Newfoundland, signs of societal growth through writing, ritual and 'inventing tradition' signified the beginnings of native culture by the 1830s; however, similar methods of self-reflection and re-identification were found throughout British North America, as settlers continued to distinguish and define themselves within the confines of an evolving British world.

Settlement and society in North America encouraged a growing sense of identity and opportunity; however, life was also undeniably fragile. The uncertainties of seasonal employment, harsh weather, crop failures and sudden loss of life were daily realities throughout British North America. Newfoundland and New Brunswick, in particular, were prone to economic instability, as both colonies were reliant on the success of a single commercial export, fish and wood, respectively.[79] Charitable organisations, churches and private philanthropy became increasingly important as ways to support and contend with the Atlantic region's poor and working-class populations. Saint John created New Brunswick's first almshouse in 1801, with Fredericton and St. Andrews following in 1823 and 1824.[80] While almshouses typically provided food and shelter for those in a dependent state, according to James M. Whalen they also acted as hospitals in New Brunswick, a colony without any official public hospitals until 1865.[81]

In the early nineteenth century, welfare and medical infrastructures in St. John's, Halifax and Saint were in the process of development. State institutions constructed to care for immigrants and the poor included the formation of almshouses, emigrant hospitals and provincial poor laws, and were typically the responsibility of

[79] For more information on the 'chronic economic instability' found in New Brunswick during this period, due to the timber trade, see Chapter One of Graeme Wynn's, *Timber Colony*.
[80] James M. Whalen, 'Social Welfare in New Brunswick, 1784-1900', *Acadiensis* 2:1 (1972), 57.
[81] Whalen, 'Social Welfare', 59.

local magistrates.[82] In the event of a disease outbreak, provincial government would ordinarily request the formation of boards of health in their larger town centres, however, as shown in the case studies with cholera, many smaller communities voluntarily formed their own health boards. These boards of health, however, were temporary, and would dissolve once the threat of transmittable disease had passed.

The Benevolent Irish Society was created in 1806, and over the course of the nineteenth century, became an essential source of charity, education and support for Irish descendents in Newfoundland.[83] The St. Patrick's Society of Saint John, founded by Irish settlers, provided a similar role to the Benevolent Irish Society, and became a highly supportive organisation and advocacy group for emigrants in poor circumstances. In Halifax, a city which, in the words of George E. Hart, 'saw all types of misery', the Poor House was overwhelmed by the growing working-class population, and by 1820 supported nearly 700 residents a year.[84] The Association for the Relief of the Labouring Poor was created in Halifax in 1817, and in 1820, the Poor Man's Friend Society was founded, funded mainly by voluntary contributions and Nova Scotian government tax, with the Society claiming to have helped over 4000 people throughout the town in its first year of operation.[85] Although there were criticisms that the Society was enabling the poor, arguments influenced by Malthusian thought in Britain, Hart claimed that the society 'reminded the public more than once that reverses of fortune might come to any man, and that many persons were reduced

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[82] Acheson, *Saint John*, 28.
[83] McCann, 'Culture, State Formation', 89; *Benevolent Irish Society Minutes – 1855*. 17 February 1855, PANL. The Benevolent Irish Society was crucial in implementing an orphan school in St. John's in 1855.
[84] George E. Hart, 'The Halifax Poor Man's Friend Society, 1820-27: An Early Social Experiment', *The Canadian Historical Review* 34:2 (1953), 110.
[85] Hart, 112.

to a state of hunger and privation by illness and a general condition of unemployment'.[86]

As populations expanded, state institutions, societies and welfare organisations in the Atlantic region struggled to keep up. While communities fought to meet the economic, political and societal challenges of nineteenth-century colonial state formation, emigration to North America after 1815, while potentially providing a needed workforce, actually exacerbated these issues. By 1820, the growing desire of many people to emigrate from the British Isles encouraged unregulated forms of emigration to take place, and the port towns of British North America increasingly received ships overflowing with destitution and human misery, 'annually swell[ing] the ranks of the poor that infested these major Atlantic ports'.[87] Throughout the 1820s, ports in Newfoundland, Nova Scotia and New Brunswick experienced a surge in immigrant traffic, and as emigrant voyages became more frequent and less controlled, many newcomers arrived unexpectedly, in some form of distress, and in serious need of relief.

Historically, many migrated to British North America on their own initiative in pursuit of individual employment or commercial prospects, or encouraged by personal and family connections. After the War of 1812, however, the Colonial Office developed a policy of small-scale state-supported schemes to promote emigration.[88] In order to deter its people from migrating to the United States, the British government sought to promote Upper Canada as an ideal area of settlement for emigrants, offering

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[86] Hart, 123.
[87] Judith Fingard, 'The Relief of the Unemployed Poor in Saint John, Halifax, and St. John's, 1815-1860', *Acadiensis* 5:1 (1975), 32.
[88] Johnston claims that 11 000 emigrants at most were involved in state-funded emigration between 1815-26, with a ratio of 1:19 who otherwise left on their own. Johnston, 1. For a greater analysis on the influence of emigrant ships and the early transmission of disease in British North America, see Chapter Two: Emigrant Ships and Public Health Protocols.

reduced passage rates to British North America to promote colonial migration.[89] As Britain became more involved in the process of populating its colonies overseas, Quebec, the port of entry for both Upper and Lower Canada, quickly became the busiest emigrant-port in North America after 1817.[90]

Although the overall majority of emigrants bound for British North America now aimed to settle in Upper Canada, others continued to migrate to the Atlantic region. New Brunswick, in particular, was attractive, containing nearly ten million acres of Crown land available to timber-investors, agriculturalists, and settlers, quickly making Saint John the busiest immigrant port in the Atlantic region.[91] Nova Scotia, with a population of 123 000 by 1827, twice that of Newfoundland and 40 per cent more than New Brunswick, also had land to offer; however, neither Nova Scotia nor Newfoundland had anywhere near as much available land as New Brunswick.[92] Newfoundland's population rose steadily after 1815, with migrants arriving to take part in the economic potential of the ocean. As fish continued to drive the economy forward, investments in wooden ships to support sealing and the fisheries became a more practical undertaking than land development, although efforts continued to be made on that front, with limited success.[93]

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[89] Helen I. Cowan, *British Emigration to British North America, 1783-1837* (Toronto, 1928), 18. Cowan notes that in the late eighteen century, passage rates were reduced even further if the emigrant was destined for New Brunswick, Nova Scotia, or Cape Breton, presumably because the emigrant would not require domestic transportation along the St. Lawrence, and then possibly even further on the Rideau River to Upper Canada. She does not include Newfoundland in her discussion on passage rates for emigrant ships.

[90] Johnston, 26.

[91] Fingard, 'The 1820s – Peace, Privilege', 269.

[92] Fingard, 'The 1820s – Peace, Privilege', 269.

[93] Conrad and Hiller, 114. They point out the importance of the seal hunt not only for the skins, but also for the seal fat, which was turned into oil, used to light lamps and as a lubricant, throughout the nineteenth century. Newfoundland's first Governor, Thomas Cochrane, did attempt to promote agricultural development north of St. John's, especially considering a large portion of Newfoundland emigrants had farming backgrounds. For more information see: Robert MacKinnon, 'Farming the Rock: The Evolution of Commercial Agricultural around St. John's, Newfoundland, to 1945' *Acadiensis* 20:2 (Spring 1991), 32-61.

With the promotion of emigration in the British Isles came the distribution of booklets, pamphlets and advertisements, containing guides, descriptions, practical advice, and remarks from recent British North American settlers. Booklets such as the *Emigrants Pocket Companion*, *Advice to Emigrants* and *An Historical and Descriptive Account of British America* were used as promotional tools for consultation prior to migration, containing detailed physical, historical and personal descriptions on the status of each British North American colony.[94] One pamphlet quotes Samuel Simpson, who immigrated to Lake Huron in Upper Canada, claiming, '…he never was so happy in his life; nothing shall entice him back; and he shall never repent the day he came here. He has bought eighty acres of land, and it is to be paid for in five years'.[95] While all British North American colonies were typically mentioned in some capacity, writers were generally less supportive of colonial emigration to the Atlantic region. In *The Emigrant's Pocket Companion*, Robert Mudie states in his chapter on the 'Geographical Sketch of British North America':

> The British territories in North America, at least that portion of them which is fit for being the permanent residence of inhabitants, consists of five provinces: - Newfoundland; Nova Scotia; New Brunswick, including Prince Edward's Island; and Lower and Upper Canada. The three provinces first mentioned, are not very well adapted for the

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[94] Robert Mudie, *The Emigrant's Pocket Companion; Containing, What Emigration is, Who Should be Emigrants, Where Emigrants Should Go,; A Description of British North America; Especially The Canadas; and Fully Instructions to Intending Emigrants* (London, 1832); Thomas Dyke, *Advice to Emigrants, or, An Impartial Guide to the Canadas, New Brunswick, Nova Scotia , the United States, New South Wales, Van Dieman's Land, the Swan River, and the Cape of Good Hope: pointing out the Advantages and Disadvantages of the Several Locations: With the latest Government Instructions* (London, 1832); Hugh Murray, *An Historical and Descriptive Account of British America: Comprehending Canada, Upper and Lower, Nova Scotia, New Brunswick, Newfoundland, Prince Edward Island, the Bermudas, and the fur countries ... to which is added, a full detail of the principles and best modes of emigration* (Edinburgh, 1839). BLCAS.

[95] 'The following copies of Letters from Settlers in Upper Canada to their Friends here, containing important practical information relating to that Country, for the guidance of Emigrants', 16 October 1831, to Mr. Alfred Freeman from Thomas Freeman. *Emigration: letters from Sussex emigrants: who sailed from Portsmouth, in April 1832, on board the ships, Lord Melville and Eveline, for Upper Canada: extracts from various writers on emigration to Canada, and from Canadian Newspapers, with reference to the letters: Capt. Hale's Instructions to emigrants: and a gazetteer of the places named in the* letters (Petworth, England, 1883), 1. BLCAS.

> residence of emigrants; and in Lower Canada the English settler labours under a disadvantage, because the majority of the people are French.[96]

As promotional materials on emigration were distributed, information available on the Atlantic colonies was subsequently less rhapsodic. The analysis tended to list incentives and drawbacks together, as though an attempt had been made to strike a balance between positivity and objectivity. In some instances, especially in the case of Newfoundland, booklets would admit that they simply did not have much in the way of historical or statistical information.[97] After commending the success of the fisheries, coupled with a bleak description of fog formations on the Grand Banks, Mudie concludes his description of Newfoundland:

> Some spots are susceptible of cultivation, but in general the island consists of rocky eminences, interspersed with marshes, and forests of stunted and not very valuable timber. There are numbers of bears, wolves, foxes, and deer in the forests; the rivers and lakes are plentifully supplied with salmon; and beavers, otters, and other water quadruped are abundant. It does not appear that the well-known Newfoundland dog is a native of the island.[98]

Descriptions of abundant vegetation and numerous harbours in Nova Scotia were mingled with warnings of 'long and cold winters' and 'pernicious' winds.[99] Land and timber were used to recommend New Brunswick, clearly the favoured settlement colony outside of the Canadas; however, in all cases the Atlantic region was generally described as being more suited to commercial activity than settlement. In contrast, texts promoting Lower and Upper Canada were more lavish in detail and extent, clearly preferring it as the land most attractive for the prospective emigrant.

Between 1815-1830, whether supported by government, parishes, personal connections, or travelling on their own initiative, the North American colonies

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[96] Mudie, *The Emigrant's Pocket Companion*, 79.
[97] *The British Dominions in North America: or, A topographical and statistical description of the provinces of Lower and Upper Canada, New Brunswick, Nova Scotia, the Islands of Newfoundland, Price Edward, and Cape Breton* (London, 1832), xviii.
[98] Mudie, *The Emigrants Pocket Companion*, 79-81.
[99] Mudie, *The Emigrants Pocket Companion*, 83.

received 56 per cent of all emigrants departing from Britain for the United States, British North America, Australia and New Zealand.[100] While most ports felt the surge in human traffic, emigrants did not always settle in their arrival port, or colony.[101] Many emigrants bound for the United States chose to take advantage of reduced passage rates, arranging to arrive into a British North American port before moving southward. While larger ports such as Halifax, Saint John and Quebec experienced this form of U.S immigration via British North America, smaller ports close to the border, such as Saint Andrews, New Brunswick, became renowned as tactical points of entry for emigrants bound for the United States.[102]

Regardless of the destination chosen prior to departure, in reality after 1815 emigrants arrived everywhere along the eastern seaboard of North America. Although most were officially bound for the United States, Quebec, and to a lesser extent Saint John, the geographic location of the Atlantic colonies meant that if there was an acute problem onboard ship, vessels would seek assistance in ports servicing North Atlantic shipping lanes. As emigrant ships became increasingly overcrowded and undersupplied, St. John's, Halifax and Saint John all experienced first-hand the desperate state of many British and Irish vessels, '…almost entirely destitute of provisions', after a three to six-week voyage across the Atlantic.[103]

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[100] John Darwin, *The Empire Project: The Rise and Fall of the British World System, 1830-1970* (Cambridge, 2009), 42.
[101] Fingard, 'The 1820s – Peace, Privilege', 270.
[102] Johnston, 26. This mode of emigration was not unidirectional. According to A.C Buchanan Jr., Acting Agent for Emigration for Upper and Lower Canada in 1836, a growing number of emigrants bound for Upper Canada chose to arrive via New York that year. He claims that many emigrants chose this route after hearing of the excessive wait times at the Grosse Isle quarantine station, and of previous problems with inland river transport through Upper Canada via the Rideau River. BPP, 17 March 1837. Emigration. *Copy of the Annual Report from the Agent for Emigration in Canada, for 1836*. For more information on issues of emigrant traffic in Saint Andrews, particularly during the period of the Irish famine, see Chapter Six – Connection, Communication and Distance.
[103] GN 1/1/3 - *Governor's Office: Letter Books of Despatches to Colonial Office.* 4 July 1832. From Government House. PANL. This comment concerned itself with an emigrant vessel from Belfast arriving in St. John's harbour.

By 1830, Newfoundland, Nova Scotia and New Brunswick had undergone significant economic, political and societal development; however, the dramatic rise in emigration from the British Isles after 1815 would compound the challenges of colonial life, as territories continued to be forced to react and adapt to circumstances beyond their control. Emigrant ships arrived with newcomers bent on settling in St. John's, Halifax and Saint John; however, after 1815 most ships entering these ports were actually bound for better known and more highly sought after destinations in the United States or the Canadas. Because of geographic location, the growing commercial towns in the Atlantic region became unofficial ports of call for emigrants in need of recovery after an exhausting transatlantic voyage. Having had their health or energy restored, most proceeded onwards to their original destinations while others chose to remain as settlers.

With little in the way of discussion or planning, officials and residents in St. John's, Halifax and Saint John came to the aid of desperate emigrants, scenarios which would inevitably influence the colonial mindset of nineteenth-century settlers. These interactions posed a threat to the colonies of the Atlantic region, straining their resources and exposing them to the dangers of transmittable disease in an effort to ameliorate the condition of emigrants thrust upon them in desperate need. Meeting these challenges, however, became yet another circumstance contributing to the creation of distinct settler societies in the Atlantic region.

Since their inception, the Atlantic colonies in British North America developed through the direct and peripheral influence of Britain. While Newfoundland, Nova Scotia and New Brunswick managed to shape their own distinct histories, economic strengths and cultural influences by the early nineteenth century, they maintained in

common their association as British colonies. Territories in the Atlantic region each upheld their own 'circuits' within the colonial empire, and as Lester points out in his work on the Cape Colony, New South Wales and New Zealand, it becomes less about comparing and contrasting than allowing the analysis to reveal how '…they were constituted through their transaction with one another and with Britain'.[104]

The mass displacement of emigrants to North America after 1815 made the Atlantic region increasingly aware of their connections to Britain, Ireland and to one another. By the time cholera became a threat in the early 1830s, St. John's, Halifax and Saint John were forced to improvise measures not only to accommodate unexpected settlers, but also to respond to the sickness, hardship and fatalities that would come with them. This experience, as much as the development of commerce, trade, society and political institutions, helped to shape the notion of their place within the larger scope of nineteenth-century Empire.

[104] Lester, 'British Settler Discourse', 25. Lester elaborates in his article in claiming that although colonies are '…faced [with] very different circumstances in their different colonial environments, the argument here is that they co-constructed a particular, trans-imperial discourse of colonialism'.

Chapter Two

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Emigrant Ships and Public Health Protocols in Britain, Ireland and British North America

The increasing economic, political and social demands of the nineteenth-century meant that the arrival of emigrants from overseas became essential to the continued development of Britain's North American colonies. As emigrants from the British Isles transitioned into immigrants in North America, the formation of colonial identity was enhanced as settlers attempted to re-define themselves within a British imperial network. In his study entitled *The Empire Project: The Rise and Fall of the British World-System 1820-1970*, Darwin questions whether there was an imperial 'system' as such, claiming that '…British expansion had no master plan', and was '…driven not by official design but by the chaotic pluralism of British interests at home and of agents and allies abroad'.[1] He goes on to state that, regardless, the 'system' itself was subject to fluctuations in international affairs and the global economy – external factors 'which it might hope to influence but could hardly control'.[2] Although each possession might be under official British control, global historians like C.A. Bayly stress the power of world events occurring beyond the realms of colonial leadership, which undoubtedly shaped and influenced the progress of life in Britain and its colonies.[3]

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[1] John Darwin, *The Empire Project: The Rise and Fall of the British World System, 1830-1970* (Cambridge, 2009), 3.
[2] Darwin, *The Empire Project*, 2.
[3] C.A. Bayly, *The Birth of the Modern World, 1780-1914: Global Connections and Comparisons* (London, 2004), 2. Bayly elaborates on this point by stating an essential argument of his research: that all histories must be considered within the larger realm of a global history.

As colonial and global connectivity increased through major developments in maritime trade and industrialisation, 'systems' of emigration from the British Isles to North America were far from calculated or controlled. Potential emigrants gathered their families and moved by the thousands, with little direction or order, to the nearest port for a place onboard the next ship bound for overseas. The sheer volume of people not only overwhelmed current modes of emigration, but also produced an array of acute social, financial and medical problems in the ports of departure, onboard ships and in the receiving ports. Although Britain appointed committees on emigration, and implemented measures and regulations in an attempt to improve standards through updated passenger acts, statutes and parliamentary papers, the tremendous surge in emigrants made it difficult for such instruments to become effective against the demand. As late as the mid-1850s, the results of continually revised government protocols on emigrant traffic in British and Irish ports were described by historian Oliver MacDonagh as '…the cumulative effect of piecemeal measures'.[4] The intense mobilisation of people persistently overrode legislative change, with port authorities, residents and emigrants found somewhere in between, struggling to cope with the congestion and maintain order on the ground.

Destitution, over-crowding, fraud, and illness became increasingly common experiences amongst emigrants leaving Old World ports for the New. Receiving ports throughout British North America, on the other hand, had to cope with emigrants at the end of the transatlantic voyage, many of whom were severely malnourished, sick and debilitated from the crossing. By the 1820s, ports on both sides of the Atlantic were inundated with people coming and going, making the physical condition of emigrants pre- and post-embarkation exceedingly difficult to manage.

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[4] Oliver MacDonagh, 'The Regulation of the Emigrant Traffic from the United Kingdom, 1842-1855', *Irish Historical Studies* 9 (1954-55), 189.

The frequency of international contact from emigration and trade, coupled with the increased congestion in ports and onboard vessels, created an ideal breeding ground for the transmission of disease. Yellow fever, typhus fever, and smallpox arrived in the New World as early as the sixteenth century, initially via slave trade vessels, and continued to produce outbreaks with heavy mortality figures amongst native and settler populations for centuries.[5] By the nineteenth century, the unprecedented increase in human beings travelling vast distances in confined spaces greatly enhanced the threat of global infection. Cholera, a disease previously considered endemic to the Ganges Delta region of India, rapidly spread along international trade routes in the 1820s, infecting Baltic ports, continuing westward to continental Europe and the British Isles in 1831, and finally crossing the Atlantic and into North America in June 1832.[6] Ports mounted their main lines of defence through isolation and quarantine; however, cholera persisted, exacerbating the strains already placed on public funds, charitable organisations and health care resources in towns beleaguered by emigration.

Regarded as a 'necessary evil', emigration was considered essential in making colonial lands prosperous and self-sufficient; however, it also created unbearable

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[5] Mark Harrison, *Disease and the Modern World: 1500 to the Present Day* (Cambridge, 2004), 78. Harrison claims that large mortality figures amongst the native populations were not from one specific disease, but were instead caused by a number of different 'pathogens'. He mentions that 90 per cent of the New England natives died from smallpox and other diseases during the first attempts at settlement in 1607 and 1620 (p.73). The first outbreak of yellow fever to come to the New World was in Barbados in 1647 (p.79). For more information, see Chapter Four 'The World beyond Europe' in Harrison, *Disease and the Modern World*, 72-90. For more information on cholera specifically see Christopher Hamlin, *Cholera: The Biography* (Oxford, 2009), as well as Christopher Hamlin, 'Predisposing Causes and Public Health in Early Nineteenth-Century Medical Thought', *The Society for the Social History of Medicine* 5:1 (1992), 43-70.

[6] Harrison, *Disease and the Modern World*, 97. As Harrison explains, the eventual threat to western countries in the nineteenth century by tropical diseases, such as cholera, created much tension and hostility towards areas such as India, where up until that point cholera was considered endemic to the Bengal region; Kenneth F. Kiple, *The Cambridge World History of Human Disease* (Cambridge, 1993), 646. In 1817, Calcutta alone that summer suffered 4000 deaths to cholera and 25 000 underwent medical treatment for the disease.

pressure on already under-resourced and vulnerable communities.[7] This chapter explores the relationship between the increases in emigration coming from British and Irish ports after 1815, and the transmission of disease to ports in British North America, with particular emphasis on the first global outbreaks of cholera in 1831-32. The growth in emigration from the British Isles not only imposed immediate physical and financial strain on ports forced to tend to emigrants; it also eventually, and directly, exposed them to transmittable diseases. The way in which colonial ports struggled to contend with the quantity and quality of emigrants, as well as the transmittable diseases that came along with them after 1815, provides greater insight into the process by which towns like St. John's, Halifax and Saint John would be forced to reflect on their responsibility to themselves, and their relationship with Britain during this period.

Conditions in the ports of embarkation, the arrival of emigrants to British North American ports, and the subsequent threats and realities of early transmittable disease outbreaks are analysed in order to explain the way in which ports on both sides of the Atlantic coped with the initial surge in human traffic, and the subsequent threats it posed to the health and wellbeing of settlers and emigrants alike. Strategies used to manage the influx of emigrants in the Atlantic region, many of whom arrived unexpectedly and without warning, reveals a continuation of the reactive framework referred to in Chapter One, in which many colonial towns were required to deal with circumstances not of their own making. As Britain attempted to ameliorate conditions bureaucratically, port towns felt the impact of emigrants in real time, experiencing not only the immediate strain placed on government institutions and charitable organisations, but also the prospect of infection with deadly transmittable disease.

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[7] J.S. Martell, *Immigration to and Emigration from Nova Scotia 1815-1838* (Halifax, 1942), 4.

Becoming an Emigrant

The Transition from Citizen to Emigrant

By the early nineteenth century, the population of Britain reached record-breaking numbers of over 10 million, and it continued to grow to nearly 16.5 million by 1831. The Irish population was also on the rise, with the population roughly at 5 million in 1801, increasing to a recorded 7 765 481 in official census by 1831.[8] Many wartime industries essential to Britain during the Napoleonic Wars were made redundant after 1815, forcing thousands of labourers immediately out of work. In 1816 and 1818, Britain experienced crop failures, and in 1822, Ireland experienced a limited potato crop, worsening the already dire circumstances of the working classes in the British Isles. 15 per cent of the British population was considered destitute, and as H.J.M. Johnston suggests, it was 'the labouring class [in particular] who paid the price of rising population and industrialization'.[9] The demands of a large and expanding population, coupled with economic uncertainty, social stagnation and high unemployment in the British Isles, meant that for many, the prospects and possibilities of a new life overseas became increasingly attractive.

Jane Errington remarks that throughout the nineteenth century Britain generally encouraged, but was not eager to fund emigration. There were, however, marked exceptions, particularly in the early years.[10] The implementation of 'state-aided' emigration, a creature of the Colonial Office, became one of the first initiatives towards organised migration to the North American colonies.[11] Between 1815-1819,

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[8] Ireland's first official census was issued in 1821. W.A. Carrothers. *Emigration from the British Isles: With Special Reference to the Development of Overseas Dominions* (London, 1965), 33.
[9] H.J.M. Johnston, *British Emigration Policy 1815-30: Shovelling Out Paupers* (Oxford, 1972), 4-5.
[10] Elizabeth Jane Errington, 'British Migration and British America, 1783-1867', in Phillip Buckner (ed.) *Canada and the British Empire* (Oxford, 2008), 150.
[11] As the process of emigration continued, it was also privately endorsed by certain towns and church parishes in England and Ireland. A noteworthy example is the Petworth Emigration Committee, which

as tens of thousands chose to pursue emigration on their own accord, the Colonial Office offered assistance to emigrants as a way of enhancing population growth in the colonies and deterring migration to the United States. Initially offered to a thousand emigrants destined for Upper Canada, the cost of such support eventually became contentious. In 1832, Richmond, Hinck, Hay and Ellis commented on the policy in a report to Goderich on state-aided emigration schemes between 1815-1825:

> These large parties of emigrants were settled almost entirely by aid allowed from Government, and the result, so far as the happiness of the settlers is concerned, has been most gratifying. But as a means of relief to the Mother Country, the expense of such undertakings plainly rendered them unavailable.[12]

The great expense of state-aided schemes to support settlement in British North America meant that the experiments in financial assistance were relatively short-lived.[13]

In 1820, however, Parliament and the Colonial Office began to officially consider the potential usefulness of emigration as a way of relieving substantially poor, destitute and volatile areas of the British Isles. After a few experiments assisting paupers from Scotland to emigrate to the Cape of Good Hope and Upper Canada in 1820 and 1821, men such as John Beverley Robinson, Robert Peel and Lord Bathurst turned their attention towards promoting emigration in impoverished areas of southern Ireland, with particular interest in County Cork. Sir Robert John Wilmot Horton, Under Secretary of State for the Colonies from 1822-1828 and considered by

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organised and sent British emigrants from Sussex to Upper Canada in the 1832. See: *Emigration: Letters from Sussex emigrants: who sailed from Portsmouth, in April 1832, on board the ships, Lord Melville and Eveline, for Upper Canada: extracts from various writers on emigration to Canada, and from Canadian Newspapers, with reference to the letters: Capt. Hale's Instructions to emigrants: and a gazetteer of the places named in the letters* (Petworth, England, 1883). BLCAS. For an in-depth analysis of emigration to Upper Canada, see Elizabeth Jane Errington, *Emigrant Worlds and Transatlantic Communities: Migration to Upper Canada in the First Half of the Nineteenth Century* (Montreal, 2007).

[12] CO 385/6. 15 March 1832. From the Colonial Office, to Goderich. TNA.

[13] Johnston, 1; In Upper Canada emigrant schemes from 1815-1826 contributed between one-sixth and one-fifth of population growth in the colony. Johnston states, however, that promotion of emigration did little to bring about population decline at home, see Johnston, 78.

Johnston as an 'emigration propagandist', strongly pushed for Irish paupers be sent to Upper Canada as a way of strengthening Britain's overseas possessions.[14] In a letter to the British government agent, Peter Robinson, William W. Becher elaborates on the status of emigration in March 1824:

> The candidates for emigration are increasing and greatly exceed the number to which you limited me. If you could give me a greater latitude it would be desirable [-] you are naturally anxious to have steady men with families, and it is equally natural we should wish to get rid of idle unmarried individuals who seem likely to keep up the present disturbances but if once possessed of a little property would soon change their habits - [15]

The argument remained, throughout various schemes of assisted-emigration, that if troublesome men were provided with land and freedom, and removed from their current environment, they would be less likely to persist in disruptive behaviour and more likely to become self-sufficient and prosperous, eventually strengthening the colonies abroad.

[14] Johnston, 59; Horton's adamant support for emigration from Southern Ireland to Upper Canada generated the famous accusation by Charles Buller, and the title of Johnston's book, that Horton's plans for emigration were for 'shovelling out paupers'; Errington argues that in the eighteenth century, because the majority of Upper Canadians were of Loyalist decent, Upper Canada had more connections to the United States than to Britain. See Errington, 'British Migration and British America', 145.

[15] In this statement, Becher requests permission from Robinson as to whether he could register '5 or 6' of the 'idle unmarried individuals' as one family, and to be given one land grant between them. CO 384/12. 3 October 1824. To Robinson, from Becher. TNA.



Figure 2.1. 'Emigrants by the Ship Ganges Departing for Canada' in *Illustrated London News* in Elizabeth Jane Errington, *Emigrant Worlds and Transatlantic Communities: Migration to Upper Canada in the First Half of the Nineteenth-Century* (Montreal, 2007), 70.

With this in mind, the emigration assistance schemes were implemented. They typically involved free passage, provisions, some medical assistance and a designated lot of land to a capped amount of emigrants, offered predominantly to poor and working-class Irishmen wishing to relocate. The policy stressed that 'it is the desire of government that the offer should be urged upon none who are not willing to accept it, as it is a principal object of the measure to prevent the inconveniences of a casual and undirected emigration, which in too many cases ends in disappointment to the emigrants, while it is useless, if not rather prejudicial to the empire'.[16] In 1823, Peter Robinson recruited settlers from Ireland, offering passage, food onboard and individual lots of land in Upper Canada to 500 emigrants that year; however, as

[16] In an attempt to promote productivity amongst emigrants from Ireland wishing to migrate to Canada, the government required them to be less than 45 years old, and to not have any more than three children under 14 years of age. CO 384/12. Minutes Read in 1823. 'Read at Mr. Goulburns to Lord Ennismore, Mr. Beacher, Sir M. Colthurst respecting the proposed emigration from the South of Ireland'. TNA.

Johnston remarks, '[Irish peasants] could not appreciate the subtle difference between transporting the convicted for their crimes and the unconvicted for their poverty'.[17]

After the emigrant schemes from Cork to Upper Canada in 1823, the Colonial Office became inundated with letters from families pleading their situation and asking to be considered for state-assisted emigration.[18] Emigrants who went to British North America wrote home, and although most endured significant hardships, and at times fell victim to organisational mishaps and failures, they continued to be in relatively good spirits and encouraging of emigration.[19] In 1824, John Mara wrote to his family in Limerick, terming British North America a 'very good free country', recommending that the rest of his relatives seek to join him on a similar scheme, stressing that they should bring 'as much wearables as you can, especially freze and flannel'.[20] By 1824, as Johnston explains, the problem was no longer in recruiting emigrants, but rather in choosing whom to send from amongst the thousands of applicants. By 1825, with 1500 places arranged for assisted emigration to Upper Canada from Cork that year, 50 000 men from all over Ireland wrote to government requesting to be considered.[21]

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[17] Johnston, 78.
[18] CO 384/5. 'Early Colonial Office Papers on Emigration: 1819'. TNA. This file contains numerous letters written to Lord Bathurst from families wishing to emigrate to Upper and Lower Canada.
[19] Johnston, 54; Scottish weavers went from Glasgow to Upper Canada in 1820 and 1821, many of whom were put on infertile lands with little in the way of profit. In May 1825, Irish emigrants left Cork for Upper Canada. On arrival, one group of emigrants were left in tents by a lake in Kingston for nearly a month in 100°F heat, while they waited for Robinson to arrive and arrange accommodation. One in eleven of the emigrants sent by Robinson died that year, with several perishing from fever and dysentery in the tents. Johnston, 84-6.
[20] John Mara also recommends that James bring potatoes and fresh butter on board with him. CO 384/12. 20 November 1824. From John Mara in Ramsay, to James Mara in Limerick. TNA; Officials reported that year that during the crossing, 'characteristic of the fondness of the Irish people for potatoes', many of the Irish were reluctant to eat rations of cocoa, plumb pudding and English cheeses (claiming that the cheese was thrown overboard), with children in particular requesting potatoes, when unwell, over arrowroot. See CO 384/12. 2 April 1824. From Peter Robinson, to Horton. TNA.
[21] Although they had allocated 1500 spaces for 1825, Robinson stretched the number to 2024 leaving from Cork to Upper Canada that year. Johnston, 84.

Problems in the Departure Ports

Even though the annual number of emigrants leaving under state-sponsorship was negligible when compared to those migrating on their own accord, the validation of colonial emigration as a way to achieve work, land, and social independence continued to capture the attention and consideration of hundreds of thousands unsatisfied with life in the British Isles. Although port officials in the British Isles and in British North America began increasingly to recognise the detrimental effects of mass emigration, officials in Britain continued to put an optimistic face on the subject. Propaganda in the form of pamphlets and small books, referred to in Chapter One, continued to be distributed, filled with motivational sentiment, patriotism, and the repeated image of the strong hard-working emigrant, and his or her value to the world. 'If a person is not good for something, he is not fit for emigrating, and as he must have been fed and reared at the expense of the country which he leaves, the departure of a man always is in itself a loss'.[22] Various commentaries on emigration are used to support and entice those willing and able to emigrate:

> Within the last year or two, the rate-payers of very many parishes have been relieved by furnishing to the poor and the necessitous, the means of obtaining an advantageous settlement in the British colonies of North America; whilst every report from those colonies acknowledges the reciprocal benefits experienced from the influx of laborious settlers.[23]

The pamphlets contained quotations from successful migrants on the large amounts of land available, the possibility of owning this land, and a sense of the kind of freedom this would bring to a family. Sleigh rides in mild snowy winters and prosperous

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[22] Robert Mudie, *The Emigrant's Pocket Companion; Containing, What Emigration is, Who Should be Emigrants, Where Emigrants Should Go,; A Description of British North America; Especially The Canadas; and Fully Instructions to Intending Emigrants* (London, 1832), 10. BLCAS.

[23] Petworth Emigration Committee and T. Sockett, 'General Colonial Agency Office, Pamphlets on Colonization and Emigration' in *Emigration: Letters from Sussex Emigrants: Who sailed from Portsmouth in April 1832, on board the ships, Lord Melville and Eveline for Upper Canada: extracts from various writers on emigration to Canada, and from Canadian Newspapers, with reference to the letters: Capt. Hale's Instructions to emigrants: and a gazetteer of the places named in the letters* (Petworth, 1883), 3. BLCAS.

farming on rich soil and spacious land paint the ideal portrait of a bright future overseas.[24] While government, parishes and private charitable groups sponsoring emigrants were careful to note that they could not be held responsible for the fate of emigrants once they arrived, the hope and romance generated by this type of writing, coupled with enthusiastic testimonials from emigrants, created much more of an impression than the discreet disclaimers set within the text.[25]

In practice, the process of transitioning from emigrant to immigrant, whether through government initiative or voluntary migration, was haphazard and capricious. As people packed, sold or gave away their possessions, gathering their savings to travel to a port and arrange for their departure, an array of potential problems awaited them even before setting foot onboard a vessel. The movement of people to the coastlines created bottlenecks in major ports, as crowds of potential emigrants overwhelmed Bristol, Liverpool, Dublin and Cork.[26] The unsystematic nature of the British and Irish emigrant trade saw many camped out on the docks or in the ships themselves for days or weeks, with emigrants forced to use their savings on food and shelter in the port of origin, rendering them vulnerable to various financial and medical predicaments as they waited to set sail.

According to Peter Dunkley, early nineteenth-century amendments to passenger act legislation were used partly as a means of controlling and regulating the process of emigration from the British Isles. He points out that the Acts of 1816 and 1817, which lowered the cost of emigration, stimulated a heavy influx of emigrants into the British North American colonies, influencing many who would otherwise have entered the

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[24] Ibid.
[25] Sockett, 'Pamphlets on Colonization', 13.
[26] Peter Dunkley, 'Emigration and the State: The Nineteenth-Century Revolution in Government Reconsidered', *The Historical Journal* 23:2 (1980), 373.

United States.[27] The legislation also allowed three times as many passengers per ton onboard vessels bound for British North America: one passenger for every one and a half tons to the colonies over one passenger for every five tons to the United States.[28] With passage rates to the British North American colonies now half of what they were to enter New York or Boston, the destination and volume of emigrants shifted dramatically. In 1816, 9 022 people left for the United States, while 3 360 went to British North America from ports in the United Kingdom. According to Johnston, by 1819, nearly 70 per cent of emigrants left for the colonies, with 23 543 bound for British North America and 10 674 to the United States.[29]

In 1823, however, new passenger legislation raised passage prices, which reduced emigration the following year. Although the percentage of emigrants arriving in North America was significantly lower in 1824, enforcing the legislation was fraught with difficulty. In a letter to Lord Bathurst in March 1824, Watson and Graves describe the impact of the updated passenger act on emigrants in Waterford:

> In no season heretofore has there been such a disposition manifested to emigrate as this; but while hundreds have applied for a passage out, and would gladly go on the same terms as last year: from the advanced price necessarily laid on by ship owners to cover the expenses caused by the provisions of the last act, not more than one small family have engaged their passage from this Port while the Waterford ship owners have entirely declined taking any; the consequence is, hundreds of miserable creatures/ having sold their little property in order to create funds to defray their passage out, under the impression of being able to procure it at the former prices/ will now be thrown in a starving condition on the country without any way of employment. To any person acquainted with the state of particularly the south of Ireland, it must be obvious that any check to emigration will powerfully

[27] Dunkley, 356.
[28] Johnston, 119. Johnston claims that the Colonial Office had no part in updating this legislation.
[29] Johnston, 25. As has been pointed out in other chapters, this did not necessarily mean that emigrants stayed in British North America. Many chose to take advantage of the cheaper passage rate, and found their way to the United States either by land, or on another vessel.

> [i]ncrease the disturbances and poverty already too prevalent in this part of H.M Dominions.[30]

The tighter regulations proposed in the 1823 Passenger Act may have been established in order to more readily manage the number of emigrants leaving the British Isles; however, the legislative amendments were too late to affect the crowds of people already en route to the coast that spring.

Between 1815 and 1830, financial and administrative support for emigration was highly unpredictable.[31] Many of those encouraged and motivated to leave sold their assets, gathered their belongings and left at the start of the shipping season only to find themselves in an unfamiliar town, and confronted by new regulations. Most emigrants chose to leave because they could not find work, which meant that without reliable earnings, many lived for extended periods of time in meagre conditions, on reduced diets, or in total destitution. Between their own limited resources and the administrative setbacks they were forced to experience in the ports, many were physically, mentally and financially weakened by the time they embarked. Delays in the British Isles not only forced the depletion of the emigrants' personal resources in an attempt to sustain their transitory existence pre-embarkation, but their continued presence imposed a serious financial burden on the departure ports.

Throughout the 1820s, customs officers were expected to oversee emigration in ports on the British Isles. Emigrant agents were officially appointed to specific ports in 1833, when a naval officer at half-pay was chosen by the Colonial Office to act as an emigrant agent at Liverpool.[32] Soon after Liverpool received its agent, in

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[30] CO 384/12. 6 March 1824. To Lord Bathurst, from Watson and Graves. TNA; This letter was forwarded to Horton from Bathurst, who then sent it on to G. Harrison asking Harrison to present it to the Lords Commissioners of the Treasury. CO 43/64. 15 March 1824. To Harrison, from Horton. TNA.
[31] In 1824, Horton stated on behalf of Lord Bathurst: 'The money granted last year, has been expended', warning Foley not to give encouragement that emigrants would receive anymore than a grant of land from the government. CO 43/64. 2 March 1824. To Foley, from Horton. TNA.
[32] Dunkley, 355.

January 1834, Portsmouth, Plymouth, Bristol, Dublin, Belfast, Cork, Glasgow and Leith were designated their own emigrant officers.[33] In many cases, the port itself pleaded for the presence of a superintendent for emigration to provide advice, information and protection for emigrants waiting in port. In April 1834, Thomas Taylor wrote to R.W. Hay from Limerick, asking for an update on the requested need for an emigrant agent in their port, stating that '…the want of such an officer is severely felt amongst us'.[34] In May 1834, the Mayor of Londonderry wrote to Dublin Castle, asking for an official emigrant agent in the port, explaining that 'emigration from Derry this year has been most considerable; and it frequently happens that those poor people are most indifferently treated by the ship-owners and their agents'.[35]

Documents suggest that the initial distribution of emigrant agents to British, Scottish and Irish ports in January 1834 was not entirely based on specific needs or requests. While Limerick and Londonderry – ports initially not granted an agent – pleaded for the need of a superintendent to help control emigration, other ports, which were immediately granted such a post, responded stating that they felt the presence of an agent to be unnecessary.[36] In Portsmouth, the Mayor wrote to Hay, claiming that the town has not been inconvenienced by emigration, nor had he heard of any complaints from emigrants, which was most likely due to the number of charitably-sponsored emigrants from the south of England who left from Portsmouth each year.[37] In Hull, a representative of the Mayor's office wrote that according to local merchants

[33] CO 384/36. 27 January 1834. To Hay, from Stewart, at the Treasury Chambers. TNA.
[34] CO 384/36. 2 April 1834. To Hay, from Thomas Taylor. TNA.
[35] CO 384/36. 12 May 1834. To Dublin Castle, from John Gillespie, Mayor of Derry. TNA.
[36] CO 385/8. 22 April 1834. To Lynch, from Earle. TNA. In April 1834, Government appointed Mr. Stanley as emigrant agent at Limerick.
[37] Burbey states that 804 emigrants left for Quebec and Montreal, and 100 for the United States between April and June 1832, and that 223 left for Quebec and Montreal, and 10 for the United States between April and July 1833. Burbey claims that most of the emigrants going to Lower Canada were from Sussex, and that they had made previous arrangements to be accompanied by their own superintendent, who looked after them pre-embarkation. CO 384/36. 10 February 1834. To R.W. Hay, from Burbey. TNA.

and ship-owners, 'the general opinion appears to be that such an appointment is not required at this town, nor would it give any advantage to the emigrants'.[38] Although this is not an argument uncharacteristic of merchants or ship-owners (many of whom were guilty of perpetrating significant fraud and thievery against emigrants), it would be surprising to think that the Mayor's office would have consulted only those authorities to establish the apparent pointlessness of an agent in Hull, prior to conveying such thoughts to government.[39]

Without emigrant agents or public health protocols in place, many port officials struggled to maintain the health, safety and well-being of emigrants in their ports. On 1 May 1825, the *Albion*, an emigrant vessel bound for Quebec from Cork, began embarkation, but took nearly two weeks to sail from the port.[40] Surgeon and Superintendent, John Thomas, describes the condition of emigrants upon embarkation in his detailed remarks on the voyage:[41]

> With regard to the persons embarked, many of them[,] particularly the children[,] were in a weakly state when they came on board, several having only just recovered from sickness and also having as I believe suffered from want of sufficient nourishment, this united with a mode of life and change of diet so different to what they had been accustomed to on shores produced severe bowel complaints…[42]

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[38] CO 384/36. 13 March 1834. To R.W Hay, from Todd at the Mayor's Office, Hull. TNA.
[39] Mr. Edward Walkinshaw became known for fraud against emigrants in Liverpool in 1834. In June 1834, Liverpool's Agent for Emigration, Robert Lowe, wrote to Lieutenant Lynch, Agent for Emigration in Limerick, warning him of Walkinshaw's behaviour and for any emigrants from Limerick wishing to emigrate through Liverpool to be on guard. Walkinshaw, along with his agents, was advertising emigration to Swan River, Van Diemen's Land and Sydney, in a vessel with a 180-ton register and nearly 40 years old. 'He has advertised her to sail to day, but no preparations are yet made for putting her in a condition to proceed on so long a voyage'. See CO 384/36. 28 June 1834. To Lynch, from Low. TNA.
[40] ADM 101/76/2. Emigrant Ship *Albion* from Cork to Quebec, 4 April – 4 July 1825. TNA.
[41] ADM 101 records for shipping to the North American Colonies from Britain and Ireland vary considerably regarding their remarks on patients seen throughout the voyage.
[42]ADM 101/76/2. TNA. Thomas remarks that parents seemed to neglect their children once onboard the vessel, paying little attention to them whether they were sick or well. He also claims that three women successfully gave birth during the voyage, however, '…from their poverty and indolence they had not a rag to cover the infants[,] I therefore supplied them with calico, flannel and some old linen for that purpose'; Katherine Foxhall also remarks on ship surgeons reports on the emigrants and convicts increased susceptibility for illness after enduring 'the depressing circumstances of a ship's delayed departure'. See Foxhall, *Disease at Sea: Convicts, Emigrants, Ships and the Ocean in the Voyage to Australia, c.1830-1860* PhD. Diss. (Warwick, 2008), 27.

The deteriorating physical and financial condition of the emigrants meant that those receiving them at the other end would have much to contend with.

While government-assisted emigration schemes to British North America varied annually after 1815, by 1825 the emigration seed was effectively planted in the minds of hundreds of thousands of people in the British Isles. Voluntary emigration persisted as the overwhelming form of migration; however, by 1830, when direct government aid for emigrants had ended entirely, local parishes, charities and landlords continued to sponsor members of their community wishing to emigrate overseas.[43] The Petworth Emigration Scheme, a charitable group who arranged for emigrants to be sent to Upper Canada from the south of England between 1832-37, stated in one of their pamphlets: 'The question is not whether emigration, and emigration to a large extent from the British Islands shall take place or not, but how it shall be directed, so as to be most conducive to the relief of the State, to the permanent well being of the emigrants, and to the advancement of the general interest of the Empire'.[44]

As emigration gained momentum after 1815, Britain struggled to get ahead of the process through legislative amendments and government policies during the 1820s. Conditions in the ports of departure created increasing obstacles and countless privations for emigrants in their quest for a new life in British North America. Although the transatlantic crossing was itself strenuous, the physical, emotional and financial deterioration experienced by emigrants prior to departure reduced their ability to preserve their health as they embarked upon a life-changing voyage.

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[43] Helen I. Cowan, *British Emigration to British North America: The First Hundred Years* (Toronto, 1961), 178. Cowan claims that parish-assisted emigration had occurred since 1823.
[44] Charles Shirreff, 'Thoughts on Emigration and on the Canadas, as an Opening for it', in *Emigration: Letters from Sussex*, 6-7.

Issues on the Ground

Emigrants on Arrival

The condition of emigrants held up in departure ports was unlikely to be ameliorated by weeks, or at times months, at sea.[45] Instead, demands for emigration throughout the 1820s created stimulus for competitive, private and unrestrained forms of emigration to take flight. Significant breaches of passenger acts occurred constantly, particularly by ship-owners looking to profit by high fares, providing insufficient provisions or ill-equipped vessels, and overpopulating ships. Emigrants stalled in port, many of them financially drained with each additional day spent idle, were desperate to leave; and without advocates to actively advise them or enforce severe penalties on infringements of their rights, they were vulnerable. The first Passenger Act was passed in the British Isles in 1803; however, it was not until 1828 that an 'elementary' legislation, 'An Act to regulate the Carriage of Passengers in Merchant Vessels from the United Kingdom to the Continent and Islands of North America', was enforced. The latter focused particularly on the protection of passengers over the course of the transatlantic voyage.[46]

Although some things, such as the quality and quantity of provisions onboard, the space available to each passenger and the presence of a medical official, could be standardised by the effective enforcement of regulations and inspections pre-embarkation, other factors, such as conditions at sea or the length of the crossing, were more difficult to control. In 1825, James Terran, surgeon and superintendent onboard the *Amity* bound for Upper Canada from Cork, elaborated on the physical and mental strains placed on emigrants during the voyage:

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[45] In June 1832, after the first outbreak of cholera occurred in Montreal, A.C. Buchanan reported that the *Bellona* had arrived from Dublin to Quebec, after a passage of 79 days: 'the emigrants by this ship suffered much from want of provisions'. CO 42/241. 23 June 1832, 'Extracts from the weekly report made by the Governor in Chief, by the Chief Agent for Emigrants at Quebec'. TNA.
[46] Dunkley, 354-55.

> The class of Irish which comes under notice for emigration is known to subsist exclusively upon the lowest species of provisions. The quick change from that to a very abundant and very varied supply cannot fail to affect the health and the more particularly when found with so complete a change of habits (from hard labour to total comparative idleness), unless great attention be paid to every act of theirs on board and without judgement to guard against the consequences of such a change they demand the attention of children with more than their obstinacy. -[47]

Terran's commentary raises the point that even with preparations and regulations imposed on ships before departure, there would always be other variables and unforeseen problems which emigrants might experience over the course of the crossing. The lack of control over an immeasurable number of potentially disastrous circumstances meant that the state of emigrants on arrival was highly unpredictable, forcing pressure on those expected to receive them at the end of their voyage.

Distressed emigrants were not the first to require the help and support of port authorities in British North America. Newfoundland and Nova Scotia, because of their locations in the North Atlantic, had naval hospitals operating in St. John's and Halifax since the late eighteenth century. Both ports had a long history of extending rescue services to ships found in compromising situations, attempting to reach territory beyond their waters. In the summer of 1806, Nova Scotia's Lieutenant Governor, Sir John Wentworth, wrote to the Earl of Camden on reports received by Mr. Morris, superintendent of Sable Island located 300 kilometres southeast of Halifax, stating that crew from a brig had been 'saved by Morris's assistance' after the vessel, transporting provisions from Poole to New York, was wrecked. Wentworth's report claims few provisions were salvaged, and 'the people were victualled and some necessaries furnished to them from the stores sent from hence,

[47] Terran writes his points under the heading: 'An opinion for the regulation of future emigration from Ireland may be founded upon the very few and very trifling cases which occurred:' ADM 101/76/3. *Amity* from Cork to Upper Canada, 5 April – 9 July 1825. James W Terran. TNA.

without which assistance they must have perished, as the winter proved very long, and intensely severe, beyond any former experience'.[48] Although ships in distress in the early nineteenth century did not typically have the same quantity of passengers onboard as those later sent exclusively for emigration, providing assistance to vessels and crews in an emergency was deeply engrained as a moral imperative in most British North American ports.

As ships arrived in the North American colonies in need of immediate medical or charitable attention, others offloaded bureaucratic burdens and legal accountabilities onto the colonies. In 1817, the *Favorite* transported emigrants from Glasgow to New Brunswick, and arrived in a relatively organised fashion, with 133 passengers on board, most of whom had paid their £7.9s.3d. in passage fees, and had already organised their land and negotiated to remain in New Brunswick as settlers.[49] Although there was neither medical crisis nor significant destitution onboard, seventeen men had arrived, including the surgeon, who had not been charged or accounted for at the customs office in Glasgow prior to departure. The financial loss was now placed on Fredericton merchants, who wrote a petition to the Provincial government seeking reimbursement for the cost of the 17 men now in New Brunswick.[50] Officials, as well as newly arrived immigrants, upon realising they had been schemed, overcharged or undersupplied, sought retribution in British North America in an attempt to rectify charges and challenge paperwork of British and Irish ship-owners. Administrative demands of this nature, which required British North

[48] CO 217/80. 23 July 1805. To Earl of Camden, from Wentworth. TNA.
[49] '1817 Petition to Harris William Harles, Esquire, President of His Majesty's Council in and for the Province of New Brunswick, from James Taylor, a Fredericton Merchant', RS555 *Provincial Secretary – Immigration Administration Records, 1811-1891.* PANB. The petition does not state the specific port the ship arrived into within New Brunswick.
[50] Issues of this nature occurred not infrequently in ports throughout the Atlantic region. In 1826, it was reported that officials in Cape Breton were forced to imprison American seamen suspected of murdering their captain. Shortly after their detainment, they were sent to Boston by Nova Scotian Lieutenant-Governor James Kempt, in the 'interests of justice', to attend their trial and conviction. See CO 217/147. 5 December 1826. To George Canning, from Charles Vaugh, in Washington. TNA.

American officials to represent and defend newly arrived immigrants seeking justice from merchants and ship-owners in Britain and Ireland, occurred increasingly throughout the 1840s and 1850s.

Problems in Quebec

Once emigrant ships found their way into British North American waters, their destination was most likely the port of Quebec, in Lower Canada. By 1825, Quebec received an average of 10 000 emigrants a year, many of whom were looking to settle on land in Upper Canada.[51] Domestic vessels were organised to transport emigrants inland, from Quebec to Montreal, and then onwards to Upper Canadian communities such as Brockville, Prescott or Kingston, via the Rideau River. Emigrants could alternatively arrive at mainland ports in the Atlantic region and attempt to arrange travel domestically to the Canadas.

In 1820, Lord Dalhousie was appointed Governor-in-Chief of British North America, a position based in Quebec. As Lieutenant Governor of Nova Scotia from 1816 to 1820, Dalhousie had experience managing immigrants and refugees by implementing government rations and developing agricultural pursuits in an attempt to help support those migrating into the colony.[52] Once stationed in Lower Canada, however, he witnessed first-hand the acute mayhem and disorder found at the epicentre of British North American immigration. In 1825, Dalhousie wrote to Bathurst on behalf of the Quebec Emigrant Society, requesting that the £1000 donation authorised by Bathurst in 1823 be granted again to help with incurred expenses. Dalhousie claims, 'The miserable objects of pity thrown by the course of emigration upon the cities of Quebec and Montreal, almost compel me to make this

[51] Johnston, 82.
[52] Peter Burroughs, 'George Ramsay, 9th of Earl of Dalhousie', *DCB Online* 1836-50 (Volume VII) (Toronto, 2000).

renewed request'.[53] Although emigrants were destined for inland territory, Quebec's port authorities were required to manage the immediate condition to which they arrived. According to Johnston, Upper Canada 'did not entertain [such] misgivings about pauper emigration because the worst of the human wreckage did not reach them'.[54]

At the end of the 1825 season, Dalhousie wrote to Horton with criticism of Robinson's state-aided emigrant schemes from Ireland to Upper Canada, terming it as a 'two fold object' of populating the colonies, and ridding Ireland of its poor. He reported to Horton that the Irish emigrants who arrived in Upper Canada in 1823 under Robinson's scheme were violent and were said to have robbed recently settled Scottish migrants. The military was required to intervene, but according to Dalhousie, 'nor before blood had been shed'.[55] He is firm with his point of view to Horton: 'I have already said that I do not think this system will answer the purposes intended. It gains no other end than relieving the South of Ireland of a burthen which is thrown upon the industrious classes of this young country'.[56]

While some emigrants did arrive in a relatively good state, bringing with them personal wealth or productive skill-sets, many of those who disembarked at British North American ports required some kind of financial, medical or administrative assistance.[57] Although emigrant agents were not appointed to British or Irish ports

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[53] CO 42/204. 17 February 1825. To Bathurst, from Dalhousie. TNA.
[54] Johnston, 82.
[55] In 1820 and 1821, the British government sent emigrants from Glasgow and Lanark to Upper Canada. It is most likely the Lanark emigrants who Dalhousie was referring to had come to Upper Canada on this scheme. CO 42/204. 12 November 1825, To Horton, from Dalhousie. TNA.
[56] Dalhousie found out from officers stationed in Upper Canada about the emigrants in tents for over a month under Robinson's organisation in Kingston, and certainly took this opportunity to accentuate his criticisms of Robinson and these emigrant schemes. His first objection was that Robinson had no control over the emigrants, claiming that he 'has not resided near them, but left the care of them to persons by no means competent'. CO 42/204. 12 November 1825, Lord Dalhousie to Wilmot Horton. TNA.
[57] In an extract of a report written by Buchanan, he mentions emigrants who have arrived from Yorkshire and Cumberland, who '…were possessed of considerable property'. He also mentions the

until 1833, by 1828, and with Dalhousie's support, A.C. Buchanan, a successful British shipping merchant, was appointed Chief Agent for Emigration in Quebec.[58] Three agents were also appointed in the New Brunswick ports of Saint John, Miramichi and Saint Andrews. Buchanan, who had been consulted by Horton on amendments to Passenger Act legislation in early 1827, was an avid supporter of emigration to the North American colonies, terming it in 1828 a 'national measure'.[59] He elaborated on the value and importance of emigration to furthering development in all of the North American colonies:

> When first I visited New Brunswick, in 1816, scarcely a native of Ireland was to be found in the province, and in the city of S[ain]t. John there was not, I believe, ten house holders from that country, and now they constitute nearly the half of its inhabitants, in fact, the increase of Trade and general improvement of that Province must be admitted to have arisen from the numerous settlers that emigrated thither, and who must have added much to the wealth of the province, by precluding the Americans going in, who were formerly employed in the timber trade, and who generally returned to their own country and spent their earnings thereby draining the province...[60]

Although a major promoter of the benefits of emigration for the colony, Buchanan was forced to acknowledge the increasingly deplorable state of emigrants in Quebec. In 1828, he described emigrants as being of a '…very destitute character', pointing out '…it is much to be feared, that the unrestrained manner in which they are now taken on board ship, without any sanitary regulations being made for their comfort or cleanliness, materially increases the misery we so frequently witness here'.[61]

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arrival of Irish farmers with significant wealth coming from a number of counties, including Mayo, Sligo, Dublin and Limerick, claiming that a rough estimate of the capital brought into Quebec in 1831 was 250 000*l.* sterling. CO 384/27. 12 December 1831. 'Enclosure 1, in No.7 – Extracts from Report of the Resident Agent for Emigrants [at Quebec] to Viscount Aylmer', *Emigration – Report of Commissioners.* TNA.

[58] Dunkley, 357.

[59] Johnston, 120-21.

[60] CO 384/20. 'Manuscript of Mr. Buchanan's Pamphlet on Emigration', (London, 1828). TNA.

[61] Ibid.

The conflict between Buchanan's positive views on colonial emigration and the unacceptable state of emigrants entering Quebec is apparent in his reports to the Colonial Office. While he admitted the dreadful condition of British and Irish emigrants arriving at Quebec, he repeatedly stated that officers in the British Isles must allocate funds for emigrants in British North America, instead of dolling out sums of money pre-departure. In an enclosure submitted as part of a report compiled by the Commissioners for Emigration in 1831, Buchanan argued that sponsored emigrants 'entrust[ed]' with funds upon leaving the British Isles tend to 'make improper use of it' early on, either in the departure ports, or over the course of the voyage, leaving little in the way of personal financial support once in the colonies and unnecessarily adding to the number of emigrants reliant on charity.[62]

Buchanan was also heavy handed in blaming the Quebec Emigrant Society, a society that clearly did not share his optimism for colonial immigration and which he accused of enabling emigrant idleness and dependency upon arrival. He argues that in several instances he was successful in locating work for emigrants only to find them returning to cities as loiterers, supported by charitable societies '…deceived by their tales of distress'.[63] The Quebec Emigrant Society, on the other hand, wrote a petition in 1831, describing what it believed were severe problems in colonial emigration. The Society criticised the casual way in which emigrant traffic was conducted from the British Isles, stating that Lower Canadians did not have the adequate resources to effectively manage the process of emigration at its current level.[64]

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[62] CO 384/27. 12 December 1831. 'Enclosure 1, in No.7', TNA; The Commissioners for Emigration comprised the Duke of Richmond, Viscount Howick, Francis Baring, Henry Ellis, and R.W. Hay and their brief was to 'collect and diffus[e]' knowledge on emigration to the colonies, providing help and information to those subjects considering emigration. See CO 384/27. 1 July 1831. To Commissioners for Emigration, from Goderich. TNA.
[63] CO 384/27. 12 December 1831. 'Enclosure 1, in No.7', TNA.
[64] Bilson, *A Darkened House*, 7.

Regardless of the motives and arguments assigned by various social, political and colonial factions in Britain and British North America, the immense pressure placed on port officials and local authorities was undeniable. In a report to Goderich in 1831, Lieutenant-Governor Maitland described the arrival of emigrants in Nova Scotia: '…the distress [from emigration] thereby occasioned in [Cape Breton Island] has often been such as to demand interference and aid from Government [in Nova Scotia], which, on such occasions, have been reluctantly and sparingly, but necessarily granted; for there has certainly been no desire to encourage an emigration of this description, which is attended with many and serious inconveniences'.[65] Although increases in population were essential for continued productivity, wealth and expansion in the colonies, by 1830 governments, charities and the settler population struggled under the social and economic strains imposed on their growing but limited resources by uncontrolled emigration.

Disease Contagion and Enforcement of Quarantine

Growing rates of emigration not only brought heavy burdens on local governments and charities; they also increased the threat of disease transmission to British North American communities. By the 1820s, smallpox, typhus fever and yellow fever outbreaks continued to be reported amongst surgeons onboard emigrant ships, and by British North American port authorities and medical staff. In 1827, over 800 local settlers died in Halifax from typhus fever after an emigrant ship bound for Quebec from Waterford came into the harbour with outbreaks onboard (after also being required to stop in Newfoundland).[66] Transmittable disease also occurred

[65] CO 384/27. 12 August 1831. 'Enclosure No.11 – Extract of Despatch from Sir Peregrine Maitland to Lord Goderich', *Emigration – Report of Commissioners*. TNA.
[66] For a detailed analysis of the typhus fever outbreak, see Chapter Five - Halifax, Nova Scotia: A Case Study, 2-4.

amongst supposedly more regulated ships, such as those sent under state-sponsored schemes. In 1823, on one of Peter Robinson's state-sponsored emigrant ships from Cork to Upper Canada, it was reported eight children and one woman died from smallpox over the course of the voyage.[67]

According to Margaret Pelling, smallpox and intermittent fever (most likely malaria) were two diseases understood to be at either end of the spectrum of contagion between 1830 and 1860, with yellow fever, typhus fever and eventually cholera somewhere in between.[68] Dr. Thomas Southwood Smith, one of the best-known anti-contagion theorists of the nineteenth century, who became a member of the General Board of Health in Britain, created under the Public Health Act of 1848, believed that ventilation was vital in preventing most forms of 'fevers'.[69] According to the *Lancet*, Smith's *Treatise on Fever*, published in 1830, certainly influenced public opinion; however, the journal's stance on the debate remained consistent with the Royal College of Physicians that contagion was the overwhelming cause of epidemics.

The rise in transmittable disease outbreaks in the western world fuelled debates over the contagious nature of certain diseases and brought to a head a long-running debate over the effectiveness of quarantine. The implementation of isolation and quarantine restrictions on vessels was generally undertaken whenever plague broke out in Europe or the Near East and by the early nineteenth century, quarantine

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[67] According to Robinson's report, two medical officers were onboard. Robinson attempts to draw some positive conclusions on the smallpox deaths, claiming 'the best proof of the attention paid to them on the voyage arises from the good health which they enjoyed as only one woman and eight children died on the passage; and these from the smallpox, which had unfortunately got into both ships, and not from any causes that could be attributed to their change of circumstances or situation'. CO 384/12. 2 April 1824. From Robinson, to Horton. TNA.

[68] Margaret Pelling, *Cholera, Fever and English Medicine*, *1825-1865* (Oxford, 1978), 16-18.

[69] Pelling, *Cholera, Fever and English Medicine*, 23. In his *Treatise on Fever*, Smith terms fever as a primary disease, and refutes the trend at that time of classifying and distinguishing diseases, a movement stimulated initially in the eighteenth century, most notably by nosologist William Cullen. See Southwood Smith, *Treatise on Fever* (London, 1830).

was also required for ships arriving in British ports found or suspected of having yellow fever onboard. These two diseases were singled out in the 1825 Quarantine Act as considered highly threatening, along with '…other infectious disease or distemper highly dangerous to the health of His Majesty's subjects'.[70] Contagion theorists, such as Sir Gilbert Blane, who along with the Royal College of Physicians, supported isolation and quarantine laws, argued that quarantine was an essential procedure in guarding Britain's health and safety.[71] Anti-contagionists, however, believed the procedure to be futile, if not a contributing factor in endangering the lives of healthy passengers, while stressing the damage allegedly inflicted on British commerce.[72]

Agitation over quarantine was felt long before the Quarantine Act of 1825, from merchants having to pay hefty amounts of duty on cargo, with merchandise either damaged or stolen in the process.[73] By the 1820s, however, there were sceptics not only among the merchant class, but also within the medical profession. Along with Dr. Southwood Smith, other anti-contagionists fought fiercely to persuade government that diseases which enforced quarantine were not contagious. Charles Maclean, a former military doctor, argued that it was 'wilful murder' to confine human beings in an impure environment.[74] Maclean had worked with the East India

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[70] Krista Maglen, '"The First Line of Defense": British Quarantine and the Port Sanitary Authorities in the Nineteenth Century', *Social History of Medicine* 15:3 (2002), 415, 417.
[71] Blane was famous for his work in discovering the efficacy of lime juice as a treatment for scurvy amongst the navy in the late eighteenth century. See Gilbert Blane, *Observations on the Diseases of Seamen* (London, 1799).
[72] John Booker claims that during wartime, it could cost upwards of £6 to maintain a ship in the process of quarantine. See John Booker, *Maritime Quarantine: The British Experience, c.1650-1900* (Aldershot, England, 2007), 385. For a wider understanding of the relationship between commerce and outbreaks of foreign disease, see Mark Harrison, *Contagion: How Commerce has Spread Disease* (New Haven and London, 2012).
[73] BPP, 'Act to repeal the several laws relating to the performance of quarantine, and to make other provisions in lieu thereof', 6 Geo IV c.78 (1825).
[74] For more information on Charles Maclean, as well as the concerns and grievances expressed by merchants, see Booker, 'Anti-contagionism in Britain 1804-1825', in *Maritime Quarantine*, 367-403; Charles Maclean, *Suggestions for the prevention and Mitigation of Epidemic and Pestilential Diseases* (London, 1817), 459, quoted in Michael Brown's, 'From Foetid Air to Filth: The Cultural

and Levant Companies, and claimed that his experiences provided him with the exposure and observations necessary to realise the non-contagious nature found in these 'exotic' diseases.[75] Maclean was of the opinion that those countries to which diseases such as plague were endemic did not believe in contagion, which spared them from the threat of heavier mortality. The Christian belief in quarantine, according to Maclean, made the western world more susceptible to transmittable disease. By stressing the importance of direct observation of supposedly contagious disease, Maclean was in many respects typical of medical practitioners with experience in hot climates. However, his intransigent opposition to quarantine differed from most other colonial doctors, like former naval surgeon, James Johnson, who merely sought reform, with many regarding him as a liability.[76]

Without an established scientific grasp on the way diseases such as typhus fever, yellow fever and eventually cholera infected individuals, quarantine would continue to be the required protocol in the event of an outbreak.[77] Although

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Transformation of British Epidemiological Thought, ca.1780-1848', *Bulletin for the History of Medicine* 82 (2008), 523; In his observations of the health of ships, A.C. Buchanan states that the fresh and pure air off the coast of Newfoundland purifies ships from illness. In a report to Lieutenant-Governor Aylmer in 1831, he claims: 'The voyage from the United Kingdom to the St. Lawrence is one of perfect health. The majority of the emigrants are from Ireland and Scotland, and principally live on the light food of potatoes, or *stirabout* made from oatmeal, so that very rarely indeed does any serious sickness occur; besides, the *fogs* and cold weather generally experienced in crossing the Banks of Newfoundland, are a complete extinguisher to disease or contagion'. CO 384/27. 12 December 1831, 'Extracts from Report of the Resident Agent', TNA; In a report by the medical surgeon onboard the *Albion* in 1825, however, he claims that 'After passing the Banks of Newfoundland we had a considerable number of cases of opthalmia perhaps produced by the fog and damp weather, they soon gilded to the common treatment I have only given three cases, the symptoms and treatment of the others being quite similar'. See ADM 101/76/2. *Albion* from Cork to Quebec, 1825. TNA.

[75] Brown, 'From Foetid Air to Filth', 521. Pelling also makes the point that Maclean was one of the first to use the word 'sanitary' in his *Evils of Quarantine Laws, and Non-Existence of Pestilential Contagion* (London, 1824). Southwood Smith, who was a supporter of Maclean, also used the term in his title: 'Contagion and Sanitary Laws', *Westminster Review* 6 (1825), 134-67; Pelling, *Cholera, Fever and English Medicine*, 30-1.

[76] For more information on James Johnson, Charles Maclean and quarantine, see Mark Harrison, *Medicine in an age of Commerce and Empire: Britain and its Tropical Colonies 1660-1830* (Oxford, 2010), 203, and Catherine Kelly, 'Not From the College, but Through the Public and the Legislature: Charles Maclean and the Relocation of Medical Debate in the Early Nineteenth Century', *Bull. Hist. Med.* 82:3 (2008), 545-69.

[77] The debate over quarantine would continue throughout the period discussed in this dissertation. In 1849, the General Board of Health produced their First Report on Quarantine, 'dwel[ling] on the

quarantine had been a precautionary measure for ports in the Mediterranean and Britain since the fourteenth-century plague outbreaks, prior to 1785 there were no established quarantine stations in British North America. In contrast, U.S. ports had begun adopting quarantine measures from the seventeenth century, initially on ships arriving from the West Indies, and then later during the threat of diseases like yellow fever.[78] Perhaps due to American influence in New Brunswick, Partridge Island was the first established quarantine station in British North America, assigned in 1785 as part of Saint John's Royal Charter.

By 1830, Saint John and Miramichi had created quarantine headquarters on Partridge Island and Middle Island respectively, located immediately outside the port entrances. In 1831, a hospital was constructed in Halifax to receive smallpox patients on Melville Island, in May 1832, Grosse Isle became Quebec's designated quarantine station, initiated to screen cholera amongst emigrants arriving that summer, and in 1833, an Act was passed in the first session of Newfoundland's Legislature, 'to provide for the performance of Quarantine and more effectually to provide against the Introduction of Infectious or Contagious Diseases, and the spreading thereof in this Island'.[79]

Concern over vessels not only importing emigrants in a state of dependence, but also carrying with them transmittable disease, became an ongoing issue for residents and local officials in the colonies. In 1831, petitioners in Saint John wrote to William

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system's injustices and its failure to succeed in its own terms'. Pelling, *Cholera Fever and English Medicine*, 29; Gavin Milroy was a physician who also pushed for the abolishment of quarantine in the 1840s. His study, *Quarantine and the Plague* (1846), claimed that it was clear the process did not work in cases of plague and cholera outbreaks. Milroy, along with Smith and Chadwick, pushed the need for an amelioration of local conditions and sanitary reform in Britain. For further information on Milroy, see Mark Harrison, 'Milroy, Gavin (1805-1886)', *DNB* online edition (Oxford, 2004).

[78] Harrison, *Contagion*, 22.

[79] For a concise history of Grosse Isle, see: Thomas W. Dukes, '"Grosse-Île": An Overview of the Island's Past Role in Human and Animal Medicine in Canada', *Canadian Veterinary Journal* 42 (August 2001), 643-47; GN 2/17 – *Colonial Secretary's Office: Quarantine Letter books.* 10 April 1833. Proclamation by James Crowdy, on behalf of Thomas Cochrane. PANL.

Black, President of the Council of New Brunswick, asking that he consider a way of increasing the current amount of funding available for sick and distressed emigrants in Saint John, claiming:

> That many vessels have lately arrived within the Harbour of Saint John containing upwards of a thousand passengers, all from Ireland. That on board of one of those vessels, in particular the smallpox has been discovered, of another the fever, and of another a third the most wretched state of filth and destitution, and the greater number of the vessels appear to have been too much crowded contrary to the Act of Parliament for regulating the conveyance of passengers, from Great Britain and Ireland, that as many as two hundred of those passengers have been landed on Partridge Island on account of their having the smallpox and fever, and have been supported solely from the hands of the Overseers of the Poor and four hundred more leaving been landed in the City, are in a state of poverty and distress, almost beyond description…[80]

The arrival of overpopulated ships, the questionable effectiveness of quarantine, and the inadequate supports within the receiving ports for a burgeoning population, were formidable obstacles for emigrants and newly-arrived settlers hoping to create a new beginning for themselves and their families.

The Arrival of Cholera

Pressures caused by immigration forced colonial governments to consider local initiatives and legislative measures that might be taken to address the situation. In December 1831, Lord Aylmer, Lieutenant Governor of Lower Canada, stated to Goderich that 50 254 emigrants arrived in Quebec from the United Kingdom that year; however, given the clear avoidance by British and Irish ship masters of Passenger Act Regulations, he believed the actual number to have been much higher. Aylmer claimed: 'This evil can only be averted by vigilant attention on the part of the proper authorities at the port of embarkation; and by the enforcement of severe

[80] MG9 – *New Brunswick Executive Council, Welfare, Almshouse and Public Infirmary, Saint John*. 16 July 1831. To William Black, from Petitioners. PANB.

penalties in the colonies in cases where the provisions of the Act shall be found to have been disregarded'.[81]

A week earlier, Goderich wrote to Aylmer, as well as Peregrine Maitland and Archibald Campbell, Lieutenant-Governors of Nova Scotia and New Brunswick respectively, suggesting that they consider imposing a small tax on emigrants arriving into their colonies, claiming that this will 'give to His Majesty's Government the power which it appears so desirable that they should possess, of controlling and directing the tide of emigration'.[82] By February 1832, the three colonies passed their own Acts imposing an emigrant tax, with proceeds used to support the arrival of destitute emigrants in port.[83] While Goderich's recommendations focused on the long-term process of ameliorating emigration management and control, the legislation strongly suggests that the funds generated should go towards institutions and societies currently supporting destitute and sick emigrants. The Act passed in Lower Canada declared that half of the accumulated tax would go directly to the Emigrant Hospital at Quebec, Montreal General Hospital, the Emigrant Society at Quebec, and the Emigrant Society at Montreal, and would remain in effect until 1 May 1834.[84]

The seasonal stresses of immigration intensified after cholera was reported in Britain in the fall of 1831. After emerging in Russia and Poland in 1830, 'Asiatic cholera', as it was often called, travelled quickly along trade routes, causing

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[81] CO 384/27. 17 December 1831, To Goderich, from Lord Aylmer. 'Enclosure No.7'. TNA.
[82] Goderich qualifies this recommendation by claiming that this tax was not to discourage, but to regulate emigration, and that he does not approve of charging a tax of anything over one dollar, unless they are being charged double because they left the British Isles without being sanctioned by Government. CO 384/27. 11 December 1831. Copy of a Circular Despatch addressed to the Governors of Lower Canada, Nova Scotia and New Brunswick, from Goderich. TNA.
[83] CO 384/27. Lower Canada 'An Act to create a Fund for defraying the Expense of providing Medical Assistance for Sick Emigrants, and of enabling Indigent Persons of that description to proceed to the Place of their destination'. (25 February 1832); Nova Scotia 'An Act relating to Passengers from *Great Britain* and *Ireland* arriving in this Province'. (10 February 1832); New Brunswick 'An Act to regulate Vessels arriving from the United Kingdom with Passengers and Emigrants'. TNA.
[84] CO 384/27. 25 February 1832. 'An Act to Create a Fund for Defraying the Expense of providing Medical Assistance for Sick Emigrants, and of enabling Indigent Persons of that description to proceed to the Place of their Destination'. TNA.

devastation, panic and economic chaos as it made its way across continental Europe and into Berlin and Vienna by August 1831. Britain had hoped that the body of water separating it from Europe would serve as its protection from the scourge; however, by October 1831, outbreaks of cholera were reported in the northern town of Sunderland. Over the course of the 1831-32 cholera epidemic, several British and Irish ports experienced outbreaks, including the emigration ports of Liverpool, Cork, Dublin, and Belfast. Cholera proved difficult to trace and predict; it caused havoc in industrial and highly populated areas such as Bristol and Newcastle; however, other major cities centres, notably London and Birmingham, '…enjoyed a surprising exemption'.[85]

While this dissertation concerns itself largely with immigration and cholera outbreaks in British North American ports, cholera could, indeed, manifest itself at any stage of the voyage. On 17 April 1832, it was reported that an emigrant ship, the *Transit of Whitehaven*, left Warren Point in Ireland with 100 passengers bound for Quebec on 15 April, but was forced to seek medical aid for the master of the ship in Groomsport shortly after departure. In a report from Bangor, a port town just outside of Belfast, Dr. Robert Hanoray describes the master and one female '…ill of vomiting cramps and other symptoms of cholera', claiming three other passengers had died by the time he assessed the vessel, and that one person onboard was apparently ill before the ship sailed and had gone ashore.[86]

In a list of vessels used as hospitals for fever patients in Liverpool in 1847, a commentary under the 'remarks' section of the document refers to ships previously used for cholera and recounts the story of the *Brutus*, an emigrant ship destined for Quebec in June 1832. The vessel had set sail but was quickly forced to turn back with

[85] Pelling, *Cholera, Fever and English Medicine*, 2.
[86] PC 1/112. 17 April 1832. From Robert J Hanoray. TNA; Warren Point at Carlingford Lough, was one of nine quarantine stations named in 1826 by the British Privy Council. See Booker, *Maritime Quarantine*, 577.

outbreaks of cholera and fever on board, '…caus[ing] at sea 101 deaths and altho at that time the cholera was in Liverpool, the town authorities would not suffer her to communicate with the town'. The document claims the passengers from the *Brutus* were transferred into the *Newcastle* and *Lavinia* lazarettos '…where more deaths took place but recovery began soon to manifest itself onboard the lazarets'.[87] Dunkley claims that the pressure placed on the city over the return of the *Brutus* stimulated discussion amongst the Liverpool board of health over the need for an emigrant agent.[88] As cholera gained momentum, its virulence swamped the already overburdened financial, social and logistical resources of the emigration authorities. Towns on both sides of the Atlantic now had to prepare for cholera onboard overcrowded and undernourished emigrant ships – either at the end of their voyage, or upon their swift return to the home port with newly confirmed sickness onboard.[89]

By March 1832, Irish towns began to declare outbreaks of cholera. That summer, in a letter to William Gosset, Chief Secretary for Ireland, John Besnard, Mayor of Cork, commented on cholera's virulence in town, claiming that it '…is of so capricious a nature that no one day is a criterion to judge of its future character or

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[87] PC 1/2659. 'A list of the Lazarettes at Brombro Pool appropriated as Hospital ships for the reception of fever patients between May 1847 and January 1848 – Viz. 4 of the 5 Lazarettes'. TNA; The *Brutus* is also referred to in a letter from T.F. Elliot to the Mayor of Liverpool, which claimed that the commissioners 'regret' that they could not increase the amount of aid available '…in the case of the passengers landed in such unfortunate circumstances from the "Brutus"', and asserting that because of the lateness of the season, instead of attempting to send them again to North America, the government would like to send them to the Australian colonies. Walkinshaw, referred to in an earlier footnote, accused of scheming poor emigrants two years later, has apparently offered to send the emigrants to Australia on at a reduced rate. See CO 385/6. 3 July 1832. To Mayor of Liverpool, From T.F. Elliot. TNA.

[88] Dunkley, 373.

[89] Issues with British ports having to receive recently departed emigrant ships with disease onboard occurred not infrequently between 1830-1870. Foxhall uses an example of the *Dirigo*, an emigrant ship that left Liverpool, continued on to Cork but was forced to turn back to Liverpool after cholera had broken out onboard in 1854. The vessel returned to Liverpool with forty-seven people perishing from the disease in a span of nine days; however, they were not warmly received by the Commissioners at Birkenhead, who argued that that they should not be held responsible for treating emigrants once they have been cleared in the port of departure. For more analysis on the political and medical debate in Liverpool caused from cholera onboard the *Dirigo* during this time, see Foxhall, *Disease at Sea*, 32-42.

probable duration'.[90] In July 1832, Dungarvan, County Waterford, requested £200 from the Irish government to help fund their cholera hospital, claiming that the current failure of the fisheries and the lack of employment and idleness of fisherman were to blame for the spread of disease in town.[91] In October 1832, the Board of Health in Dingle, County Kerry, also sent an application to government requesting an additional £200 to help with their cholera hospital, stating that:

> The most alarming circumstance is that the cholera is spreading into the country hamlets extensively and from the length of time which occurs before the patients can be brought into hospital (sometimes it generally happens that they are in the last stage of the complaint before any assistance can be afforded[)] it is proposed that hospitals be established in the country which of course will be attended with more expense than a hospital in town. We had ten cases today six deaths in all 105, deaths 64'.[92]

Irish municipal applications for financial relief from cholera demonstrate not only the obvious economic strains in towns, but provide a vivid picture of the amount of unemployment, destitution and poverty in these towns during the epidemic. In Dublin, Francis Parker, Secretary of the Central Board of Health, implored affluent members of the city to provide 'immediate and liberal' donations, as well as food and linens to the poorer areas of the city, claiming 'The safety of the peer, as well as the pauper depends on prompt and energetic measures'.[93] While there were varying degrees of wealth to call upon in Dublin, other areas of Ireland had little to draw on in the way of voluntary assistance. Funding applications required towns to state the amount of money received in local contributions and the kind of employment typically available for the labouring poor. Applications made by Kilmacanogue, County Wicklow, in August 1832 stated that there were no wealthy people in town, they '…having left

[90] State Papers 2/440/7. 1 August 1832. To Sir William Gosset, from Mayor John Besnard. 'Cholera Papers: Cork'. NAI.
[91] State Papers 2/440/10. 5 July 1832. 'Dungarvan, Co. Waterford'. 'Cholera Papers': Waterford', NAI.
[92] State Papers 2/440/8. October 1832. 'District of Dingle', 'Cholera Papers: Galway'. NAI.
[93] PC 1/112. 9 April 1832. 'Cholera Report for the City of Dublin', by Sir Francis Parker, Secretary to the Central Board of Health for Ireland. TNA.

fearing the disease – no probability of procuring local funds', and that because of a 'general depression in trade and business', there was no employment available for the working class, claiming that poverty and destitution in their town had only made them more susceptible to the disease.[94] Cork, a city of over 100 000 people, which by June 1832, had submitted multiple applications for thousands of pounds to cope with the epidemic, claimed that trade and manufacturing were 'almost entirely suspended' because of cholera.[95]

As 'pauper' emigrants increasingly arrived in British North America, by 1832 many would have come from living conditions similar to those described in the Irish applications. Certainly some of the unemployed referred to in the applications had friends or family members already in North America, with others considering emigration as a way out of their present circumstances. As winter thawed, emigration from Britain and Ireland into British North America continued unabated in the face of cholera that spring. Several of the poor and working class people experiencing the effects of cholera in their home country would potentially encounter it again and possibly succumb to it on the other side of the Atlantic.

Cholera in Lower Canada

As towns and cities throughout Britain and Ireland struggled with cholera, with a heavy influx of immigrants expected for spring 1832, North America was on alert. By March 1832, a Board of Health in Quebec was formed to implement and oversee public health measures, and by May, quarantine was up and running at Grosse lsle. Although it was always understood that the majority of emigrants were bound for

[94] State Papers 2/440/7. 3 August 1832. 'Application for a Loan from the Consolidated Fund'. To Sir William Gosset, from the Town of Bantry in Kilmacanogue. 'Cholera Papers – Cork'. NAI.
[95] State Papers 2/440/7. 20 June 1832. 'Application for a Loan from the Consolidated Fund'. To Sir William Gosset, from the City of Cork. 'Cholera Papers – Cork'. NAI.

Quebec, by 1832 the Atlantic towns were all too familiar with vessels in dire circumstances arriving unannounced in port desperately seeking assistance. St. John's, Halifax and Saint John, as well as Quebec, witnessed the effects of immigration and knew of the devastation created by cholera overseas. With this in mind, all of these towns began to organise in preparation for cholera.

Over 25 000 immigrants came to Lower Canada by early June; 10 000 of them in the week of 2-9 June. With Grosse Isle already under-staffed, quarantine standards were variable, and, according to Geoffrey Bilson, the settler population was not oblivious to the shortcomings.[96] In the midst of panic-fuelled stories of ships avoiding examination and rumours of cholera already in the emigrant hospital, Lower Canadians became increasingly anxious over the likelihood of infection that summer. Threats caused by emigration and disease did little to ease tension amongst French Canadians and English settlers. As Bilson points out, many French Canadians saw British and Irish immigration as a way of diluting, or eradicating, French influence in the Canadas, adding that '…there were some who would say that immigration was being used to introduce cholera to Lower Canada to destroy the French'.[97] As emigrants persistently arrived in poor condition, and in grave need of assistance, their circumstances only enhanced underlying anxiety and suspicion amongst Lower Canadians.

On 9 June, North America's first reported death from cholera was declared, a passenger travelling to Montreal on the steamer *Voyageur*. The ship had picked up travellers from *Carricks*, a vessel that had arrived at Grosse Isle from Dublin on June

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[96] Apparently health officer Dr. Tessier was criticised by the Quebec Board of Health over his duties in inspecting vessels at Grosse Isle. Tessier defended himself by stating that under the present circumstances, with the sheer volume of ships and emigrants arriving, many of whom did not take kindly to inspection, there was little he could do with ships refusing quarantine. Bilson, *A Darkened House*, 22.

[97] Bilson, *A Darkened House*, 7.

3.[98] In the days that followed, both Quebec and Montreal experienced heavy death tolls, with Quebec tending to over one hundred fatalities a day by mid-June.[99] In a letter to Goderich, Lord Aylmer describes the virulence of cholera, stating that it has affected people: '…with a degree of violence far surpassing anything that has occurred in Europe, and officers now serving here assert that even in India (so far as they have had opportunities of observing it in that country and here) the disease was neither so rapidly fatal, or so universal in its seizures, as during the first five days of its prevalence in this place'.[100]

By July, rates of infection dropped in Lower Canada. Nevertheless, the toll was sobering. The Quebec Board of Health reported 3 451 deaths by the end of the year, and health commissioner, Robert Nelson, claimed roughly 4 000 died in Montreal.[101] Meanwhile, newspapers in the Atlantic region published reports on cholera once it was declared in Lower Canada. In St. John's, the *Public Ledger* braced citizens for the imminent danger:

> We had hoped that the large tract of ocean which intervenes between this and the parent country would, humanly speaking, have exempted us from the visitation of this calamity; but as an inscrutable Providence has decreed it otherwise, it becomes our duty to submit. We can scarcely venture to hope that this island will be spared from the effect of a disease which has already travelled over so vast a portion of the civilized world, and which is now almost within our precincts; but very much may be effectually done to avert any numerously fatal consequences.[102]

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[98] Charles M. Godfrey, *The Cholera Epidemics in Upper Canada, 1832-1866* (Toronto, 1968), 12.
[99] Bilson, *A Darkened House*, 24.
[100] CO 42/237. 26 June 1832. To Aylmer, from Goderich. TNA.
[101] Bilson quotes a paper provided to him by Louis Dechêne and Jean-Claude Robert, 'Le choléra de 1832 dans le Bas-Canada; mesure des inegalités devant la mort', later published in H. Charbonneau and A. Larose (eds), *The Great Mortalities* (Liège, 1979), 229-56. Dechêne and Robert claim the annual mortality rate of Lower Canada was 37/1000, and during the cholera epidemic, it rose to 45.7/1000 (specifically 82/1000 in Quebec and 74/1000 in Montreal). Their research also suggests that 'artisan' French Canadians suffered more than the working-class or immigrants, a fact counteracting most assumptions that cholera predominantly affected the most impoverished of society. Bilson, *A Darkened House*, 48.
[102] 29 June 1832, *Public Ledger*, 2. PANL.

The vain hope that communities would be protected from cholera by an intervening body of water had been expressed the previous year in Britain. Cholera's apparent ability to leap all barriers was truly frightening, as Dr. Skey, the military's chief medical officer in Lower Canada, observed: 'It is impossible…not to be struck by [cholera's] appearance…that it has leapt over, as it were, intervening places to the eastward: to wit Newfoundland and Nova Scotia'.[103] The main ports of the Atlantic region heightened their lines of defence once cholera was declared in North America; however, after a summer of infection in Lower Canada, St. John's, Halifax and Saint John found themselves inexplicably spared a catastrophe.

In 1832, 51 746 emigrants arrived at Quebec and Montreal, according to Buchanan, 32 150 of them before 6 July.[104] Between 1829-32, roughly half to two-thirds of immigrants each year originated from Irish ports.[105] The majority of immigrants were bound for Upper Canada; however, once cholera was declared, delays and interruptions occurred with inland river transport. With many stalled in Lower Canada, towns became overwhelmed with human congestion. As cholera cases continued, public meetings were held and volunteers emerged in Quebec and Montreal to support emigrant societies and sanitary committees, and establish funds for widows and orphans.[106] Personal donations and public subscriptions were drawn for emigrants in need, while many supported health wardens, medical staff and the carrying out of sanitary improvements by the Board of Health.

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[103] CO 42/237. 15 June 1832. To Aylmer, from Dr. Skey. TNA. Skey comments on how unsurprising it is that cholera spread once it reached Quebec during the emigration season, which 'abounds in an enormous number of persons who from a combination of moral and physical causes, were just of that description likely to suffer the extreme violence of the disease'.

[104] Buchanan explains that from the U.K. reports on emigration that spring, he was actually expecting upwards of 75 000-80 000 emigrants. CO 42/241. 'Buchanan's Report Respecting Emigration to the Canadas – 1832'. TNA.

[105] For 1832, Buchanan gives following the numbers: 17 481 from British ports, 28 204 from Ireland, 5 500 from Scotland. CO 42/241. 'Buchanan's Report – 1832'. TNA.

[106] Bilson, *A Darkened House*, 41.

One would expect that it would have been difficult for Buchanan to ignore the effects of immigration and disease in Lower Canada, given his position as Chief Emigrant Agent, but his views on immigration that summer remained positive, as indicated in his 1832 report. While cholera mortality figures in 1832 vary considerably depending on the source, it is interesting to note that Buchanan's numbers were by far the lowest, indicating no more than 2350 deaths in Upper or Lower Canada in 1832.[107] In his report, he included some suggested amendments to Passenger Act regulations and of ways to improve quarantine at Grosse Ile, but his criticisms persistently target the charitable and '…truly Christian feeling amongst the inhabitants of Quebec and Montreal'.[108] He warned the 'benevolent public' to be more critical of who they support, repeating his opinions from 1828 that indolent emigrants 'would rather depend on the sympathy of the public and the charitable institutions than be prevailed upon to accept easy work at 20 or 21*s* per day'. He stated that this kind of idleness damaged the work of His Majesty's government in promoting the productivity and economic independence associated with voluntary migration to the colonies.

Aylmer was another official who seemed reluctant to associate emigration with disease outbreaks in Lower Canada that summer. By mid-June, as cholera spread into areas of Quebec and Montreal, he wrote a private letter to Goderich commending the 'superior description' of emigrants that season 'in regard to property, respectability and intelligence'. Aylmer's views on the prospect of British emigration 'increasing to an incalculable extent' into Lower Canada are positive, with his letter

[107] CO 42/241. 'Buchanan's Report – 1832'. TNA.
[108] Buchanan remains critical of emigrant societies, who he believes continue to exaggerate the amount of destitution in Lower Canada by grouping any emigrant seeking help as 'paupers'. CO 42/241. 'Buchanan's Report – 1832'. TNA.

focusing on the ability of emigration to change the political climate in the colony. He continues by stating:

> …I have in no degree changed my opinion of the mass of the Canadian people – they are a docile, contented, happy, and well meaning people; but extremely ignorant withal, and extremely suspicious in regard to the intentions of the British authorities in the Province – this feeling is constantly kept alive, by those who know better, but who have objects of their own in view. – The representatives choice by the people are generally speaking, ignorant like themselves, for in this country, the class of society corresponding with that of county gentleman in England, is very limited in numbers compared with others;[109]

Aylmer and Buchanan's remarks reveal the sizable gap between the greater objectives of British colonial authorities and the immediate needs of emigrants and settlers suffering through an epidemic.

Historians such as Amy L. Fairchild and Alison Bashford have researched extensively on nineteenth and twentieth century border control and quarantine, particularly in terms of immigration and the labour in the United States and Australia. As Fairchild argues in her research of U.S. Public Health Service medical records at quarantine stations, medical examinations of emigrants into the U.S. reveal greater policies of inclusion than exclusion.[110] As Bashford points out in her work on Australia, 'Like immigration regulation, public health in the modern period is about the shaping of national and colonial populations'.[111] Aylmer and Buchanan's writing reveal similar notions of emigrants and quarantine; although they could be quite frank with the Colonial Office over the need to improve standards of emigration in the ports of departure, their overriding belief in emigration as the way to strengthen Britain's

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[109] CO 42/237. 16 June 1832. To Goderich, from Aylmer, 'Private'. TNA.
[110] Amy L. Fairchild, *Science at the Borders: Immigrant Medical Inspection and the Shaping of the Modern Industrial Labor Force* (Baltimore, 2003);
[111] Alison Bashford, 'At the Border: Contagion, Immigration, Nation', *Australian Historical Studies* 120 (2002), 348.

North American possessions overwhelmed suggestions of any drawbacks, in particular its obvious associations with disease transmission.

Discrepancies between the bureaucratic commentary made by colonial officials and the actual plight of the people affected by cholera in Lower Canada was not exclusive to Buchanan or Aylmer. In remarks made by commissioners who came to Lower Canada from the United States to assess the epidemic for the Sanitary Board of the City Councils in 1832, their limited knowledge of the reality of the vast majority of those living in the colonies was quite apparent. While they admit the inadequacies, financial and otherwise, of support in Montreal and Quebec for emigrants and settlers labouring with cholera, some of their commentary reveals a tendency to blame the victim: 'The Lower Canadian population live in a manner well suited to the extensive prevalence of an epidemic possessing the characters of that under which they so severely suffered. They consume largely of ardent spirits, pay but little attention to cleanliness and comfort, make use of a food crude in nature, and live in dwellings mostly of a single story, with confined rooms, and consequently sleep on the *ground floor*. This last circumstance, it is well know, in all epidemics, is one of the most certain means in inviting attacks of disease'.[112] As Sigsworth and Worboys point out in their research on sanitary reform in Victorian Britain, remarks of this nature from the higher echelons of society were not uncommon: the fact that most British and Irish workers did not choose to live and work in such unsanitary conditions did not seem to occur to these people.[113]

In Montreal, Lord Aylmer donated government funds to the Emigrant Society as well as other societies supporting widows and orphans in 1832. Presumably

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[112] *Report of the Commission Appointed by the Sanitary Board of the City Councils, To Visit Canada, for the Investigation of the Epidemic Cholera, Prevailing in Montreal and Quebec* (Philadelphia, 1832), 12. WL.

[113] Michael Sigsworth and Michael Worboys, 'The Public's View of Public Health in Mid-Victorian Britain', *Urban History* 21:2 (October 1994), 249.

believing it would reduce congestion, however, he condoned residents leaving town, and his actions were blamed by the public for the spread of cholera into the Canadian countryside that year. Aylmer dismissed contemporary criticisms as coming from 'anti-British factions'; however, he received particularly heavy public scrutiny for his management of the epidemic two years later.[114] With cholera again in Quebec and Montreal in May 1834, Aylmer focused on the management of quarantine at Grosse Isle and objected to advancing financial support for emigrants in Montreal.[115] In a letter to Stanley, who replaced Goderich at the Colonial Office in June 1834, Aylmer comments on typhus fever and cholera in Quebec: 'But the whole of the sick having been landed at the quarantine station at Grosse Isle about 30 miles below Quebec, I trust the existence of disease will be confined to the hospital at that station'.[116] Aylmer, who advanced £4000 to Grosse Isle in 1834, may have been influenced by criticisms of Grosse Isle's struggle to conduct quarantine in 1832, reasoning perhaps that if he could successfully confine cholera to the quarantine station, then in line with contagion theory, it should not appear on the main land.

Even when cholera appeared again in Lower Canada in July, Aylmer continued to focus on the quarantine effort, neglecting the spread of disease within the province. The rate of immigration had lowered to 30 935 in 1834, with roughly 1 500 cholera victims in Quebec that summer.[117] Once the infection declined, Aylmer was vilified by critics as careless and indifferent when it came to providing for the health and safety of Lower Canadians afflicted with cholera. Popular disdain for Aylmer went even further when he fled to his cottage in Sorel at the height of the outbreak. Aylmer later defended himself, blaming the House of Assembly, whose relationship

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[114] Bilson, *A Darkened House*, 50.
[115] *Report by the Special Sanitary Committee of Montreal upon Cholera and Emigration for the year 1834* (Montreal, 1835), 2. BLCAS.
[116] CO 42/251. 16 June 1834. To Stanley, from Aylmer. TNA.
[117] Bilson, *A Darkened House*, 69.

with him had deteriorated due to political tension, and the Parti Patriote in Lower Canada, as well as claiming that he was certain public subscriptions in Quebec and Montreal would be generous. His arguments, however, were publicly regarded as weak, and, in any case, the damage was done.

On 16 July 1834, a Special Sanitary Committee consisting of five members was appointed by the General Sanitary Committee in Montreal to assess emigration and cholera in town. In their report, the committee was scathing in their dissatisfaction with Aylmer, stating that the Governor refused to extend quarantine laws to Montreal, or advance funds to the society, '…alledging that in so doing he incurred too heavy a responsibility'.[118] The report condemned emigrant agents, claiming that their appointment in the British Isles and in Quebec, '…appears to have been productive of little benefit, either from the want of authority, the want of industry, or the want of capacity of the persons so appointed, while their salaries might have been devoted to better purposes', and they are specifically critical of the man '…who styles himself "His Majesty's Chief Agent for Emigrants;" but [emigrants] have never had the honour of seeing him at the Emigrant Office, nor have they had the advantage of knowing, or of hearing, what services he may have rendered to distressed Emigrants'.[119]

The management of cholera in 1832 and 1834 by officials in Lower Canada contributed to the anger and alienation already felt amongst French Canadians. Those responsible for emigrants in Quebec and Montreal were appalled by their condition, fearful of the long-term burdens they would place on their communities, and outraged at the inhumanity and deception underlying the process. In 1834, the Special Sanitary Committee of Montreal observed:

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[118] *Report of the Special Sanitary Committee*, 2. BLCAS.
[119] *Report of the Special Sanitary Committee*, 10-11. BLCAS.

> Common avarice, and the desire of gain prevailing over every other consideration, has led many captains, owners, and agents of worthless old vessels, more particularly in the seaport towns of Ireland, into a most horrible traffic in human life, that should be immediately arrested by the urgent voice of humanity and the strong hand of power. In the endeavour to make a profitable voyage, by the embarkation of the greatest number of passengers, no expedient for deception appears to them too shameful – and the old hulk is announced to sail on a certain day, with a penalty of loss of passage to such as have paid, and are not in readiness, by an advertisement which transforms her into a fine fast sailing first class ship of double her real register measurement.[120]

Eventually all the colonies recognised the need to implement their own measures to control emigration and disease from Britain and Ireland; however, many French Canadians already considered British administrators to be intruders. Shortly after Lord Aylmer was dismissed as Lieutenant Governor in April 1835, political radicalisation grew in Lower Canada, creating significant uprisings and leading eventually to the Canadian Rebellions in 1837.[121]

The management of cholera in Lower Canada in 1832 and 1834 created great anxiety and intense debate over emigration and disease from Britain, more so in French-speaking Canada than anywhere else in British North America. The outbreaks amplified underlying cultural tensions and political divisions within the colony, as local governments, charities and residents, angered by their predicament, struggled to understand who was responsible for immigrants and what kind of protection was on offer for their settler population.

In assessing various levels of colonial correspondence on emigration and disease transmission, it is clear that some British officials were reluctant to accept

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[120] The footnote from this quotation reads: 'Brigs of about 200 tons are constantly advertised in large placards publicly posted as vessels of 500 tons, and ships of about 400 tons as vessels of from 800 to 1000 tons. Many of these leaky old ships make several feet of water on the passage, by which the provisions of the passengers have been in part destroyed'. *Report of the Special Sanitary Committee*, 6-7. BLCAS.

[121] Phillip Buckner, 'Whitworth-Aylmer, Matthew, 5th Baron Aylmer', *DCB Online* 1836-1850 (Volume V11) (Toronto, 2000).

responsibility. In March 1832, T.F. Elliot, Secretary to the Emigration Commissioners, wrote to R. Symes in Lower Canada, who had requested that the commissioners consider additional funding for the Quebec Emigrant Society. Elliot stated that the Lower Canadian Governor was currently in the process of assessing how best to manage pressures caused by emigration, and given 'the present uncertainty upon the plans which may have been recommended or adopted in the Province, it would be premature in this country to express a decided opinion in favor of any one measure or set of measures'.[122] Unlike colonial officials who had the luxury to point fingers, avoid responsibility, or respond vaguely to such matters, emigrants and settlers were forced to live with the dire consequences of emigration and cholera.

After 1834, immigration to British North America continued to overwhelm the authorities which strove to regulate it. Although colonial authorities and government officials in North America issued administrative amendments and updates, without proper surveillance and strict inspections in the departure ports, legislation had little practical effect. It was not until the 1855 Passenger Act that real advances were finally made in the effective control of emigration from British and Irish ports.[123]

With nearly one million emigrants arriving from the British Isles to British North America between 1815 and 1855, cholera came to the Atlantic region on several occasions between 1834 and 1866.[124] The following case studies illustrate not only how St. John's, Halifax and Saint John coped with the volume of unexpected immigrants and transmittable disease during this period, but also demonstrates the

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[122] CO 385/6. 29 March 1832. From T.F. Elliot, to R. Symes. TNA; Comments of this nature make it difficult to assess exact where the responsibility fell when it came to emigrant care in the colonies. Although funds were raised and donations made by local government and residents, and the burden was clearly placed on local colonial authorities, the British Treasury also provided funding for emigrant relief to colonies when in need. For a greater discussion of this issue, see Chapter Six.
[123] Helen I. Cowan, *British Immigration before Confederation* (Ottawa, 1968), 12.
[124] Cowan, *British Immigration before Confederation*, 16.

constant test of its reactive framework as a way of protecting the colonies, caring for emigrants and coping with the threat of transmittable disease. Although French Canadians were openly critical of colonial officials over emigration and cholera in 1832 and 1834, these sentiments, to varying degrees, were also felt amongst settlers and officials in the Atlantic ports as they strove to manage unexpected emigrant ships and predations of transmittable disease on colonial settler society.

PART II – Cholera Outbreaks, 1832-1866

Chapter Three

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St. John's, Newfoundland: A Case Study

St. John's is the longest established community on an island whose connections with Britain date back to the sixteenth century. Located on the east coast of the province on the Avalon Peninsula, St. John's harbour opens onto the North Atlantic on the most easterly point of North America, offering a direct route to the old continent. The small but well-sheltered natural harbour provides immediate access to the open sea, while providing a safe haven for vessels once inside the Narrows at its mouth. By the early nineteenth century, the town was used foreign sailors and seamen in need of medical attention, with a naval hospital located near the harbour. While some sought medical assistance after sustaining physical injuries during the voyage, many others were treated for typhus fever, dysentery or venereal disease.[1] Surgeons and physicians on board naval vessels in need of further support would utilise the hospital station for the treatment of their patients, enlisting the help of local physicians and nurses in the town.[2]

Although Newfoundland was largely populated by fishermen whose forbears had abandoned the migratory fishery to settle on the island, strong trading connections with ports in Britain and Ireland meant that people, from various backgrounds and for various reasons, chose to migrate to settlements around Newfoundland. In 1775, Dr. John Clinch, a schoolmate and friend of Edward Jenner (a British physician made

[1] ADM 102/734. 26 October 1809 – 24 April 1810, 'Newfoundland Quarter Book', Mr. John Bunting, Surgeon & Agent. *St. John's Naval Hospitals and Hospital Ships' Musters, and Misc. Journals 1805-1811*. TNA.

[2] Sir Erasmus Gower appointed Dr. Benjamin Lara as surgeon of the naval hospital in 1806. Dr. Lara's account for reimbursement at the naval hospital that year amounted to £422.0s.9d. See ADM 102/734. 'Accounts between 23 July and 24 October 1806'. TNA.

famous for his treatise on smallpox vaccinations, *An Inquiry into the Causes and Effects of the Variolae Vaccinae*, published in 1800), came to Newfoundland from Poole to work as a physician. He later became a missionary and settled in Trinity, Newfoundland's second largest settlement at that time, located roughly 100 kilometres north of St. John's. In 1789, Jenner's nephew, George, decided to come to Newfoundland to work under Clinch, and later became a minister in Harbour Grace. A firm believer in his colleague's work on smallpox vaccines, Clinch has been credited with performing North America's first vaccinations in Trinity, in 1798.[3] Cowpox matter was sent from Jenner in Gloucestershire, most likely via George Jenner, to Clinch, who had been vaccinating people in Newfoundland for a year by the time Jenner's treatise was published.[4] St. John's physician, Dr. John McCurdy, also adopted Jenner's vaccination technique, and was inoculating various patients against smallpox in the town by the early nineteenth century.

After 1815, Newfoundland's economy continued to be overwhelmingly focused on the fishery and the scarcity of arable land provided limited opportunities for labourers seeking employment in agriculture. Sager and Fischer point out that while Saint John, New Brunswick boasted timber trade and shipbuilding industries, St. John's was still confined somewhat by its historic role as a fishing station, a '…result of geographic circumstance and the unusual demands of the island's staple industries, which were predominantly marine-based throughout the nineteenth century'.[5]

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[3] Frederick Jones, 'Clinch, John', *DCB Online* Volume V (1810-1820) (Toronto, 2000). Jones claims that Jenner sent Clinch a copy of his treatise on smallpox vaccinations in 1798.
[4] John W.R McIntyre and C. Stuart Houston, 'Smallpox and its control in Canada', *CMAJ* 161:12 (14 December 1999), 1543.
[5] Eric W. Sager and Lewis R. Fischer, 'Patterns of Investment in the Shipping Industries of Atlantic Canada, 1820-1900', *Acadiensis* 9:1 (1979), 23. Steamers were used particularly for the seal hunt in Newfoundland, as they were regarded as being more efficient when compared with sail-driven ships. For more information see: Eric W. Sager with Gerald E. Panting. *Maritime Capital: The Shipping Industry in Atlantic Canada 1820-1914* (Montreal, 1990), 53.



Figure 3.1. James Barclay. *A New and Universal English Dictionary* (London, 1842).

Nevertheless, even with economic prospects focused primarily on ocean resources, Newfoundland benefitted from the general trend of increased emigration to North America during the nineteenth century. Newfoundland was the first sight of land for any vessel bound for other parts of North America. Given the problems that could afflict a vessel midway through a transatlantic crossing, ships originally scheduled to pass the south coast of Newfoundland bound for more temperate territories of inland Canada often made their way to ports on the Avalon Peninsula for respite and replenishment. The unpredictable arrival of ships, driven ashore by various circumstances and predicaments, meant that Newfoundland's location made it a temporary haven for emigrants, convicts and merchants, some of them victims and survivors of shipwrecks and disease outbreaks. Of those emigrants who came ashore to restore their energy and health before finding the means to continue onwards, some chose to remain in Newfoundland as settlers.

This chapter, the first case study in this dissertation, discusses the management of emigrant ships, cholera and public health in St. John's between 1832 and 1854, and comprises two main parts: the preparations made for cholera in 1832 and 1834, and the cholera epidemic of 1854. Although St. John's escaped a cholera outbreak in the 1830s, the frequency of international traffic and the fact that cholera was particularly virulent in the main emigrant station at Grosse Isle, and in Quebec and Montreal in 1832 and 1834, meant that officials in St. John's were very much aware of the town's susceptibility to outbreaks of disease from foreign parts. Ships destined for Quebec, nearing the coast of North America in any form of distress, knew St. John's or ports in Conception Bay constituted their first opportunity for help, provisions and recuperation before they continued on to the mainland.

St. John's 1832-34

Isolation in Newfoundland & the Effective Use of Quarantine

As indicated earlier, the number of emigrants settling in Newfoundland increased steadily as part of the greater migration boom to British North America after 1815. Until the late eighteenth century, the majority of Irish settlers in St. John's came from Waterford, a town with a long-standing history of fisheries and trade with St. John's.[6] Many of these settlers gravitated to outport fishing communities located on the Avalon Peninsula, creating enclaves of Irish settlements particularly in Placentia Bay and the Southern Shore, south of St. John's. Faced with rugged terrain, lack of roads and sometimes extreme weather in Newfoundland, those residing in outport communities found ways to sustain themselves and develop despite limited communication with St. John's or even neighbouring communities. Edward Wix, an

[6] Jerry Bannister, 'Convict Transport and the Colonial State in Newfoundland, 1789', *Acadiensis* 27:2 (Spring 1998), 100-101.

Anglican missionary originally in Bonavista, who later became Archdeacon in St. John's, travelled extensively around Newfoundland in 1835 and describes the situation in his journal:

> It may give some idea of the difficulty of communication in the winter, even in the neighbourhood of St. John's, if I state here that gentlemen at Port de Grave had not seen a St. John's newspaper for a month, when I arrived amongst them; and that in Trinity Bay, I found that the sum of forty shillings had been, on a late occasion, demanded, and twenty-five shillings actually paid, for the casual conveyance of a single letter, overland, by one of the cross-country guides. I found that Rideout, a respectable young man, who had been used to keep[ing] a congregation together upon the south shore of Conception Bay, had died last spring, from the exertion and exposure consequent on going round the head of the bay at that inclement season on foot; and Hodge, the packet-man of Killigrews, was just recovering from a most severe cold caught a few days before, from his having been washed overboard in a gale.[7]

The extreme isolation in the outports, particularly in winter, was an aspect of life to which settlers grew accustomed; however, the threat of epidemic disease amplified the vulnerability of residents as they struggled to protect their health and safety. Isolation was problematic not only within settlements around the island; it also posed problems for larger towns such as St. John's and Harbour Grace, when they sought assistance from one another, or from mainland colonies in British North America. In June 1832, the government in St. John's wrote to the Colonial Office in London, worried that much of the population in Harbour Grace might starve because extreme weather conditions in June had caused the cove and bays to ice over, preventing local fisherman from heading out to sea.[8] Issues such as these were not uncommon amongst those living on an island at the mercy of unpredictable fishing, a paucity of fertile soil,

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[7] Edward Wix, *Six Months of a Missionary's Journal from February to August, 1835* (London, 1836), 17-18. BLCAS; Wix went to Nova Scotia in 1826, where he became diocesan priest. He arrived at Bonavista, NL, in 1830, but later went to St. John's to become the Anglican archdeacon. Frederick Jones, 'Wix, Edward' *DCB Online* Volume IX (1861-70) (Toronto, 2000).

[8] GN 1/1/3 - *Governor's Office, LetterBooks of Despatches to Colonial Office.* 19 June 1832. From Government House, St. John's, To Goderich. PANL.

long harsh winters, and extreme isolation, forcing residents to improvise, using what resources they had on hand, sometimes just to survive.

In the 1820s, officials in St. John's were the first to witness the shocking state of ships arriving from Ireland, typically destined for Lower Canada or the United States and in desperate need of assistance. In the late summer of 1827, the brig *James* from Waterford arrived in St. John's bound for Halifax and overwhelmed with typhus fever. The *James* had left Waterford with 160 passengers, and reached St. John's harbour with 155, having had five passengers die over the course of the crossing.[9] While residents of St. John's came to the aid of the sick and destitute onboard the vessel, the voyage needed to continue. The *James* left St. John's on 29 August, its load lightened to 120 passengers. Thirty-five, either already dead or too sick to continue the voyage, remained in Newfoundland to be buried or cared for by medical officers there.[10]

As cholera continued to spread in Britain and Ireland in July 1832, a measure of the community's concern can be seen in the proposal of Chief Justice Richard Alexander Tucker, Acting Governor of Newfoundland, to wield the blunt instrument of the law to prevent the spread of infection: 'It is my full determination, should any person be found so lost, to every feeling of humanity toward their fellow-creatures, as to risk their safety by boarding, or communicating with vessels or persons arriving as before mentioned, without being duly permitted to do so, to cause the severest penalties of the law to be enforced'.[11]

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[9] CO 217/147. 7 September 1827. From James Kempt, to Goderich. TNA.
[10] CO 217/147. 7 September 1827. From Charles Wallace, to Rupert George. TNA; For an analysis of the *James* from a Nova Scotian perspective, see Chapter Four – Halifax, Nova Scotia: A Case Study.
[11] GN 2/17 – *Quarantine LetterBooks, 1832-1836.* 4 July 1832. 'Proclamation by His Honor Richard Alexander Tucker, Esq, President of His Majesty's Council of Newfoundland'. PANL. Tucker was acting in place of the Governor, Sir Thomas Cochrane, who was in England for much of 1832.



Figure 3.2. 'The Town of St. John's Previous to the Fire of 1846', in D.W. Prowse, *A History of Newfoundland* (Portugal Cove/St. Philip's, [1895] 2002), 458.

Once cholera infiltrated into Quebec that June, panic ensued as British North American ports west of Newfoundland announced outbreaks of cholera. Tucker reported

> …almost universal consternation and panic among the inhabitants of Newfoundland, who having hitherto indulged a sanguine hope that the waters of the vast Atlantic, which separated them from all the countries then suffering under this dreadful scourge, might happily constitute a bourn which it could not pop, naturally regarded this danger as increased more than a thousand fold the moment they learnt that the Cholera had spread to the shores of America.[12]

The notion that cholera could make its way across the Atlantic, mysteriously pass by Newfoundland, and create havoc amongst colonies to the west did not create a sense of security amongst the population, but rather provoked greater attention on protective measures and protocols in St. John's, on water and on land.

Tucker recognised the natural tendency of Newfoundlanders to assist vessels in distress, but he also understood the danger to the economy of the colony if St. John's were to impose heavy quarantine regulations. In a proclamation in early July,

[12] GN 1/1/3. 11 August 1832. From Tucker, to Goderich. PANL.

he insisted on implementing precautionary measures in St. John's, but did not mandate strict quarantine requirements on incoming vessels. The cost of colony-wide quarantine measures and the difficulty of implementing them effectively in the numerous harbours and outports in eastern Newfoundland made Tucker believe that quarantine would be imprudent, explaining that '…there are many great, and almost insurmountable obstacles to the establishment of an efficient Quarantine system in this colony'.[13] By the nineteenth century, quarantine requirements continued to vary depending on the port, with some governments criticised for their rigid quarantine regulations while others maintained a reluctance to impose heavy restrictions, because of their effects on commerce, criticisms from reformers, and speculation over its actual ability to control 'contagion'. As Mark Harrison remarks, governments were forced to weigh the threat of disease against the economic losses brought about by trade restrictions from quarantine.[14] And as Melvin Baker points out, Newfoundland's lack of an elected government (Representative Government was to be instituted later that year) meant that the colony's budget was still highly dependent on Britain, which required it to demonstrate, in Tucker's view, the 'most rigid economy in every arrangement'.[15]

Tucker's proclamation stressed the maintenance of good hygiene, the dissemination of information on cholera, and the careful control of international traffic in St. John's by avoiding communication with vessels recently discharged from quarantine or originating from a port without a clean bill of health, 'unless the vessel

[13] Ibid. Melvin Baker also points out that the 'vagueness' of the legal system in Newfoundland promoted 'legal uncertainty' in the colony, in terms of which English Criminal Laws could be effectively implemented, which would have made it difficult for Tucker to impose punishment or pursue legal action for infringements of quarantine. See Baker, 'Disease and Public Health Measures in St. John's, Newfoundland, 1832-1855', *Newfoundland Quarterly* 78:4 (Spring 1983), 26-7.
[14] Mark Harrison, *Contagion: How Commerce has Spread Disease* (New Haven and London, 2012), xvi.
[15] 22 January 1833 'Memoranda on the Judicature of Newfoundland and on other subjects connected with that Colony', *Gazette*, quoted in Baker's, 'Disease and Public Health Measures', 26.

shall be in danger, and her safety shall imperatively require such Pilot's assistance onboard'.[16] On 11 August, Tucker indicated to Goderich that he would continue to promote sanitary reform and precautionary measures while he searched for a more cost-effective way to protect the health of the colony from foreign ships. He stated that he was inclined to '…trust those measures which I believe to be feasible, rather than to try others which I know can never be duly extended', adding his belief that mandating rigorous quarantine would only result in resistance in Newfoundland.[17]

Disease Management in St. John's

With cholera now in Quebec, a 'numerous and respectable meeting' was held at the courthouse in St. John's on 2 July 'for the purpose of taking into consideration the best means of preventing the introduction of disease into this town', and chaired by the High Sheriff, David Buchan. Resolutions passed included a request that Tucker establish a committee of 40 members required to assess the condition of St. John's, a board of health to enforce preventative measures, and a subscription to be drawn up immediately, to which the Acting Governor was requested to contribute.[18]

As medical officials in St. John's began to inspect homes throughout the town, it became clear that even without an outbreak of cholera, the town was in need of sanitary reform, especially amongst the working class and 'suffering poor'. The *Public Ledger* pointed out that 'British journals' claimed that cleanliness and temperance were the best protectors against disease, stating that 'It is a duty which we all owe to each other, heartily to concur in these wholesome regulations – and we

[16] GN 2/17. 4 July 1832, 'A Proclamation by Hon. Richard Alexander Tucker, Esq, President of His Majesty's Council of Newfoundland'. PANL.
[17] GN 1/1/3. 11 August 1832. From Tucker, to Goderich. PANL.
[18] 3 July 1832, *Public Ledger*, 2. CNS.

think, too, without any delay'.[19] In a letter to the editor, a writer using the penname 'Precaution' expresses concern over the way in which farmers use heaps of fish offal as manure, claiming that it must provoke an increase in 'pestilential miasma' around St. John's. Now that cholera had proven its ability to travel across the Atlantic and into Quebec, the writer states, '…we have no good reason to flatter ourselves in this Island that it will not visit us also in the course of the present summer'.[20] Similarly, Conception Bay magistrate, C. Couns, complained over the amount of capelin being used as fertiliser so close to residential houses, with the risk of the 'putrefied matter' contaminating the air.[21] Tucker continued to stress the advantages of sanitary improvements in St. John's and surrounding areas in his correspondence with Goderich, at times using words which suggest a personal detachment from the town and the threat of infection, claiming '…there can be no doubt but that the dread of the Cholera will have been productive of great benefit to this Community, if they shall have the good-fortune to keep the disease itself at a distance from them'.[22]

Couns also recommended that Tucker start issuing pamphlets and public notices on treatment for cholera, stating that 'the inhabitants residing in the several harbours and coves, cannot obtain medical aid, and of themselves would be totally unacquainted with the necessary treatment or remedies which ought to be applied for administering the disease'.[23] Dr. William Carson, district surgeon and well-known political activist, was asked to compile recommendations and create a pamphlet on cholera to be dispersed in St. John's and distributed to smaller and more remote areas

[19] 29 June 1832, *Public Ledger*, 2. CNS.
[20] 3 July 1832, *Public Ledger*, 2-3. CNS.
[21] GN 2/2 – *Colonial Secretary Incoming: 1832-34*. 10 July 1832. To Tucker, from C. Couns. PANL.
[22] GN 1/1/3. 11 August 1832. From Tucker, to Goderich. PANL.
[23] GN 2/2. 10 July 1832. To Tucker, from C. Couns. PANL.

of the colony, many of which lacked access to medical personnel.[24] Copies of Carson's 'cholera treatise' were sent to Twillingate, Ferryland, Bonavista, Kings Cove, Greenspond, Fogo, Trepassey, Burin, Mortier, Merasheen, Placentia, Little Placentia, St. Lawrence, St. Mary's, Lamaline, Harbour Breton and Bay Bulls, in an attempt to support those living in isolation, many without the ability to communicate distress or solicit assistance effectively during a health crisis.

Newfoundland's transition to representative government in 1832 only complicated the issue, as cholera and politics collided. Edward Wix, who was now the Anglican Archdeacon, condemned Carson's medical pamphlets, claiming that his treatises contained 'heretical notions'. Carson, already famous for his nationalist views and patriotic denunciations of Newfoundland's lagging colonial status compared to the rest of British North America, wrote that 'my [past] crimes principally consisted in exposing an imbecile government, at length found inefficient, and overthrown; - of advocating principles now triumphant; - in recommending such a government for Newfoundland as is happily about to be established'.[25] Public debate and political rivalry ran high in St. John's that summer, as both Carson and Wix sought election into Newfoundland's newly formed legislature. In September, Carson attacked Wix in the *Public Ledger*, asking 'What crime has Newfoundland committed that it should have been punished by any special visitation so afflicting as the Archdeacon - a scourge more terrible than the Cholera itself!'.[26]

By early July, a board of health was created in St. John's, comprising all medical men in town, including those located at the garrison, as well as magistrates,

[24] GN 2/17. 18 July 1832. From Crowdy. PANL. Crowdy asks that Carson be plain in his description of cholera symptoms for those tracts deemed for the outport communities.
[25] 11 September 1832, *Public Ledger*, 2.
[26] 11 September 1832, *Public Ledger*, 2.

clergymen, the Attorney General and the High Sherriff.[27] The town instituted a Chief Health Officer, Mr. Gaden, and a Medical Officer, Dr. Shea, and designated a small vessel, the *Lighter*, to be used to conduct inspections and oversee transport within the harbour.[28] Although government continued to steer clear of strict quarantine regulations on the island, St. John's harbour was organised to identify and approach foreign vessels with potential sickness onboard. Vessels were required to anchor at Chain Rock, in the mouth of the harbour, for preliminary inspections, and a hospital was designated on the south side, at Fort Frederick, to receive upwards of 24 potential cholera patients.[29] The Board of Health designated Riverhead Hospital the cholera hospital in the town, planning to transfer current patients to other lodgings '…in the event of such a direful disease making its appearance here'.[30]

As cholera continued to spread throughout Western Europe, the United States, and into Lower and Upper Canada, information provided by vessels on the state of infection in their ports of origin was important for ship inspectors in St. John's. On 16 July, when the brig *Caledonia* from Cork arrived in St. John's harbour, Secretary of the Board of Health, A. Hogsett, wrote to Provincial Secretary, James Crowdy, reporting: 'At the time of her leaving, deaths from cholera were said to be 20 per diem. Has a foul bill of health, but states that no sickness exists onboard'.[31] In October, the Board of Health requested that a passenger vessel from Waterford, a port

[27] GN 2/17. 5 July 1832. 'Statement from Government House'. PANL. The statement mentions that clergymen from every denomination are equally represented on the committee.
[28] In early August 1832 it was deemed that a second boat was required, which the government purchased from Messer Baine Johnstone & Co in St. John's, for £15, which sum also included the purchasing of proper clothing for the health officers and crew. For more information see: GN 2/17. 7 August 1832. To the High Sheriff, from Crowdy. PANL.
[29] GN 2/17. 7 July 1832. To David Buchan, from Crowdy. PANL; There were deliberations between the government and military personal in how to receive potential cholera patients in St. John's harbour. The military engineer was asked to formulate a report to Tucker on the eligibility of various buildings and work sheds around the harbour to be potentially used for patients in the event of an outbreak. For full details on the locations, capacities and costs associated with turning these work places into areas to receive passengers afflicted with cholera, see: 4 July 1832. GN 2/2. To Tucker, from J.O Wfield. PANL.
[30] GN 2/2. 12 July 1832. To Crowdy, from Hogsett. PANL.
[31] GN 2/2. 16 July 1832. To Crowdy, from Hogsett. PANL.

that '…from the best account they can obtain…is infected and has suffered much from asiatic cholera', be admitted to quarantine, that no contact be made between residents and passengers, and, if required, additional crew was to be sent to assist the health officer in this task.[32] Reports of vessels suspected of having contact with cholera, particularly from Ireland, continued throughout the summer, as officials in the harbour and in the town inquired into the best way to manage each case on arrival.

Rules, orders and scenarios changed as news developed over the extent to which cholera was found in towns connected directly to Newfoundland ports. If suspected passenger ships destined for Quebec arrived at St. John's and attempted to proceed beyond Chain Rock, the Battery was ordered to fire a shot towards the Narrows, as a warning signal. In giving these orders, Crowdy insisted: 'As the object, however, of this proceeding is merely to excite terror, the President desires that the shot may be fired in such a manner as to prevent the possibility of its hitting the vessel, or doing the slightest injury to anyone'.[33]

On 21 July, Tucker wrote to Lord Aylmer stating that the *John S. Thomas* from Belfast arrived in St. John's to obtain water and provisions, before continuing on to Quebec. He said that officials provided the vessel with what it needed, but that because cholera was currently in Belfast, no one from the boat was allowed on shore.[34] On 1 August, however, the *Mary* came into St. John's harbour apparently without having to undergo inspection, although the Board of Health had ordered the detainment of the vessel. Hogsett wrote of his dissatisfaction with this event, stating that the committee wanted to '…express their surprise that the officer of His Majesty's Customs should act in direct violation of those rules which have been

[32] GN 2/2. 4 October 1832. From Hogsett, to Crowdy. PANL.
[33] GN 2/17. 21 July 1832. To the Commandant, From Crowdy. PANL.
[34] GN 1/1/3. 21 July 1832. To Aylmer, from Tucker. PANL.

adopted by the Board of Health and sanctioned and approved of by His Majesty's Government'.[35]

Apparently in response to this incident, a second health officer, Frederick Elliott, was appointed in St. John's by 10 August, and placed in a position over Gaden. Both officers received strict instructions and tasks on the precise daily duties required in order to properly supervise harbour activity.[36] The schedule and tasks set by the Board of Health for Elliott and Gaden made it so that at least one officer was observing the harbour at all times, with daily reports submitted to the Board of Health Committee each morning. That officer would then return to the station with orders from the Committee, to be relayed to the officer currently on duty.

On 27 July, the Board of Health reported that a vessel from New York had arrived after 11 days at sea, with its master declaring six to seven deaths per day from cholera in the port of departure, and it was therefore ordered to spend six days in quarantine in St. John's.[37] By early August, the Board of Health required six days in quarantine for vessels arriving from infected ports, but no restrictions were placed on vessels arriving from uninfected ports. In a letter to Hogsett, on behalf of Tucker, Crowdy recommended '…exercising your own discretion as to the period which it may be required to extend the performance of Quarantine in suspicious cases'.[38] The enforcement of quarantine was, therefore, somewhat arbitrarily applied by health

[35] GN 2/2. 2 August 1832. Proposed Mr. H Emerson, seconded by the Reverend. W. Ward and signed by Hogsett at the Session Room, for the information of Tucker. PANL.
[36] GN 2/17.10 August 1832. 'Instructions to the Health Officers of the Port of St. John's Newfoundland'. PANL.
[37] GN 2/2. 27 July 1832. Signed by Acting Secretary, Charles Simms, from the Board of Health Committee. PANL.; Issuing bills of health in the outports, particularly over whether officials had the appropriate documentation to do so, became problematic after it was claimed that the vessel *Martha*, from Quebec, bound for Portugal, had stopped at Capelin Bay (now Calvert), in Ferryland, stating that it had received a clean bill of health. Bayly however, claimed that it could not have been possible for the vessel to have received the bill unless, 'Mr. Richard Carter the sub-collector at Ferryland has been guilty of a deviation from the truth'. See GN 2/2. 31 July 1832. From Bayly to Crowdy. PANL. Any vessel under fourteen days out from their port of departure, with infection in the port, was automatically required to undergo quarantine.
[38] GN 2/17. 6 August 1832. To Hogsett, from Crowdy. PANL. This kind of system could not have operated effectively before the construction of a telegraphic system; and even then, only imperfectly.

officers, who used the degree of sickness in the port of departure, as well as illness onboard, as factors in determining time spent in quarantine.

In August, the town committee voiced criticism over the lack of public information made available by the Board of Health regarding quarantine regulations in St. John's. On 20 August, members claimed they had been kept from knowing the particular rules set forth, stating that 'the Board of Health have not acted with such even-handed justice towards vessels coming from infected ports, as might have been awarded with less inconvenience to the shipping interest, and an equally rigid regard to the health of the community'.[39] The town committee argued that rules must be made public not only to ensure that all traders and merchants understood the length of required quarantine, but also to promote continuity and 'confidence' within the community.

Many in St. John's were aware of the devastating effects of cholera in Europe and in other areas of British North America through reports published and stories re-printed in the papers like the *Public Ledger*. Updates on the 'painful intelligence' of the spread of cholera in Montreal and Quebec were published in Newfoundland papers, and in August 1832, the *Public Ledger* re-published reports from the Board of Health in Halifax on their methods and tactics for protecting Nova Scotia from a cholera outbreak.[40] As government sought to increase and expand endeavours to protect the colony from cholera, a subscription towards repairs for the designated cholera hospital in St. John's raised £36.1s.6d., and an overall voluntary subscription raised £252.9s.6d. for the purpose of cleaning the town and supporting the poor, with Tucker reporting to Goderich that his office matched this amount.[41]

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[39] GN 2/2. 20 August 1832. 'At a Meeting of the Town Committee', signed by Secretary John Shea. PANL.
[40] 6 July 1832, *Public Ledger*, 2-3; 3 August 1832, *Public Ledger*, 4. CNS.
[41] GN 1/1/3. 11 August 1832. From Tucker, to Goderich. PANL.

Information on cholera's transmission as well as on ways to protect communities came in various forms in Newfoundland. While newspapers published official reports and commentaries on cholera from London, Paris and Russia, they also referred to accounts and experiences from emigrants. Passengers onboard the *Brutus* from Liverpool, most likely the ship mentioned in Chapter Two, forced to return to Liverpool after outbreaks of cholera were discovered onboard, was mentioned in the *Public Ledger* in July, claiming '…it is painful to add that in Liverpool several new cases have recently occurred. The narrative of the progress of this dreadful malady amongst the passengers and crew of the ship *Brutus*…possesses a melancholy interest'.[42] On 21 June, Bayly, the sub-collector for His Majesty's Customs at Harbour Grace, mentions a letter received from Liverpool describing the severe consequences of 'cholera morbus' in that town. Bayly inquires, knowing Liverpool was no longer granting clean bills of health under its current circumstances, whether the President will now require a medical officer to visit all ships arriving from the United Kingdom without clean bills of health.[43] Commercial and personal connections between Newfoundland ports and the British Isles stimulated an array of official and unofficial information to be transmitted throughout the colony.

Vulnerability of the Outports

Prompted undoubtedly by the creation of local boards of health in Britain during the 1831 cholera outbreaks, as well as by demands within the communities, boards of health were established in towns and outport settlements throughout the northeast coast, the Avalon Peninsula, and the southeast coast of Newfoundland – in Harbour Grace, Port de Grave, Trinity, Bonavista, Greenspond, Twillingate, Fogo,

[42] 20 July 1832, *Public Ledger*, 2. CNS.
[43] GN 2/2. 21 June 1832. To Crowdy, from Bayly. PANL.

Bay Bulls, Ferryland, Placentia, Burin and Fortune Bay. On the recommendation of Carson, arrangements were made to send small amounts of medicine against cholera to these and other settlements in the event of an outbreak.[44] On 10 August, the St. John's Board of Health acknowledged a letter from Andrew Pierce, sub-collector in Twillingate, describing the case of a French fisherman who had apparently died of cholera. A meeting was called in Twillingate for '…the purpose of examining schooners and vessels bound to this port, to prevent as much as possible the cholera morbus from being brought amongst the inhabitants', and agreement was reached to require surveillance in the port to monitor traffic from Labrador and the French shore. It was requested that more pamphlets on disease prevention be sent to places like Twillingate, '…as the few that were sent will go but little way for so many outports'.[45]

While Harbour Grace was relatively well connected to St. John's by land and by boat, communities located on the northern and southern circuits posed great challenges in sending necessary medicines. The improvisatory nature of the measures forced on the authorities by the forbidding logistics of their situation is clear from a letter Tucker wrote to Judge Breton on 23 August, asking him to carry a supply of medicines as he travelled to the southern parts of the island, and to disperse supplies to settlements which Breton believed to be in extreme need of relief. In his correspondence to Breton, Tucker states:

> The feelings of terror with which the possible approach of the Asiatic cholera must everywhere be contemplated are sensibly increased, in anticipating its probable effects in this Island, by the consideration, that a very large proportion indeed of its inhabitants are not only beyond reach of medical advice and assistance, but are also entirely

[44] According to Bannister, in the late eighteenth century, there were surgeons providing medical support in most of the main outports, established as a '…fixture of the fishery'. See Bannister, 'Convict Transportation and the Colonial State in Newfoundland, 1789', *Acadiensis* 27:2 (1998), 101.
[45] GN 2/2. 10 August 1832. To Crowdy, from Bayly. PANL.

> destitute of the means of procuring those medicines which have been found to be most efficacious in the care of that dreadful disease.[46]

Calomel, rhubard, castor oil, laudanum and ammonia, amongst other recommended supplies, were sent with Breton on his trip southward, in order to provide '…relief to the poor people in the quarter'.[47]

Isolation determined the way in which disease prevention was managed in the remote outport settlements. On 30 July 1832, Crowdy wrote to magistrates in Trinity, commending their 'extremely judicious' work on disease prevention in the community.[48] Brigus and Cupids chose to form their own boards of health on 6 August in order to protect themselves against a sudden outbreak of cholera.[49] Carbonear initially fell under the Board of Health at Harbour Grace but by the end of July the town chose to form its own board.[50] By 15 August, Harbour Grace had organised plans for a cholera hospital and was procuring medicines against cholera, estimating £180 in expenditures.[51] In early February 1833, the health officer in Carbonear ended his quarantine duties, terminated as a result of ice preventing vessels from coming into port.[52] A frozen harbour could also prevent supplies from being delivered, which would have undoubtedly stimulated more concern, starvation being an even greater fear than infectious disease from foreign ships.

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[46] GN 2/17. 23 August 1832. To Judge Brenton, from Richard Tucker. PANL.
[47] Ibid. Cholera remedies of this kind were recommended in many parts of the world during this time. Laudanum would have most likely induced sedation and comfort. As well, rhubarb and laudanum were known to have positive effects on slowing the actions of the gut.
[48] GN 2/17. 30 July 1832. To the Magistrates in Trinity, from Crowdy. PANL.
[49] GN 2/17. 6 August 1832. To C. Cozens, from Crowdy. PANL.
[50] GN 2/17. 31 July 1832. From Crowdy. PANL.
[51] The Board of Health finishes its statement by requesting that Tucker help pay for a portion which would be '…gratefully acknowledged by us on the part of the inhabitants at large'. GN 2/2. 15 August 1832. To Crowdy from the Board of Health in Harbour Grace. PANL.
[52] Crowdy explains that the Board of Health in Harbour Grace did not terminate the appointments of their health officers, who continued to implement quarantine regulations during the winter months, creating unnecessary expenses for government. GN 2/17. 20 March 1833. To Joseph Parkin, from Crowdy. PANL.

Tucker's focus on precautionary and preventive measures over strict quarantine regulations was in great contrast to the other British North American colonies, who had '… all made preparations against the attack of the Cholera upon a gigantic scale of expense'.[53] His implementation of 'simple' quarantine regulations, drawn up in the event that a vessel arrived from an infected port or was found with sickness onboard, as well as the 'practicable' monitoring system in St. John's harbour did not go unchallenged.[54] The Board of Health in St. John's, noting that a brig had breached quarantine in the harbour, declared its '…regret to learn from the President, that no punishment awaits the parties who have been guilty of it'.[55] In Carbonear, Dr. Walsh wrote to Crowdy over the '…inefficient state in which the quarantine laws are performed at this port', pointing out that Carbonear was the second largest port on the island with high traffic of European and British North American trading vessels, and making clear that it could not afford to be declared infected with cholera. Walsh proceeded to compare the various outports to the anatomy of the human body:

> Allow me, Sir, in conclusion to compare St. John's as the capital of the island to the Heart in the human frame which may be found and kept so for a time while the extremities [,] Carbonear to wit have absorbed the contagion which conveyed in to the blood [,] soon find its way to the citadel of the human castle the Heart sends for the poison through the different ramifications increasing with every pulsation of the artery through which it steams virulent by along and finally ends in the general dissolution so well described by those practised physicians as the solution of life while the soul the immortal

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[53] GN 1/1/3. 11 August 1832. From Tucker, to Goderich. PANL.

[54] Mr. Hogsett, Secretary of the Board of Health in St. John's made a valid inquiry to Crowdy on where they were to put a vessel infected with cholera if one were to find its way into the harbour. GN 2/17.14 August 1832, PANL.

[55] The Board of Health minutes point out a few examples of breaches of quarantine from vessels that have proved difficult for officials in St. John's. It recounts the *Ann* from Boston, which arrived claiming that there were no bills of health distributed. After being released, the *Hazard* arrived at a similar time, with two clean bills of health from Custom House and the British Consul in Boston. GN 2/2. 25 August 1832. To Crowdy, from Hogsett. PANL; Baker points out that it was also difficult to enforce effective laws in 1832 given the 'vagueness' of Newfoundland's 1791 and 1824 Judicature Acts and the fact that representative government was in its infancy in the colony that summer. This could be the reason why Tucker struggled to impose effective sanctions on offending vessels. See: Baker, 'Disease and Public Health Measures', 26-9.

> soul wings its way from its poisoned tenement of clay trusting that
> His Honour will receive these remarks in the spirit they are given.[56]

Medical analogies aside, Walsh had a point. The total population of Newfoundland in 1833 was 60 088, with 15 165 settlers in St. John's and 17 859 in Conception Bay.[57] Many of the outports continued to generate a fair-sized population relative to the capital, and while there was a large concentration of people needing protection in St. John's, it was irresponsible to underestimate the potential for infection in the outports, and its ability to wreak social as well as economic havoc throughout the entire colony.

In correspondence with Goderich on 11 August, Tucker admitted he was aware that some individuals wanted more stringent protocols, arguing that for the sake of the economy Newfoundland could not afford to be declared unhealthy because of inadequate quarantine regulations. He acknowledged that '…as [Newfoundland's] staple commodity, fish, [would] be completely spoilt before the expiration of that term of quarantine which would be imposed on our vessels in the ports of Spain and Portugal if they did not take with them a clean bill of health'. Nevertheless, Tucker resisted strengthening the imposition of quarantine in St. John's.[58]

In early August, Crowdy wrote to Health Officer Gaden concerning the *MicMac*, out of Quebec, which arrived at Harbour Breton, a fishing community located on the south coast of the island. The master of the ship had taken ill with cholera over the course of the voyage, and two crewmembers were declared sick days later in Harbour Breton, after which Crowdy ordered Gaden to place the *MicMac* in 'the most rigid state of quarantine which circumstances will permit'.[59] Crowdy further directed that if cholera was found onshore, a boat should be sent to St. John's, with a flag hoisted 'Union-down', whereupon crew and passengers would be inspected for

[56] GN 2/2. 16 July 1832. To Crowdy, from Dr. Walsh in Carbonear. PANL.
[57] 'First Session of the First General Assembly', *JHA* (1833-1841), 64. PANL.
[58] GN 1/1/3. 11 August 1832. From Tucker, to Goderich. PANL.
[59] GN 2/17. 3 August 1832. To Gaden, From Crowdy. PANL.

disease pending further instruction from government. Gaden followed up with Crowdy a few weeks later, stating he kept the *Micmac* under quarantine for an additional 14 days after the men came down with cholera-like symptoms, adding:

> From the number of vessels that are arriving every week from the United States of America to St. Peters [St. Pierre], and the number of boats that are constantly trading from this bay to that island, I fear very much the cholera will be imported to this island through that channel, unless His Honor The President can adopt such measures so as to prevent all communication with that Island'.[60]

Although St. John's managed to escape cholera in 1832, the threat of the epidemic highlighted several weaknesses in Newfoundland's ability to protect its own population from transmittable disease. The outports, in particular, felt vulnerable. It was becoming clear that in the event of a cholera outbreak in remote settlements, it could take days to notify officials in St. John's, and much longer still for assistance to be organised and help brought to these communities.

By Christmas 1832, cholera throughout British North America and the British Isles had abated. Although Newfoundland came through relatively unscathed, much was learned in the effort to improve sanitation and protect the colony's population, including its main asset, the fishery. Reports of quarantine breaches from foreign vessels during that period, coupled with the prospect of crippling economic losses if St. John's were to be declared unhealthy, were enough to stimulate discussion over the need for more stringent quarantine requirements on the island.

[60] GN 2/2. 23 August 1832. To Crowdy, from Gaden. PANL.

Quarantine Enforcement 1833-34

In April 1833, Sir Thomas Cochrane, who had returned as Governor of Newfoundland with the authority to implement Representative Government, issued one of the first acts of the new legislature, mentioned in Chapter Two. Modelled on Nova Scotian quarantine law, it was an 'Act to Provide for the Performance of Quarantine and more Effectually to Provide against the Introduction of Infectious or Contagious Diseases, and the Spreading thereof in this Island'.[61] The Act designated the colony's first official quarantine station at Kelly's Island and Little Bell Island in Conception Bay, with quarantine fees dependent on the tonnage of the vessel. On 30 April, Crowdy sent twelve copies of the Act to the outports, asking for their full cooperation, stating 'the necessary instructions for its being carried into full effect as far as on them the same may depend'.[62]

In June 1833, 'trifling' repairs to the cholera hospital in the harbour at Fort Frederick were approved in preparation for its future use.[63] As predicted, however, expenses rose dramatically that summer once quarantine regulations were put into effect, forcing Cochrane to issue new proclamations raising tonnage fees. With cholera outbreaks reported overseas again, in October 1833 Cochrane ordered a medical officer to inspect vessels from the United Kingdom and Europe, creating an additional 10 shilling medical fee to cover the cost of this measure.[64]

As Newfoundland prepared once more for the possibility of cholera, the community in St. John's continued to voice concerns and criticisms in the newspapers concerning quarantine surveillance. In November 1833, an anonymous report was published in the *Public Ledger*, noting the apparent laxity of certain public officers

[61] GN 2/17. 10 April 1833. Proclamation by James Crowdy, on behalf of Thomas Cochrane. PANL.
[62] GN 2/17. 30 April 1833. From Crowdy. PANL.
[63] GN 2/17. 3 June 1833. To Lieutenant Colonel Oldfield, from Crowdy. PANL.
[64] GN 2/17. 10 October 1833. 'Proclamation by Sir Thomas John Cochrane'. PANL.

responsible for quarantine. The writing got the attention of Cochrane, who asked Crowdy to write to the President of the Chamber of Commerce, James McBride, about the validity of these charges. Cochrane requested that McBride ask all of his members to furnish any information that would shed light on the particular case, in order to preserve the reputation and performance of quarantine protocols.[65]

As the emigrant season approached in the spring of 1834, ships from Irish ports afflicted by cholera came under particular scrutiny in St. John's. On 6 May, Crowdy wrote to Bonifant, Superintendant of Quarantine, stating that all masters of vessels arriving from Ireland were to be interrogated upon their arrival, and the strictest quarantine measures imposed.[66] Ships originating from British North American ports were exempt from a 48-hour minimum quarantine requirement in Conception Bay, and were granted entry once examined by a superintendant '…provided no cause of suspicion shall exist to render their long detention necessary'.[67] Regulations changed immediately, however, once cholera was declared again in Lower Canada, and then in Halifax in August 1834.

Once news arrived of cholera fatalities among emigrants and residents in Lower Canada, the *Public Ledger* began to publish updates and comments on the spread of the disease in British North America and the United States. In June, the newspaper quoted this sobering admonition published in the *Halifax Times*: 'Though a merciful providence spared us the visitation of the destroying angel, yet it is not certain that we shall be again except'.[68] Once cholera was declared in Halifax, the

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[65] GN 2/17. 3 December 1833. To James McBride, from Crowdy. PANL.
[66] GN 2/17. 6 May 1832. To Superintendants of Quarantine, from Crowdy. PANL. On 13 May 1834, Crowdy writes specifically on cholera in Ireland and the neighbouring towns in Waterford. Even if ships were not arriving directly from Waterford, because of the historical connections with Newfoundland, it would be likely that there would be Waterford emigrants onboard ships leaving from Cork or Wexford, bound for St. John's. GN 2/17. 13 May 1834. To Patrick Morris, from Crowdy. PANL.
[67] GN 2/17. 9 June 1834. 'Proclamation by Sir Thomas John Cochrane'. PANL.
[68] 20 June 1834, *Public Ledger*, 2. CNS.

Public Ledger re-published reports from its Central Board of Health, updating readers on cases in town, and indicating by October that the death toll was lowering considerably.[69]

With cholera now in the Atlantic region, Cochrane quickly had the quarantine regulations revised to state that vessels originating from British North American ports would be treated the same as foreign vessels arriving in port until 1 November 1834. He urged the re-formation of a board of health in St. John's and requested that 20 men, listed in his proclamation, act as health wardens in the town.[70] Halifax was the closest North American trading centre to St. John's, and Newfoundland ports were used to reciprocal communication and contact with Nova Scotian vessels for decades. The news of outbreaks in Halifax deepened the level of panic and distress, making the possibility of an epidemic seem all the more real for Newfoundland.[71]

In St. John's, the chief engineer of the naval yard was asked to assess buildings near the harbour for suitability to house patients 'labouring under infectious diseases'. £66.0s.5d. in expenses had been accumulated improving the condition of the naval yard buildings in St. John's for housing possible cholera patients, but once cholera started to decrease in Halifax, the work was stopped.[72]

Like St. John's, many outport settlements had regular traffic with vessels from Nova Scotia. Most did not, however, have access to the quarantine facilities established in Conception Bay. Magistrates in Twillingate, informed of cholera in Halifax, were warned to prevent any communication between vessels isolated in the harbour and residents on shore. Since it would be particularly difficult to police this

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[69] 7 October 1834. *Public Ledger*, 2. CNS.
[70] GN 2/17. 29 August 1834. 'Proclamation by Sir Thomas John Cochrane'. PANL.
[71] GN 1/1/3. 23 October 1834. From Cochrane, to Spring Rice. PANL.
[72] Ibid. The payment of expenses up to that point came 'provisionally' from the colonial funds, with Cochrane requesting that Spring Rice '…move the Lord Commissioners of the Admiralty so that the same may be repaid'.

during the evening, when it would be expensive to employ a night watch, it was suggested that it might be best to send a vessel in quarantine to an abandoned harbour nearby.[73]

On 10 September 1834, Cochrane issued a proclamation, drawing attention to infected ports in North America, namely Quebec, Halifax and New York, with which Newfoundlanders had habitual communication. Included were required protocols if infection were found onboard ships originating from those ports.[74] On 19 September, the *Bolina* arrived in St. John's, requesting permission to anchor, but officials learned that the vessel had made a brief stop in Halifax en route. The Board of Health insisted that the vessel undergo quarantine inspection at Kelly's Island, an order which was not taken well by the master of the *Bolina*, who was brought to task by the Secretary for his coarse language directed at health officials, and his uncooperative attitude throughout the encounter.[75]

Protocols to protect the colony from transmittable disease were in place in St. John's and on Kelly's Island until the end of October 1834. Arrangements were made again at Riverhead Hospital to receive cholera patients in the town, in the event of an outbreak.[76] Boards of health throughout the colony were developed or reinstated. New appointments were made for medical and quarantine officers in St. John's and Kelly's Island, and another quarantine boat was purchased.[77] By 1 November, however, after over a month without any cases of disease on the island, and with reports of cholera

[73] GN 2/17. 9 September 1834. To The Magistrates for Twillingate District, from Crowdy. PANL.
[74] GN 2/17. 10 September 1834. 'Proclamation by Sir Thomas John Cochrane'. PANL.
[75] GN 2/17. 19 September 1834. From Crowdy. PANL.
[76] GN 2/17. 18 September 1834. To R.W Carter, President of the Board of Health, from Crowdy. PANL.
[77] GN 2/17. 11 September 1834. From Crowdy on the topic of John Godridge as new Superintendant of Quarantine at Kelly's Island; GN 2/17. Undated. From Crowdy, statement that Joseph Shea is the new medical officer of Quarantine in St. John's; GN 2/17. 24 October 1834. From Crowdy, on the topic of the purchase of a new vessel for the quarantine station. PANL.

diminishing in British North America and in the British Isles, quarantine regulations and protocols were dismantled and phased out.

After 1 November 1834, all vessels arriving in Newfoundland with a clean bill of health underwent a 24-hour quarantine period, after which they were granted entrance. The 1833 Quarantine Act, which was due to expire by the end of that quarterly session, was extended, but by 1835 quarantine services were in the process of being shut down, with employment contracts ending and equipment left over from the 1832 and 1834 cholera threats going up for sale.[78] By 1836, attention returned to smallpox, with the St. John's Board of Health focusing on vaccinations and purification measures in the colony. Attempts to clean the houses of the 'poorer inhabitants in which the smallpox . . . existed', through whitewashing and fumigation, became mandatory as outbreaks began to appear in St. John's and in the outports.[79]

Between 1832 and 1834, two contrasting preventative strategies for cholera were employed in Newfoundland. Tucker's cautious measures and limited use of quarantine in 1832 differed markedly from Cochrane's robust insistence on strict quarantine in 1834. Officials in Newfoundland were not only moved by the threat cholera posed to the capital city of St. John's, but also its potential to devastate the colony's isolated outport communities. The livelihoods of many Newfoundlanders were dependent upon the small communities outside St. John's where the fisheries

[78] GN 1/1/3. 21 November 1834. To Spring Rice, from Prescott; GN 2/17. 24 June 1835. To Bonifant, from Crowdy. PANL. Crowdy states that quarantine restrictions are being 'abolished' and that Bonifant and the boat crew for Kelly's Island will receive their salary until the end of the month. Nevertheless, the Collector for Customs and Quarantine Fees in Ferryland, Robert Carter, was asked to keep his boat 'in the best state of preservation you can as she may perhaps be again required'. GN 2/17. 6 June 1835. To Carter, from Crowdy. PANL.

[79] GN 2/17. 18 March 1836. To the P.M Carter, from J. Templeman, Acting Secretary. PANL; In Templeman's letter he states that the treasury will help with any necessary expenses for smallpox prevention. A few weeks later, however, Templeman wrote to the Board of Health in Carbonear stating that their medical physicians are charging an exorbitant amount of money – 3 guineas per vaccination, plus 1 guinea for professional services, claiming that this type of fee is 'expect[ed] from his richest patients in the Parent country', but that 'gratuitous vaccinations' is largely what is expected here. He states that the Governor will consider payment once the medical men in Carbonear correct their accounts. GN 2/17. 16 April 1836. To Buckingham, Elsin, Chancey, Pock and Elledge, from Templeman. PANL.

primarily took place. These settlements were remote, usually reachable only by water, though all highly self-sufficient in normal day-to-day situations. They were connected through shipping to the outside world, which made them directly vulnerable to the threat of transmittable disease; however, their remoteness from St. John's made it difficult to co-ordinate and implement a coherent colony-wide policy of disease prevention. On several occasions, emigrant ships from Ireland and England were forced to interrupt their journeys in distress, or with sickness on board, unable to carry on to destinations in Lower Canada or the United States. As vessels of this nature arrived in ports around Newfoundland, the susceptibility of communities to transmit disease mounted considerably. As the Harbour Breton incident made clear, were an outbreak of cholera to occur, the capacity of the outports to manage it was extremely limited.

In 1832, the year when the colony finally achieved Representative Government, the Newfoundland population was assertive when faced with an Acting Governor, whose overwhelming focus was to stay within his limited budget and ensure that the economic pursuits of the colony were not disturbed. In St. John's especially, residents were openly critical, and put pressure on Tucker to initiate preventative measures, such as improving sanitation, repairing hospitals and assisting the poor. Citizens were aware of the devastating effects of cholera in neighbouring colonies through the *Public Ledger* and the *Newfoundland Patriot*. Their views influenced the way the threat of disease was perceived by the colonial government – changing it from a cautious, largely reactive set of regulations influenced by short-term fiscal and economic considerations, to the implementation of stricter preventative protocols, designed to protect the health of residents and emigrants, and the reputation of Newfoundland ports as safe and disease-free.

St. John's – Cholera in 1854

The Threat of Cholera in 1849

After 1834, attention shifted from cholera to smallpox and 'fevers'. Although less prone to excite global hysteria, mortality from diseases such as smallpox, typhus fever and typhoid occurred on a more regular basis, making their potential transmission an ongoing concern for Newfoundlanders. The colony grew and diversified over the 1830s and 1840s, with religion, society and politics becoming increasingly more complex. During this period, the success of the fishery, as always, fluctuated annually, while agriculture made small incremental gains. Then in June 1846, St. John's experienced its most damaging fire to that date, with over 200 houses destroyed.[80] Three months later, in September 1846, a fierce storm caused such destruction that some considered the gale to be more devastating than the fire. With the town reeling from this double blow, the British Treasury felt forced to advance a loan to help relieve the colony. In reflecting on the catastrophes in St. John's over the year, the *Public Ledger* stated: 'We have not the gift of prophecy – gifts such as that belonged to a foregone age and are denied in the present; but this we may safely affirm that if the lessons of the past are to have no bearing upon the future, upon our own heads be it if a double vengeance falls upon us!'.[81]

In May 1847, typhus fever was discovered onboard the *Mary Parker* in St. John's harbour from Ireland. Without active quarantine protocols in place that spring, passengers disembarked and swiftly made contact with residents in the city. Although Drs. Carson & Kielley implemented the 1833 Quarantine Act in St. John's shortly afterwards, requiring a health officer to visit each vessel on arrival, some passengers,

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[80] John P. Greene. *Between Damnation and Starvation: Priests and Merchants in Newfoundland Politics, 1745-1855* (Montreal, 1999), 197-98. According to Greene, the devastating results of fire and wind meant that for the first time in British imperial history, a loan was advanced to a colony under these circumstances.

[81] 11 June 1847, *Public Ledger*, 2. CNS.

such as those onboard the *Bolivar* from Waterford, found ways to avoid inspection by hopping onboard shore boats in the harbour.[82] A report on the *Mary Parker* in the *Public Ledger* mentions the vulnerability of St. John's to disease:

> Considering the great prevalence of disease in various parts of Ireland from fever and dysentery, and indeed the great fatality which, according to the newspapers accounts, has attended it, there was a very natural and strong probability that emigrants from the affected districts would communicate the same to the inhabitants of the colonies whither they may arrive;[83]

The *Public Ledger* stated that although little official work will be achieved until the Colonial Legislature is assembled, residents should ensure good sanitation to help protect the town from '…not only receiv[ing] but retain[ing]', any virulence.[84]

By 1849, the effects of poor sanitation and unhealthy living habits were featured regularly in St. John's newspapers. The content was drawn largely from provincial, colonial and global events, but the issue was sometimes addressed in humorous anecdotes, such as 'A Dirty Hand' printed on July 6 1849, in the *Public Ledger*:

> Dr. Wall, once at a dinner party, very unwisely persisted in playing with a cork in such a manner as displayed a hand long divorced from a lavatory. One guest happened to express his surprise to another, and in too loud a whisper, exclaimed, "Heavens, what a dirty hand!" The Doctor overheard, and turning sharply round, said, "Sir, I'll bet you a guinea there is a dirtier in the company," "Done," replied the first, sure of winning. The guineas were staked, and the Doctor showed his other hand. He was judged to have won without a dissentient voice.[85]

Stories like 'A Dirty Hand' revealed the way in which communities had become alert to problems of sanitation and hygiene, and most likely, particularly at a time when cholera was heavily affecting Britain and Ireland, its potential associations with the

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[82] GN 9/1 – *Executive Council Minutes 1847-55*. 20 May 1847, 'At a Council Meeting, Government House'. PANL; 21 May 1847, *Public Ledger*, 2. CNS. The account was under the heading 'Passenger-Vessels from Ireland'.
[83] 16 May 1847, *Public Ledger*, 2. CNS.
[84] Ibid.
[85] 6 July 1849, *Public Ledger*, 4. PANL.

spread of epidemic disease. Although most criticisms were directed at the living conditions and personal habits of emigrants and labourers, in this instance the medical professional is pilloried. Unfazed and even amused at the horror incited by his filthy hands at a dinner party, he even takes advantage of the occasion to outwit the company with a trick wager. By the middle of the nineteenth century, it was increasingly understood that it was not just the working classes who were in need of correction in matters of personal hygiene.

In early July 1849, after cholera outbreaks were declared in Europe, a public meeting was called in St. John's to consider quarantine requirements and sanitary improvements for the city. Several resolutions were passed, recommending the re-implementation of the Quarantine Act on vessels arriving from the United States, as well as the division of the town into six wards to monitor and control the cleansing of poorer dwellings with lime and other cleaning agents.[86]

As cholera continued to raise havoc in international ports like Liverpool, New York and Boston in 1849, the close connection between those ports and St. John's was a cause for concern. Changes to quarantine regulation, disease management, and other advancements in public health in Britain, proposed by Carlisle, Ashley, Chadwick and Smith, along with minutes from the General Board of Health in London, were re-printed in the *Public Ledger* that July, and associated with positive commentary from the town.[87] Local discussions on new modes of protection were also reported, as well as the continuing debates on the efficacy of quarantine and the influence of atmospheric conditions in encouraging infection.

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[86] 10 July 1849, *Public Ledger*, 2. PANL. The announcement of the meeting and its minutes were published in the *Public Ledger*. Other resolutions called for a subscription list to be opened for 'unavoidable expenses' in cleaning homes, and for a committee to be formed in the six wards in order to collect the subscriptions.

[87] 13 July 1849, *Public Ledger*, 2. PANL.

The lack of employment opportunities in Newfoundland relative to the number of emigrants landing there was a topic of discussion in the St. John's newspapers, as was the plight of the emigrant generally. 'The Emigrant's Tomb' published by the *Public Ledger* on 14 August 1849, captures the angst associated with dislocation and isolation:

> Deep in a western forest's shade,
> In the green recess of a sunless glade,
> Where the wild elk stalks, and where strange flowers bloom,
> In a rough hewn mound – the emigrant's tomb.
>
> In the emerald isle, far o'er the wave,
> The friends he loved had found a grave;
> But one fair blossom – his hope, his pride –
> Was left to him when the rest had died.
>
> One fair little child his love to prove –
> The only thing he had now to love –
> Still cheered the heart of the lonely man,
> And lit up the cheek that was sunk and wan.
>
> At length the star of the poor man's night,
> The one that had made his home seem bright,
> Like a blighted flower, she pined and died,
> And he sought a home o'er the ocean wide.
>
> To the plains of the western world he sailed,
> But his eye had dimmed, and his cheek had paled;
> He died when the proud ship touched the strand,
> And they made him a tomb in that foreign land![88]

The emigrant experience was often expressed in such melancholy terms, and writings depicting sickness and death on the voyage out, the struggle to succeed in a new land, and the pang of separation from family, friends and loved ones appeared throughout British North America. In St. John's newspapers, poems like 'The Emigrant's Tomb' mingled with instructions on cholera from official and unofficial sources, and news from all over the world, including Barbados and other countries of the West Indies.

[88] 14 August 1849, *Public Ledger*, 4. PANL.

Personal accounts of cholera from emigrants in Dublin and Boston were re-printed in the newspapers to describe the disease from the perspective of those with first-hand experience.[89] Professional advice was also published and re-published from other news sources. An excerpt from 'A Code of Instructions until Medical Aid can be Procured' by Sir Arthur Clarke in Ireland, appeared in the *Public Ledger*, entitled 'In case of sudden attack of Cholera or Colic, during the night, and how to act:'.[90] Clark's advice is practical, referring to past cholera epidemics and practices found to be most useful in relieving symptoms of the disease. He warns the reader to pay attention to increased symptoms of diarrhoea, as that could be a sign of cholera approaching, and to strive to maintain a clean and 'confident' household. He describes a homeopathic remedy, if cholera were to arrive suddenly:

> …Give an adult person twenty drops of laudanum, with three of essence of peppermint in a little brandy and water every hour or half-hour, until a physician arrives, or until relief is obtained. Let the patient be removed into a well ventilated apartment, and be warmly covered, let the whole body be rubbed with spirits of turpentine, and a mustard blister applied to the pit of the stomach; two or three drops of the camphorated spirits of wine may be added to the above mentioned draught.[91]

Advice of this kind was particularly useful to those residing in rural environments, like Newfoundland outports, many of whom were forced to manage disease outbreaks with what was on hand, and in many instances, without proper medical supplies and personnel.

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[89] 17 July 1849, *Public Ledger*, 2. An article from the *Boston Daily Journal* entitled 'A Specific for the Cholera'; 20 July 1849, *Public Ledger*, 2. PANL.
[90] 20 July 1849, *Public Ledger*, 2. PANL.
[91] Ibid. Clarke also stresses the need to be dry and away from stagnant water. He states: 'The cholera has been found to be most destructive in villages situated on low and marshy grounds, or near bogs and stagnant pools; and particularly where the inhabitants are confined within a narrow space, and live unmindful of cleanliness'.

In the mean time, health wardens in St. John's continued to inspect the sanitary conditions of the city.[92] 'Offensive…dangerous nuisances', forced the closure of graveyards, with a view to making the city 'freer of noxious accumulations' made worse by the 'present state of the weather' that July.[93] On 31 July 1849, a piece on the inefficacies of quarantine in St. John's was published in the *Public Ledger*, recounting an incident of a vessel arriving from Boston, Sunday prior. A local merchant allegedly boarded the vessel while in quarantine, after the pilot left for breakfast. The report portrays the frustration felt by local merchants over ill-conceived and poorly implemented quarantine practices. It ends with the plea that '…all prohibitions imposed should be *reasonable* prohibitions, and as little subject to caprice or arbitrary control as they can possibly be. They will thus be rendered less objectionable to the commercial public, and be more cheerfully complied with'.[94] Mercantile views on quarantine had always been heavily debated and speculative. Most merchants were continually frustrated by long bouts of quarantine, imposed restrictions, and the resulting strains placed on their trading ports and the economy. This incident may have been the catalyst for a public meeting announced on 1 August by Walter Grieve, President of the Chamber of Commerce, to discuss the implementation of sanitary measures as a protection against cholera currently infecting towns where 'the communications with this port [are] both numerous and rapid'.[95]

Although cholera did not infect Newfoundland in 1849, residents of St. John's prepared for its arrival, passing resolutions at public meetings, which typically influenced government health policies in the colony. By the mid-nineteenth century,

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[92] 24 July 1849, *Public Ledger*, 2-3. PANL.
[93] Ibid. Although the article is not specific on the weather conditions, previous references suggest the importance of cool clean breezes in town, making the current conditions most likely hot, wet or humid. At the end of the statement it adds that the population must be thankful for a reasonably good fishing season and 'the prospect of at least an average supply of the fruits of the earth'.
[94] 31 July 1849, *Public Ledger*, 2. PANL.
[95] 3 August 1849, *Public Ledger*, 2. PANL.

Newfoundland's economy continued to be reliant almost entirely on the prosperity of the ocean. While Nova Scotia and New Brunswick had achieved responsible government by the late 1840s, Newfoundland was still agitating for this advance, which it eventually attained in 1855. The vociferous nature of public debate revealed a determination by people already battling isolation, economic volatility and political uncertainty to protect the health and prosperity of their communities.

Preparations in St. John's – 1854

By mid-century, vessels containing European immigrants, sick or otherwise in distress, were continuing to arrive in St. John's and in Newfoundland's outport communities. In August 1853, the *Charles Clarke,* a British ship bound for Quebec from Hawbury, was shipwrecked in Trepassey Bay, on the south coast of Newfoundland. 113 German immigrants were on board, five of whom perished. The survivors, in 'great destitution', were sent by sea to St. John's. The Governor of Newfoundland, R.B. Hamilton, wrote to the Earl of Elgin in Quebec that the passengers had 'obtained the good will of the inhabitants of this place and have evinced great gratitude for the kindness shown to them'.[96] Hamilton stated he would forward them on to their destination 'in a vessel which I have engaged for that purpose', once they were ready.

The following spring, cholera outbreaks were reported once again in Europe. By May 1854, Newfoundland had emerged from a particularly harsh winter, with the economy straining to support the population and relieve the poorer labouring classes.[97] The Board of Health in St. John's met at the Court House on 5 June to draw

[96] RG7G20 - *Governor General's Office: Civil Secretary's Correspondence.* 6 August 1853. To the Earl of Elgin, from Hamilton. LAC.
[97] GN 1/1/3. 12 May 1854. From Hamilton, to Lord Duke of Manchester. PANL. Hamilton continues to explain the severe condition of the pauper population by proposing that '…it began to be a serious

up rules and regulations '…for the effectual prevention of disease being brought to this port by shipping, so as to endanger the health of St. John's'. The meeting focused largely on drainage in the town, and ways to keep its streets clean.[98] Health wardens were appointed, and on 18 July Hamilton issued a proclamation imposing inspection and quarantine of vessels from Upper and Lower Canada, the United States, Barbados and Saint John, New Brunswick, together with landing fees assessed '…for the purpose of defraying the necessary expenses to be incurred in the maintenance of the Quarantine Regulations'.[99]

The Board of Health published its rules and regulations in the *Public Ledger* on 14 July 1854. Sewage, drainage, the proper preservation of fresh fish and the promotion of 'decency' were the points stressed in the published set of rules.[100] The town was again divided into sections to allow health wardens to carry out monitoring and cleansing procedures more effectively. On 13 July 1854, *The Newfoundlander* remarked, 'We are very glad to observe that the Board of Health and Health-Wardens are bestirring themselves to the necessity of every possible precaution against the spread of fever and the introduction of other disease'.[101]

Throughout the summer, *The Newfoundlander* and the *Public Ledger* continued to publish reports of cholera in Britain, Ireland, the United States, and other areas of British North America, together with advice and commentary directed at the

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economical consideration whether it might not be politic to assist the removal of those who would not probably obtain remunerative unemployment during the ensuring season who had not the means of emigrating, in order thus to diminish the public burdens during another winter'.

[98] 14 July 1854. *Public Ledger*, 2. PANL.

[99] 18 July 1854, *Royal Gazette*, 3. PANL; Quarantine on vessels arriving from British and Irish ports was recommended by the Board of Health on 12 September. See GN 9/1. 12 September 1854. 'At a Council held this day present'. PANL.

[100] 14 July 1854, *Public Ledger*, 2. PANL. The rules claim that fresh fish can only be bought from designated fish stalls who clean their stalls daily. It excepts 'such fish as may be carried for sale from door to door.'

[101] 13 July 1854, *Newfoundlander*, 2. PANL. Below that statement there is mention of the 'British American Friendly Society' a charitable organisation for the poor in St. John's. For more information on organisations of this kind in the Atlantic colonies, see Judith Fingard, 'The Relief of the Unemployed Poor in Saint John, Halifax and St. John's, 1815-1860', *Acadiensis* 5:1 (1975), 32-53.

local situation. Recommended remedies and practical suggestions from international health officers, religious leaders and emigrants were printed. One clergyman, claiming to be in service to the Lord Lieutenant of Ireland, gave his remedy for the 'Prevention and Cure of Cholera', assuring readers that 'I have had many instances of trying this remedy; and in no case did the patient die, the recovery being always speedy and perfect'.[102] He asserted that his recipe, which largely consisted of a mixture of equal parts of charcoal, laudanum and brandy, would bring patients in the 'blue stage' of the disease back to health within hours. 'The charcoal,' he insists, 'was tried as a preventive on a large plantation in the Mauritius, and not a single individual out of eight hundred was attacked with the cholera'.[103] Although residents in St. John's were not yet at a stage where they required such advice based on how other areas of the world were coping and at times 'succeeding' in the face of cholera, the anecdotes perhaps provided some reassurance in the community.

On 21 July 1854, the importance of instituting a superintendent 'to watch over, and from time to time report upon, the sanitary condition of the town…' in St. John's was asserted in the *Public Ledger*. While acknowledging the fragile financial state of the colony, the piece nevertheless reasoned: 'Whilst therefore a needless expenditure of the public money is, on the one hand, by all means to be avoided, a niggardliness, in the supply of all that is absolutely necessary for carrying out these sanatory measures is on the other equally to be deprecated'.[104] Similar concerns and rationales were expressed in the *Newfoundlander* on 20 July. Although the writer did not want to portray alarmist sentiment, everyone was 'anxious' to see how the Board of Health and health wardens were going to proceed in ensuring the health of the

[102] 18 July 1854, *Public Ledger*, 2. PANL.
[103] Ibid.
[104] 21 July 1854, *Public Ledger*, 2. PANL.

town.[105] St. John's residents were critical of the current state of the town, arguing the need of a proper sewage and drainage system such as 'exist in [other] well-constructed towns'.[106] They continued to press for precautionary measures, and express concern for the way in which the colony, with its own unique pressures, demands and constraints, would defend itself against cholera.

Information and instructions were published throughout the summer, particularly once cholera was reported in Saint John. The views of Dr. Robert Bayard, a physician active in the treatment of epidemic disease in New Brunswick and Nova Scotia for over 20 years, were re-printed in the *Public Ledger* on 29 August from a 3 August edition of the *Newbrunswicker,* entitled 'Cholera Not Contagious'. The article contained detailed information on Bayard's experience with cholera, including patients tended to in 1834, and his proximity to the sick without receiving cholera himself, leading to his conclusion that cholera was not contagious. To reinforce his argument, he explains 'Experiments have been intentionally made in hospitals upon the Continent of Europe and elsewhere to test the contagious and non-contagious character of cholera. A man without any suspicion of the experiment, was placed in a bed, in which a cholera patient had died, and covered with the same bed clothes; he slept in it, and received no disease'.[107]

Halifax Board of Health minutes were also printed in the *Public Ledger*, giving '…the following brief, but at the same time, practical expression of [its] opinion on the subject [of cholera]'. The recommendations focused specifically on

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[105] 20 July 1854, *Newfoundlander*, 2. PANL.
[106] 8 September 1854, *Newfoundlander*, 2. LAC.
[107] 29 August 1854, *Public Ledger*, 2. PANL; A similar experiment, if not an offshoot from the original one, was referred to in detail in Saint John's, *Morning News*. It claimed four sentenced murderers in St. Petersburg were told to occupy beds used by cholera patients. According to the report, it was agreed that if the murderers did not catch the disease, they would not be sentenced to death, but it ends with: '…instead of cholera beds, the murderers were put into beds which had not been occupied by diseased persons; and yet, such was the effect of their fears, the four died within three days'. 11 September 1854, *Morning News*, 2. PANB.

individual cleanliness and public sanitary measures needed in the town, including the importance of clean clothing, a healthy diet and the avoidance of excess alcohol.[108] The Board believed it best to provide simple advice, claiming that '…the public look for health and protection to the easy and attainable means referred to, and by all means to avoid tampering with physic to relieve agitation of mind, or derangement of body'.[109]

Meanwhile, foreign vessels continued to arrive in Newfoundland, in need of relief or rescue, throughout the fall months. On 7 September 1854, The *City of Philadelphia*, bound for Philadelphia from Liverpool, went aground at Cape Race in deep fog, and was wrecked at Chance Cove, with 540 passengers and £60 000 worth of cargo aboard.[110] There were no fatalities, and by 12 September half of the passengers had been transported to St. John's via the *Victoria,* a steamer owned by the Newfoundland and London Electric Telegraph Company.[111] In a letter to the editor of the *Newfoundlander*, 'Mercator' criticised the dangers on the south coast of the island to steamers who 'always shave it to closely in the anxiety to avoid a *detour* by which a loss of time might be occasioned'.[112] The writer urged vessels navigating the route from Britain to the United States to use St. John's more regularly as a port of call,

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[108] 1 September 1854, *Public Ledger*, 2. PANL.
[109] Ibid.
[110] On 27 September, the U.S steamship, the *Arctic*, was also wrecked near Cape Race after a collision with a French steamer, *Vesta*. Hamilton wrote in distress to Lord Grey upon finding out that the *Newfoundlander*, to his 'extreme surprise and indignation', managed to get hold of his proceedings over the collision, and published them. At a time when Newfoundland was seeking responsible government, Hamilton felt the need to explain his writing, the logistics of how the 400 passengers had been rescued, and his anger with the *Newfoundlander*: Although the word 'omit' is written next to this statement, Hamilton states that '…my proceedings which – although characterised by violent personal feeling, and by inconsistency with itself, and remarkable for scandalous misrepresentation and untruth, will probably, in consequence of the deep interest which this melancholy catastrophe will excite, receive a general currency and create abroad very false impressions of the local government'. For more information on the predicament of the *Arctic* and the administrative plight it posed on the Newfoundland government, see CO 194/142. 10 October 1854, from Hamilton to Grey. TNA.
[111] 12 September 1854, *Newfoundlander*, 2. PANL.
[112] Ibid. On 24 October, the *Raritan* from London, bound for New Brunswick, had reportedly collided with another vessel in fog on the Grand Banks, and came into St. John's in a 'wrecked condition'. It reported that two men had to be carried off the boat in St. John's due to exhaustion. See the 24 October 1854, *Newfoundlander*, 2. PANL.

instead of testing their luck navigating the south coast in dangerous weather conditions. Although Newfoundland had already planned precautionary measures against cholera that summer, the financial strain and logistical mayhem caused by the arrival of foreign vessels in distress, events which occurred outside the control of government, stimulated immediate action in the colony that fall.

Although Chapter Five reveals that cholera had come into Saint John onboard the *Blanche* at the end of April 1854, by July, public newspapers continued to deny its existence. A statement from Saint John's *Morning News* was re-printed in the *Newfoundlander* on 31 July 1854, rejecting the notion of an outbreak of cholera in Saint John. It states:

> It is exceedingly mischievous in persons to circulate unfounded rumours of this nature…The city of S[ain]t John, from its exalted position, and the very great rise and fall of the tide, which agitates the atmosphere in and around it, twice in twenty-four hours, to the height of twenty-five to thirty feet, can never be a severe sufferer by that awful scourge of other countries.[113]

Three weeks later, on 22 August, the *Public Ledger*, in only a few words, announced the appearance of cholera in Saint John, stating that there were upwards of 40 cases per day, '…confined chiefly to filthy localities'.[114]

Conflicting reports on the status of cholera in nearby British North American colonies was not uncommon. The countless pressures to maintain a disease-free port meant that many towns, during the pinnacle of a cholera outbreak, remained silent, with residents left in the dark as to the concrete facts and important details of the apparent outbreak. As cholera lessened in New Brunswick by September 1854, the

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[113] 31 July 1854, *Newfoundlander*, 2. PANL. There are variations, at times, in the spelling of Saint John and St. John's. In this case, although the article spells Saint John as 'St. Johns', the tide it refers to is that of the Saint John River. For clarity purposes, I have corrected the spelling in the text with the use of parenthesis.

[114] 22 August 1854, *Public Ledger*, 2. PANL.

temptation to keep quiet in the face of cholera was finally felt in St. John's that October.

The Arrival of Cholera in St. John's – August 1854

Just as news of cholera abating in other areas of North America was being printed in the St. John's newspapers at the end of August, the *Express of Saturday* reported that the *Walter Baine* was in quarantine in St. John's after it had arrived from Greenock with one dead seaman. Although the piece assured readers that there had been no sickness since, it revealed that there have been three to four deaths from 'English cholera' at Tarrahan's town, a working class area of St. John's, with 'consequently some little anxiety about the town; but we believe there is no reason for alarm'.[115] Since 1832, declared bouts of 'English cholera' were typically followed by an attempt to reassure the community that this kind of cholera was common for the season.[116] Edward Morris, Manager of the Newfoundland Savings Bank, mentions the *Walter Baine* in his diary on 25 August, claiming that the seaman died of cholera, and that two women had also perished from the disease in town. He states that the 'apprehensions… of cholera in this town have been justified', but that the doctors are terming the disease English cholera '…of an aggravated type'.[117]

Throughout September, the newspapers were erratic in their reports and commentaries on disease transmission and the general state of health in St. John's. On 1 September, the *Public Ledger* declared that reports of cholera in other colonies were '…causing some little uneasiness in this town'.[118] The paper claimed, however, that it had consulted two medical men who believed there was no need for alarm, as the

[115] 29 August 1854, *Public Ledger*, 2. PANL.
[116] 22 August 1854, *Public Ledger*, 2. PANL.
[117] 'Edward Morris's Diary', 25 August 1854, AAD. Morris also states that a ship had also arrived from Liverpool recently with smallpox.
[118] 1 September 1854, *Public Ledger*, 2. PANL.

'…general health of the population of this town was never better than it is at the moment'.[119] A week later, on the other hand, criticisms over the poor state of certain areas in St. John's appeared in the *Public Ledger.* Residents are taken to task for '…remain[ing] utterly indifferent to the dangers to which they are exposed, until the presence of some general calamity, some epidemic of a virulent and fatal type in a neighbouring province, begins to excite their apprehensions'.[120] The commentary accuses the town of neglect and inconstancy when it came to preparing for an epidemic, claiming that the community should feel 'indebted' to cholera as its threat has forced the town to improve sanitation – in stark contrast to the insalubrious state of St. John's only months prior. Blame is placed not only on the 'unconcerned' working class, but also on the House of Assembly, whose members were apparently more entrenched in 'indulg[ing] their *cacoethes loquendi* in party bickerings' then in improving the health and prosperity of residents in town.[121]

Reports in St. John's newspapers were vague about the presence of cholera but emotionally charged concerning the town's vulnerability. Without official reports or confirmation of cholera in the papers until late October, personal remarks, such as those in Morris' diary, provide some insight into how the community may have been reacting to the danger. On 26 August, Morris writes that he encountered Mr. Robert Carter, the Colonial Treasurer, who out of fear of contagion, was 'avoid[ing] the confinement of his office and continued walking to and fro upon the steps of the Colonial building with terror in his terrible visage'.[122] Morris records that he tried to

[119] Ibid.
[120] 8 September 1854, *Public Ledger*, 2. PANL.
[121] Ibid.
[122] Apparently Carter had also procured an 'antidote' for cholera from Miss Perchard, the librarian at the legislative library, consisting primarily of brandy and ginger, which he was carrying around with him. 'Edward Morris's Diary', 26 August 1854, AAD.

reassure Carter by stating that he hadn't heard of a case occurring that day, to which he 'laughed astronomically and said solemnly "the town is full of it"'.[123]

Morris' writing reveals the anxiety and paranoia undoubtedly felt by locals in the absence of any official acknowledgement of cholera in the town. In late August, he states that the disease is spreading, with five people dead from cholera in the same house; however, on 9 September, he doubts statements made by doctors concerning two more victims of cholera, claiming them to be based on 'slight evidence adduced by some of the doctors to show the necessity of their continued retention in the service and pay of the Government'.[124] By 26 September, he admits that because of the ongoing news of cholera around town, 'although not alarmed', he has taken out a life insurance policy to ensure the protection of his wife and father.[125]

Tension and anxiety ran high in and around St. John's, fuelled by the lack of official public information available to residents. In an entry on 13 October, Morris notes 'cases of cholera still reported – two today – but it is hard to discover the truth of the extent of the disease'.[126] In many cases, Morris' comments state that 'from the talk of the town', he has heard of deaths from cholera. This information seemed to come from friends, colleagues and other residents he spoke with on his walk to and from work, rather than from any reliable source.[127] By 22 October, he comments that cholera has 'assumed a very alarming character…raging irrespective of locality or class'.[128] Although quarantine regulations were published widely that summer,

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[123] Ibid.
[124] 'Edward Morris's Diary', 9 September 1854, AAD. Morris claims he knew one of the 'victims' - a neighbour of his and someone who had worked for him last year on his farm. He states that she had apparently died of a fainting fit instead, 'to which she was subject and of which, she used to say herself that she would sooner or later die'.
[125] 'Edward Morris's Diary', 26 September 1854, AAD.
[126] 'Edward Morris's Diary', 13 October 1854, AAD.
[127] 'Edward Morris's Diary', 26 September 1854, AAD.
[128] Morris claims that the wife of Mr. R J Parsons, Esq, a distinguished man who lives on the Military Road, an 'airy' area of town, was dying of cholera. He states forty-seven victims were prayed for at

publically acknowledged cases were few and far between, while official death tolls were non-existent.

Official communication between government and the Board of Health reveals a lack of administrative control over the management of cholera in St. John's, particularly when it came to the poorer, working-class neighbourhoods. On 2 September, Crowdy wrote to the Board of Health, stating that alarm has been raised in the outports over 'great exaggeration as to the sanitary condition of this town…leading to an injurious interference with the operations of commerce'.[129] Crowdy then wrote to Conception Bay, Bonavista, Trinity, Greenspond, Fogo and Twillingate, assuring these communities that the poor health of St. John's had been blown out of proportion, and that according to the Board of Health, the town was 'healthy and entirely free from any epidemic'.[130] On 19 September, the Board of Health, on the approval of the Government, suspended its duties as a result of health improvements in St. John's; however, by mid-October, the board was reinstated when Tarrahan's Town was declared infected with cholera.[131] By 7 November, the Board of Health was relieved again of its work because of costs, Crowdy stating that Governor Hamilton 'does not feel justified in giving permanency to the expense attending …

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mass who had died from cholera over the course of that week. 'Edward Morris's Diary', 22 October 1854, AAD.

[129] GN 2/1 – *Colonial Secretary's Office – Outgoing Correspondence*. 2 September 1854. To the Chairman of the Board of Health, from Crowdy. PANL.

[130] GN 2/1. 4 September 1854. To Magistrates at Conception Bay, Bonavista, Trinity, Greenspond, Fogo and Twillingate, from Crowdy. PANL; Crowdy had also written to Magistrates at Greenspond claiming that he did not think it necessary for them to appoint a board of health (presumably they wrote to him asking whether they should have an official board), stating that the sickness in St. John's was to 'a very limited extent, and for a very brief period', and has since left. See GN 2/1. 4 September 1854. To Magistrates at Greenspond. PANL.

[131] GN 2/1. 19 September 1854. To the Chairman of the Board of Health, from Crowdy. PANL; The Board of Health was asked by Government to appoint four medical men, used exclusively to tend to cholera cases in St. John's, 'with a view to the reassurance and comforts of the people, that you will give publically to those appointments and their object' GN 2/1. 7 October 1854. To the Chairman of the Board of Health, from Crowdy. PANL; Tarrahan's Town had a number of troubling events occur during this time, most notably a horrific fire in November 1855, with over 200 houses burned to the ground, 'We cannot therefore reckon under four hundred families burned out, all of the operative, many of the poorer classes, the greater number of whom lost much of their furniture'. 5 November 1855, *New York Daily Tribune*, 5.

the services of so numerous a body of professional gentlemen'.[132] Four days later, however, the Board was quickly reconstituted yet again, it having become clear '… that it was generally desired that there should be a Board of Health here', this perspective likely the result of protests from officials in town. A board of health was also appointed on the south shore of Trinity Bay.[133]

The lack of cohesion amongst government, board of health, and public initiatives, complicated by the cost of sanitary measures, the variability of reported cholera cases, and the overall fragility of the economy, did not go unnoticed by residents and emigrants. On 31 October, after over two months of official silence on the extent of local infection, a letter to the editor in the *Newfoundlander*, published as well in the *Public Ledger*, argued: 'high time is it, then for an honest statement to appear from day to day, giving the actual mortality at present, as well as that of former years, that men elsewhere as here, may be in a position to draw their own conclusions'.[134] Inclined to dismiss reports of infection in town, the writer nevertheless observes that word in the outports is that residents of St. John's are '…dropping down dead in the streets and such numbers dying that coffins could not be procured to cover, nor men to bury their bodies'.[135] Governor Hamilton appeared to consider the economy his chief concern, but the letter claims that fisherman bound for St. John's, hearing of the state of health in the city, sold their fish outside the harbour and went home. The writer pleads for officials to communicate with the populace, suggesting specifically that the Board of Health, 'may think it their duty to

[132] GN 2/1. 7 November 1854. To Board of Health, from Crowdy. PANL. At a council meeting on 9 November, it was stated that because of the costly nature of the Board of Health and health wardens, the Governor will discontinue their operations in town, and will 'vest in the Magistrates the powers which had heretofore been exercised by these Boards'. GN 9/1. 9 November 1854. 'At a Council held this day present'. PANL.
[133] GN 9/1. 11 November 1854. 'At a Council held this day present'. PANL.
[134] 31 October 1854, *Newfoundlander*, 2; 31 October 1854, *Public Ledger*, 2. CNS.
[135] 31 October 1854, *Newfoundlander*, 2. CNS.

officially disabuse as to the truth of the extravagant rumours thus for sinister purposes set afloat'.[136]

It was apparent that silence could also cause financial and economic harm to the colony. Without straightforward communication on cholera by officials in St. John's, rumour, apprehension and unrest ruled the day. On 20 October, word that the Board of Health was requesting the use of the 'Factory' as a cholera hospital was made public in the *Public Ledger* and the *Newfoundlander*.[137] In a letter to the editor, the 'Sanator' argued that the Factory was 'wholly unsuitable for a Hospital, both from the nature of the building itself and its site and locality'.[138] The main criticism was its location, with the letter stating:

> If Cholera is infectious, - (and the best opinion seems to be that it is, black flags and other tokens of warning or prohibition against passing through them, having been displayed in infected districts and streets in London,) – then, the position of the Factory condemns its selection as a place for a Cholera Hospital. It is in the immediate neighbourhood of four places of worship, three public schools, and immediately under a Barrack, occupied by a considerable number of troops.[139]

Such letters reveal the stress felt by residents, who, lacking transparency by government or the Board of Health in the midst of a cholera outbreak, began to voice their concerns over measures decided upon without public discussion.

Support for the poorer areas of town, which were heavily afflicted by cholera cases, came from clergymen and missionaries in St. John's. Reports for the Society for the Propagation of the Gospel describe a dire situation: 'It will be most painful to recount the scenes which we are called to witness – I scarcely think that the

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[136] 31 October 1854, *Newfoundlander*, 2. CNS.
[137] GN 2/1. 19 October 1854. To The Secretary of the Factory Committee, from Crowdy. PANL.
[138] 20 October 1854, *Newfoundlander*, 2. PANL.
[139] The letter also claims that the military had put an end to the construction of 'sheds' being used as a cholera hospital so close to their headquarters at Fort Townshend, apparently a much greater distance than that of the Factory to large residential neighbourhoods. 20 October 1854, *Newfoundlander*, 2. PANL; For a source on the objection of the Commandant of the Garrison, see GN 2/1. 14 October 1854. To the Board of Health, from Crowdy. PANL.

wretchedness of them can be exceeded…the poorest of the population were for the most part those who were attacked…the progress of the malady was fearfully rapid – death ensuing in 10 or 12 hours after the first symptoms showed themselves'.[140] The work accomplished by clergy and church volunteers in relieving the sick, and burying the dead, are acknowledged in the quarterly report, noting that the bishop himself was known to have 'pour[ed] nourishing "drink" into the mouth of the poor acquiesced patient, in a town or house, where filth and offensive odour proclaimed the very hot bed of pestilence'.[141] Morris' diary refers similarly to Catholic clergy visiting the poorer residents afflicted with cholera, mentioning that the priests had upwards of 20 calls on 2 November, assuming that many other cases '…must have occurred amongst the Protestant inhabitants'.[142]



Figure 3.3. 'Sketch…showing the Sisters of Mercy caring for the victims of the cholera epidemic of 1856' in Kathrine E. Bellamy's *Weavers of Tapestry* (St. John's, 2006), 472.[143]

[140] SPG Quarterly Reports. 1 January 1855. PANL.
[141] SPG Quarterly Reports. 1 January 1855. PANL.
[142] 'Edward Morris's Diary', 2 November 1854. AAD. D.W. Prowse also acknowledges the 'human exertion of the clergy and of self-devoted women', singling out Bishop Mullock and Field, as well as Archdeacon Bridge, in aiding the poor with 'their heroic, self-sacrificing labours for all' during the cholera outbreak. For more information see: Prowse, *A History of Newfoundland*, 469.
[143] Bellamy claims this sketch was by 'Willie Brandts'. I have been in contact with Dr. John FitzGerald, in the Office of Protocol, Cabinet Secretariat, for the Provincial Government of Newfoundland, however, who believes Wally Brants, a Latvian painter who moved to St. John's in

By the end of December, cases of cholera had fallen off, and on 17 January 1855 the Directors of the St. John's Hospital reported that 212 patients were admitted and 88 died at the hospital between October and December 1854. The height of the outbreak was in November, when 108 patients were admitted to hospital. Although deaths were 42 per cent of admissions, patients typically arrived at the hospital '…in the last stage of the disease, some dying in a few hours, and several in a few moments after their admission'.[144] The hospital report, which was also published in the *Public Ledger*, recommends that along with a proper sewage system, a new hospital be erected at an estimated cost of £4000.[145]

The likelihood that the figures given by the St. John's Hospital may underestimate the outbreak is evident from the July 1855 report of Samuel Carson, the district Surgeon of St. John's. Acknowledging that cholera had been 'raging in this town' the previous year, Carson declined to provide official figures on the devastation, as there were 'a considerable number [of cholera cases], though occurring among the poorer classes, [that] did not come under the cognizance of the District Surgeon'.[146] He referred to 219 patients in the sheds that year, claiming that most of them were residents infected by cholera who were removed from their homes to the sheds over the winter months. Carson stated that cholera occurred mainly amongst the poor, and that his report

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1955, was the artist. FitzGerald claims Brants was likely commissioned by the CBC's Paul O'Neill sometime between 1970 and 1984 to draw this sketch as part of a history on the Roman Catholic Church in St. John's. FitzGerald is close to Paul O'Neill, who apparently owns a number of Brants' paintings. Also - there was no cholera in St. John's in 1856, therefore the date is incorrect, and is likely referring to the outbreak of 1854. This sketch is also found, without any reference, in O'Neill book, *The Oldest City: The Story of St. John's, Newfoundland* (Portugal Cove/St. Philip's, 2003), 232.

[144] 'Report of the Directors of the St. John's Hospital, with Account Current' 17 January 1855. *JHA* (1855). PANL.

[145] 2 February 1855, *Public Ledger*, 2. CNS.

[146] 5 July 1855. 'Report of the District Surgeon, St. John's, for the year Ending 1st July, 1855'. *JHA* (1855). PANL.

> …includes only such cases as have been attended on orders for medical relief, from the Commissioners of Poor or other authorised persons, these orders being frequently the only record that could be kept of the attendance. In addition to these, the permanent Poor are attended at all times without an order, and numerous cases, of whom no return is kept, especially from the neighbouring outports, daily receive medical relief.[147]

Among the suggestions Carson gives for the improvement of health services in the town is the establishment of a permanent board of health. He concluded by stating 'I…only beg to remind the Government how far more effectual and economic all such measures are, when adopted in the way of prevention, than when undertaken in the midst of the panic and difficulties created by a deadly epidemic'.[148]

Popular estimates suggested cholera mortality rates were much higher than official reports indicated. On 24 October, Morris wrote that word in the city was that 200 had died and 300 had recovered from cholera in St. John's.[149] Three weeks later, he stated 'it [has been] said' that five hundred residents had perished. This, it turns out, was the same number quoted by Hamilton to Lord Russell when reporting the overall mortality in St. John's from the epidemic, stating that 'cholera suddenly appeared in St. John's, and after two or three fatal cases, and then an intermission of six weeks, the disease swept over the town, carrying off in its ravages upwards of 500 persons, out of a population of 21 000. Mercifully, the disease did not extend to the outports…'.[150] By 31 December, no further cases of cholera were identified in the St. John's Hospital, and by mid-January, the *Public Ledger* wrote that there was discussion over a memorial to be constructed in town, stating that if it occurs '…it should be as extensively known as the dread disease itself. It was no respecter of

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[147] Ibid.
[148] Ibid.
[149] 'Edward Morris's Diary', 24 October 1854, AAD.
[150] 'Edward Morris's Diary', 10 November 1854, AAD; BPP. Colonies. General. Vol.8. 26 April 1855. Despatch from Hamilton to Russell.

persons, whether as to class or creed, and we think the erection of the proposed memorial should be unrestricted also'.[151]

Even though government documents suggest a lack of statistical information on cholera causalities resulting from an overwhelming number of patients from poorer areas, many of whom had slipped under their radar, the idea that all of society was vulnerable was promulgated in the newspapers, particularly once the epidemic passed. On 25 January, the *Public Ledger* mentioned that instead of a memorial, it was decided to erect an asylum, with £400 already in subscriptions, inviting all who are able to contribute, asserting: 'All are intimately associated, more or less, with the history of the destroyer, all must therefore feel thankful to Almighty God for its removal'.[152] Throughout his diary entries, Morris refers to residents whom he knew who were infected with cholera, including James Cullen, 'an old and respectable resident [who] died today having been attacked last night late. People very anxious and with good cause very much alarmed'.[153] Morris also mentions Mr. Cusack, who lived through a bout of cholera in early November. On 26 November, Morris attended a party at the Cusacks, finding Mr Cusack looking 'very well and in the best of spirits and quite astonished at himself for standing out the assault'. He described the celebration as being a 'very fine night and all the party feeling rather soft after the good wine which Cusack gave us'.[154]

In a commentary made on the initiation of the Quarantine Act in 1833, government acknowledged that 'the trade of this colony from its peculiar nature will require the enforcement of quarantine regulations so long as cholera shall exist in any

[151] 16 January 1855, *Public Ledger*, 2. PANL.
[152] 25 January 1855, *Public Ledger*, 2. PANL.
[153] 'Edward Morris's Diary', 11 November 1854, AAD.
[154] 'Edward Morris's Diary', 1 November 1854, AAD; 'Edward Morris's Diary', 26 November 1854, AAD.

country with which it has communication'.[155] 20 years later Newfoundland's over-dependence on its international trade in the fisheries emphasised the colony's continued vulnerability to transmittable disease. Over this period, Newfoundland's geographic location often made it a pre-screening area for the rest of North America, as vessels on transatlantic crossings arrived in Newfoundland seeking relief from various circumstances, including shipwreck, dwindling provisions and disease.

By mid-century, shoring up the political and economic stature of the colony was the overriding focus of the Newfoundland government, as it sought greater autonomy from Britain and political parity with the rest of British North America. In his report to Lord Russell in 1855, Hamilton remarks:

> In the history of Newfoundland the year 1854 will be considered the most important it has witnessed since its settlement, nearly four centuries ago, as being the year in which the system of government in force in the other North American colonies was, after long-continued agitation, introduced into this oldest dependency of the Crown.[156]

The fragility of the economy and the fledgling nature of the political institutions and political culture of Newfoundland threatened this project. The cholera outbreak came at a particularly bad time, and it is perhaps not surprising that beleaguered officials were reluctant to acknowledge the crisis when it emerged. Although cholera was confirmed in St. John's at the end of August 1854, remarks by Edward D'Alton to Governor Hamilton, in a Council Chambers speech in mid-October suggest otherwise, as he declares, 'We join Your Excellency in gratefully acknowledging that mercy which for so long a time has been providentially extended to us – in preserving us from those severe visitations of sickness which have spread over so many other parts of the world; and at the same time we beg to express not only our readiness, but our

[155] CO 194/88. 1833 Blue Book Commentary. TNA.
[156] BPP. Colonies. General. Vol.8. 26 April 1855. Despatch from Hamilton to Russell.

solicitude to join in perfecting such measures as have for their end the preservation of the public health'.[157] Whether D'alton was unaware of the outbreaks amongst the poor in August, or was content to participate in the conspiracy of silence, by the end of October there was no denying that cholera was ravaging the colony.

No doubt Governor Hamilton and others wanted to ensure that Newfoundland looked strong, and that the implementation of responsible government occurred without any setbacks. As was the case in 1832, highly sought after political change seemed to happen in Newfoundland at just the moment when the threat of global cholera epidemics emerged. Although St. John's strove to bring its quarantine regulations and sanitary protocols on par with the rest of the North American colonies by 1834, 20 years later the government officials and administrators mishandled the cholera outbreak of 1854, and not only in their reluctance to communicate with the public. As Carson rightfully points out in his hospital report to the new Liberal Government the following year, preventative measures and sanitary improvements did not occur until cholera was found St. John's, and by then it was too late. In January 1855, typhoid was the new cause for worry, with Carson describing that its infection '…has continued more or less since the cessation of the cholera, but is now hardly so general as to be considered epidemic – an English cholera, of which there have been several rather severe cases'.[158]

While government officials were preoccupied with the colony's reputation, economy and incipient autonomy, citizens of the colony, in particular residents of St. John's, displayed a more practical concern in clamouring for permanent measures to ensure protection against transmittable disease. As a writer in the *Public Ledger* put it: 'A reasonable outlay from the public purse for so important public service must

[157] CO 194/142. 13 October 1854. 'Council Chamber Speech', TNA.
[158] 'Report of the District Surgeon, St. John's, for the year ending 1 July 1855', *JHA* (1855). PANL.

command the entire concurrence of every reasonable man'.[159] While anxiety and fear ran high throughout society, residents sought information where they could, typically from emigrants with cholera experience, or through lessons learned by other North American colonies coping with disease. With or without the help of government, citizens searched for answers wherever they could, and communicated their concerns and criticisms forcefully to their political 'betters', who in many ways lagged behind them.

[159] 21 July 1854, *Public Ledger*, 2. PANL.

Chapter Four

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Halifax, Nova Scotia: A Case Study

Halifax, the second case study to be presented in detail in this dissertation, was originally founded as a British military settlement in 1749. Situated on the southern shore of Nova Scotia, the city provides direct access to ships as they approach the coast of North America. The large size and depth of its harbour, as well as the town's close proximity to major American ports on the eastern seaboard, such as New York and Boston, made Halifax an important point of entry for overseas shipping, particularly those vessels destined for or departing from the United States and the Caribbean.[1]

By the beginning of the nineteenth century, Nova Scotia was organized under a township and county system, with smaller ports located in areas such as Pictou and Liverpool, on the mainland of the colony, and in Sydney, on the north-western tip of Cape Breton Island.[2] As early as 1792 a naval hospital was constructed in Halifax, servicing sick and disabled seamen in need of medicine, treatment or burials.[3] Ships from England continued to arrive at the Halifax Naval Hospital into the 1820s, with an array of patients seeking relief from conditions such as diarrhoea, dysentery, pneumonia, chronic hepatitis and chronic rheumatism.[4]

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[1] S. Morley Wickett, *Municipal Government in Canada* (Toronto, 1907), 230.
[2] Wickett, 238.
[3] ADM 102/266. 28 June – 7 October 1796.'An Account of the Names and Numbers of such Sick and Wounded Seamen and Others, as have been Received on Shore from His Majesty's Ship *Dover* and Quartered at this Port…', by John Halliburton, Surgeon. TNA. In this instance, the account came to £169.8s.0d. for tending to the sick and finding appropriate funeral arrangements for the dead onboard the *Dover*.
[4] ADM 102/266. 8 June 1827. 'An Account of Sick Officers daily victualled at sick quarters in the Naval Hospital at Halifax in the months of April, May and June 1827', TNA.

Surgeries, including amputations, were performed by the naval surgeon at the hospital when necessary.[5]



Figure 4.1. Map of Nova Scotia and New Brunswick. *Gilbert's Modern Atlas of the Earth* (London, 1848).

In September 1827, the brig *James*, destined for Quebec, entered Halifax harbour from St. John's, Newfoundland with 120 passengers '…of the most wretched description'. The emigrant vessel originally left Waterford with 160 passengers but was forced to stop in St. John's after five passengers died at sea from typhus fever.[6] The other thirty-five passengers were left in Newfoundland while the Master of the *James* chose to carry on to Quebec. Once the vessel left Newfoundland, typhus fever broke out again, forcing the ship to land in Halifax. In a letter to Goderich, James Kempt, Lieutenant Governor of Nova Scotia, stated that all passengers, including the crew, were infected with typhus fever, blaming the 'scanty nourishment during the voyage by the crowded and filthy state of the ship and by a

[5] ADM 102/266. 11 June 1829. Mr T.R Eden, from His Majesty's Ship the *Hussar*. 'Amputated Arm and Other Wounds', TNA.
[6] CO 217/147. 7 September 1827. To Goderich, from Kempt. TNA.

want of medical assistance', later remarking, 'I wish that this were the only case of a like nature that I could adduce'.[7] According to Captain W.S. Moorsom, in his *Letters from Nova Scotia: Comprising Sketches of a Young Country*, the population of Nova Scotia that year was over 143 000.[8] Although both population growth through natural causes and economic development had been steady, immigration would transform the future of the colony. Some of this was negative. With the rise in immigration and trade came a rise in the threat of epidemic disease from its trading ports in Europe and the United States.

Kempt was definite in his criticisms of Irish ships and of the recent appeal in Parliament of the Act 'for regulating vessels carrying passengers", recounting that five other ships had arrived over the summer months, overpopulated and sick, forcing him to create a hospital, 'expressly for the reception of these poor emigrants'.[9] He states that several Halifax residents had already developed symptoms of 'fever', expressing his overall concern for the health of the town. By November, it was clear why Kempt was so worried. The death toll in Halifax amounted to over 800 out of a population of 11 000, largely as a result of the typhus fever outbreak.[10]

The threat of transmittable disease forced Halifax, and other smaller Nova Scotian ports, to create measures to accommodate a disembarkation of emigrants carrying potentially infectious diseases, in an attempt to protect the well-being of the

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[7] Ibid.
[8] William S. Moorsom, *Letters from Nova Scotia, Comprising Sketches of a Young Country* (London, 1830), 71.
[9] CO 217/147. 7 September 1827. To Goderich, from Kempt. TNA. Kempt quotes the Act of Parliament officially as the '17th Section of the 6th Geo: 4 Cap: 117'.
[10] CO 217/147. 25 November 1827. To Huskisson, from Kempt. TNA. Moorsom also recounts this episode in his pamphlet *Letters from Nova Scotia*, claiming that it was an unoccupied farm on the coast of Halifax that was turned into a lazaretto for the emigrants. He remarks: 'That the system of emigration should be left open to such abuse, is a reflection that calls for a revision of the Imperial Code by which that system is regulated'.

resident settlers as well as the new arrivals. Although Kempt stated in November 1827 that the health of the town had improved, and that the emigrant hospital was no longer needed, he used the typhus outbreak to accentuate the need for consistency and regulation regarding emigrant ships, ideally in the form of Parliamentary Acts. In November, a report from the Committee of His Majesty's Council in Nova Scotia bluntly stated the inevitable struggles that would arise without proper regulatory measures at the port of origin:

> Under these circumstances disease is inevitable, and the wretched beings are not only thrown on shore in a state which renders them incapable of procuring their own subsistence, but they carry infection among those who may charitably receive them. – The law which restrained these evils is no longer in force in Great Britain, and we have no legislative enactment there to prevent the recurrence of the calamity which we have endured this year, or to punish the authors of it. The United States on the contrary have most wholesome regulations upon this subject, and while this state of things continues, it is obvious that the refuse only of the superabundant population at home will come to us, while all the valuable and useful emigrants will embark for the United States. No decent person who has the means of procuring a comfortable passage for himself or family will venture on board one of these receptacles for filth and disease; He will seek for accommodation in some American vessel which will convey him to the United States, where he will be lost to his country forever, while we shall be overwhelmed with as many ignorant paupers as the artful and unprincipled men who carry on this traffic can delude.[11]

The committee understood that without the proper regulation of emigrant ships, policies and protocols in Nova Scotia had to be devised independently, as illnesses and fatalities arose, requiring enhanced authority, control and communication at the official, or in most instances unofficial, port of destination.

This chapter presents a case study of cholera outbreaks in Halifax, Nova Scotia, revealing the transatlantic communication between this growing port town,

[11] CO 217/147. 20 November 1827. Report from 'The Committee of His Majesty's Council appointed to examine the Accounts rendered for the expenses of the Hospital established at Bankhead for the reception and relief of the sick among the unfortunate emigrants who arrive during the season from Ireland'. Signed by James Stewart, Brenton Halliburton and S.B Robie. TNA.

the colonial office in London, and its sister British ports, under the influence of the disease between 1832 and 1866. Like St. John's, Halifax escaped the first wave of cholera that came to British North America in 1832, the disease not appearing in the city until two years later. Nevertheless, the impact of cholera on a vulnerable and growing population in Halifax would pose an immediate threat to Nova Scotia's development and prosperity.

This chapter is divided into two main sections: the cholera threats and outbreaks in Halifax in 1832-1834, and the cholera outbreak at the quarantine station on McNabs Island, in Halifax Harbour, in 1866. In 1832, the city prepared assiduously for a cholera epidemic that never came. Two years later, it was forced to brace itself again for the potential threat of cholera, and this time preparations were not in vain. Just over three decades later, and one year before Canadian Confederation in 1867, cholera would appear once again in Halifax Harbour. The way in which the town prepared for the return of this scourge, throughout the various stages of its development between 1832-1866, reveals not only its capabilities of managing a disease outbreak, but also highlights the evolution of Nova Scotia's complex, dependant and at times strained relationship with Britain.

Halifax & Cholera: 1832-1834

Halifax in 1832

Much like St. John's and Saint John, tides of emigration crept up on officials in Nova Scotia, who were aware that, at least on paper, the majority of emigrant ships bound for British North America were destined for Quebec, in Lower Canada. *The Emigrant's Pocket Companion* characterises Nova Scotia as follows:

> There are many other commodious towns and harbours in Nova Scotia; there is also an abundant supply of coal, iron-stone, and

> building and grit stones; but from the circumstances that has been already stated, as well as from its almost insular situation, it is not the best possible country for emigrants; and altogether its characters are commercial rather than agricultural – better adapted for speculating capitalists than for simple settlers.[12]

Nevertheless, unexpected emigrant ships continued to arrive, with U.K emigrants and Nova Scotia residents well aware that in many cases Halifax was not the chosen destination.

In his pamphlet of observations on Nova Scotia, Moorsom remarked that by the late 1830s, many Irish emigrants in Halifax were idle, destitute and without property.[13] Unlike Lower Canada, and to a lesser extent New Brunswick, little preparation was made for a large influx of emigrants in Nova Scotia. While three emigrant agents were appointed to ports in New Brunswick by 1834, no emigrant agents were operating out of Nova Scotia. The persistent arrival of unexpected ships, however, meant that by 1832, towns such as Halifax had developed their own experience when it came to caring for the health and well-being of newly arrived emigrants from England and Ireland.

In response to the threat of cholera in Europe in 1831-32, the government of Nova Scotia created a comprehensive board of health system. It comprised a Central Board of Health located in Halifax, and several local boards of health scattered throughout the colony, in the areas of Pictou, Sydney, Arichat, Hants County, Kings County, Annapolis, Digby, Liverpool, Lunenburg and Yarmouth.[14] Other areas that required surveillance, but which were not allocated a board, were provided with appointed medical officers.

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[12] Robert Mudie, *The Emigrant's Pocket Companion; Containing, What Emigration is, Who Should be Emigrants, Where Emigrants Should Go,; A Description of British North America; Especially The Canadas; and Fully Instructions to Intending Emigrants* (London, 1832), 14. BLACS.
[13] Moorsom, *Letters from Nova Scotia*., 73.
[14] RG 25 - *Public Health and Welfare Records*. 'Chart of Expenses under the new Quarantine Laws passed in the Last Session, 19 February 1833 Appendix No.3'. NSARM.

Halifax had witnessed the effects of other transmittable and fatal diseases arriving onboard transatlantic ships after a long voyage, making the government and its residents aware of the town's potential exposure to infection. In the spring of 1832, port towns throughout Nova Scotia drew up measures for the possible arrival of cholera. One example is Arichat, a small town on the south coast of the colony, which was used to regular traffic of coastal vessels from Pictou and Canso, within Nova Scotia, and from other ports in New Brunswick, Prince Edward Island and Newfoundland. Because of these multiple points of contact with the outside world, the town was eager to promote quarantine and establish stringent rules for vessels arriving in port.[15] Five men were hired to guard the entrances of the port of Arichat from 29 June – 4 September 1832, inquiries were made into the way in which the cleansing of foreign vessels was conducted in Quebec and Montreal, and a quarantine ground was acquired. The Arichat Board of Health also purchased boats whose purpose was to guard the two entrances to the harbour and to approach and investigate incoming vessels.[16]

In Halifax, the public was informed on the progress of cholera in Lower Canada, Upper Canada, Europe, and the United States through publications in the *Acadian Recorder*, *The Novascotian*, and the *Royal Gazette*, three main newspapers in the colony.[17] On 17 April 1832, Lieutenant Governor Maitland, drew up Quarantine regulations, based largely on two new Acts passed by the General

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[15] RG 25. 26 September 1832. 'Arichat Quarantine 1832', from Mr. Clement Hubert. NSARM. These records are stated within the collection under figures and sums spent by the Committee, presented to the Central Board of Health in Halifax. In Hubert's letter, he explains that although passengers on coastal ships were not necessarily coming from an infected port, they were to all be inspected. He reasons by explaining that many ships could easily communicate and interact with other vessels in the Gut of Canso, 'as that place is a complete thoroughfare for vessels from all parts'.

[16] Ibid.

[17] CO 217/156. 17 April 1832. 'At a Council, Held at Halifax, by His Excellency Sir Peregrine Maitland, Lieutenant Governor', TNA. Maitland stated that the *Royal Gazette* would be the newspaper that would publish all government updates relating to infectious and contagious disease.

Assembly on the spreading of infectious disease and implementation of quarantine in the colony.[18] A Mr. Watson and Mr. Miller were appointed as Superintendants of Quarantine in Halifax, and later commended for their 'equally zealous and unremitting attention to the very severe duties of the office…at much personal risk and exposure especially at the commencement and close of the season'.[19] With cholera already existing in Lower Canada, and Halifax being a gateway for ports in British North America and the United States, the government strove to ensure that all necessary protocols were made to contain cholera, if necessary, and ideally avoid it.

Throughout the summer of 1832, official protocols and heightened quarantine measures were introduced in Halifax, and in ports around Nova Scotia. Once cholera was reported on the North American continent, however, Haligonians anxiously questioned the extent to which quarantine was properly conducted in town. On 27 June 1832, *The Novascotian* published an opinion piece claiming:

> It has been stated that there is less effective Quarantine at present in our harbour, with all the noise which has been made concerning it, than had previously existed for several years back; and that the Health Officer takes no pains whatever, unless going through the form of boarding vessels, and ordering them to short performances of Quarantine. It is also said that there is no instance of any vessel having been scrubbed, white washed, or fumigated, and that the most important part of this officer's duty is altogether neglected. If this is the case, sir, it is quite time that this gentleman should be reminded of his duty, and that the public rely on his exertions, and require of him to take every precaution which human foresight has hitherto put in force, in order to secure the general safety.[20]

The writer expresses worry that the Health Officers do not understand the severity of cholera, pleading that their neglect endangers the health of the entire community. He

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[18] Ibid.
[19] RG 25. 'Chart of Expenses under the new Quarantine Laws passed in the last session dated 19 February 1833 Appendix No.3'. NSARM.
[20] 27 June 1832. *The Novascotian*, 2. NSARM.

ends with a rhetorical question: 'The terror and dangers of cholera exceed the belief of any community which has never witnessed it, and if we know that a third, and even two thirds of a community have been swept away by it, are we on the eve of such an attack, to sit silently and see our [s]entinel half a sleep on his post?'[21]

While public criticism rose in newspapers over the way Halifax was managing preventative measures against cholera, complaints were made by the smaller ports in Nova Scotia that it was impossible to effectively quarantine all foreign vessels:

> And a Harbour like this without any fortifications or soldiers to protect [it] could not be effectually guarded as in a place like Halifax, where the Pilot Boats order to the Quarantine ground, all vessels that require it, but here the Boat used [in] the entrances of the Harbour must examine every vessel to know where they are from or any passengers, to act accordingly for coasting vessels coming from Newfoundland, Prince Edward Island, Pictou and Canso, with passengers although not from infected places are all examined by the Boat,… [22]

As smaller ports, such as Arichat and Pictou, struggled through a lack of resources to inspect vessels arriving in their harbours, the busier ports in the colonies found themselves in an equally challenging situation because of a higher level of traffic.

Despite expectations and fears as cholera made its way to Upper and Lower Canada, Halifax, like the other main ports of the Atlantic colonies, came through unscathed. Once the threat of the epidemic passed, preparations made by Lieutenant Governor Maitland, the House of Assembly, and the Board of Health in Nova Scotia were commended by other British North American governments, viewing Halifax as one of the successful cities in British North America in 'warding off' cholera that year. In reality, however, cholera's timing was largely inexplicable during this

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[21] 27 June 1832. *The Novascotian*, 2. NSARM.
[22] RG 25. 'Arichat Quarantine 1832'. 26 September 1832, from Mr. Clement Hubert. NSARM.

period, making Halifax Harbour's disease-free status in the summer of 1832, like that of St. John's, very much a matter of luck.

The debt Halifax incurred that year, however, caused some who were involved in the economic development of the town to wonder whether the danger of cholera had been exaggerated. Preparations for the epidemic cost the city over £3000,[23] and even without cholera in the town, Lieutenant Governor Maitland drew the £500 maximum from a colonial fund administered by Lord Goderich.[24] Prior to the threat of cholera, there were debates on immigrant taxation and anchorage payments to enable Halifax to support the influx of emigrants, and Martell is no doubt right when he observes: 'Nova Scotians would have been even more anxious to place a tax on immigrants in 1832, if they could have foreseen the expenses the province was about to incur on account of Asiatic Cholera.'[25]

By Christmas of 1832, the people of Halifax remained physically unharmed; however, the impact of cholera in other areas of the world could not be ignored. The devastation which cholera had caused, as well as its effect on other communities in Upper and Lower Canada would temper any inclination for the general citizenry of Nova Scotia to feel victorious. Cholera came all too close that year, and the citizens of Halifax, through newspapers, medical professionals and word-of-mouth, were alerted to their continued vulnerability.

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[23] RG 25. 'Report on Quarantine and Expenses', 10 April 1833. NSARM. The cost of the 1832 epidemic was also discussed in J.S. Martell's, *Immigration to and Emigration from Nova Scotia, 1815-1830* (Halifax, 1942), 27; According to Cowan, grants were given to Lower Canada, New Brunswick and Nova Scotia for emigrant cholera preparation in 1832 from the British Treasury. Upper Canada, however, had to depend on finances from their provincial secretary or potential volunteer efforts. For more information on the distribution of funds to Upper Canada, see Cowan, *British Emigration to British North America: 1783-1837* (Toronto, 1928), 220.

[24] CO 217/157. 12 November 1834. To Spring Rice, from Campbell. TNA.

[25] Martell, 27.

'An Inquiry Into the Truth of the Rumour'[26] *– Cholera Two Years Later*

> His Excellency the Lieut. Governor of Nova Scotia, has directions respecting the immediate removal of filth and ashes from the town. It is to be much regretted that this duty was put off until intensely warm weather; when filth-heaps have matured all their poison, and when their agitation and removal must cause the circulation of much noxious effluvia. In vain were hints given, and remonstrances made, in the proper time; all exertion, as is unfortunately too often the case, was postponed until danger threatened.
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> - 9 August 1834, *Acadian Recorder*, 3. NSARM.

Still recovering from the financial impact and overall stress of the cholera threat of 1832, Halifax continued to experience increased immigration and trade. While the town exchanged goods with British and Irish ports, ships from Halifax also carried an extensive trade with smaller ports in Nova Scotia, other British North American colonies, and internationally with New York, Boston, the Caribbean and South America. Local Halifax papers, therefore, carried news not only from the British Isles but also from its other trading partners.

As cholera returned to Europe in 1834, the *Acadian Recorder* quoted the *Quebec Gazette* on the closing of emigrant hospitals in Quebec owing to a lack of funds:

> The differences in the Legislature have led even to the neglect of this object of charity; and no funds have been voted for its support, when it was known that the Emigrant Tax Bill must be reserved for the Royal sanction. The public of Quebec, where the great body of Emigrants first land after a long voyage are fortunately protected to some extent by the quarantine establishment, but still many poor and sick must be found, and the citizens of Quebec are doomed to be threatened with the spreading of disease, to be witnesses of the distressing scenes of sickness and poverty which annually present

[26] 27 August 1834, *The Novascotian*, 2. NSARM.

> themselves, or to provide out of their own pockets for what the whole Province, and Upper Canada and Great Britain, ought to pay.[27]

Such reports of the struggles of Quebec and Montreal, whose human and knowledge-based resources were much greater than those of Halifax, made residents of Nova Scotia more aware of their vulnerability under the societal and resource pressures created by cholera.

In February 1834, the House of Assembly in Nova Scotia addressed the issue of the construction of a lighthouse on the islands of Scattarie and St. Paul's.[28] Although Britain had informed the government of Nova Scotia that it would not provide financial assistance for a lighthouse, an address made by the House of Assembly on 4 April 1834 urged the Imperial Parliament to re-consider. The address provided information on the number of ships, brigs and schooners lost at sea near the Atlantic colonies in recent past, estimating 2766 tons of cargo lost and 603 deaths. After a notably bad season for shipwrecks off the coast of Cape Breton, it argued that British and Irish vessels would gain significantly from the lights.[29]

Although the Assembly claimed that Britain and Ireland would benefit much more from the lighthouses than Nova Scotia, there is no doubt that Nova Scotia would have benefited from another lighthouse, as the care for emigrants fell largely on the colony, a situation in which 'instant attention and grants from the public treasury are constantly required to support the healthy, to give medical relief to the diseased and afford shelter to all, and in many instance to provide the means of

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[27] 14 June 1834, *Acadian Recorder*, 3. NSARM.
[28] CO 217/156. 4 February 1834. From A. Stewart, Chairman. TNA. In another letter on 10 April 1834, it stated that negotiations for financial support of Nova Scotian lighthouses had occurred, and were settled, in December 1825, between James Kempt and Lord Bathurst. A lighthouse was subsequently erected on Sable Island, with an agreement that the Imperial Parliament would provide £400 each year towards the expenses of the lighthouse. In 1834, however, the £400 had been withdrawn from the budget of the House of Assembly, and they were asking for its renewal. For the full letter see CO 217/156. 4 April 1834. To His Majesty, from the House of Assembly. TNA.
[29] CO 217/156. 4 April 1834. To His Majesty, from the House of Assembly. TNA.

forwarding them to their places of destination'.[30] Obviously, shipwrecks would only add to these problems.

The argument continued well into June 1834, when John Bainbridge wrote to R.W. Hay for the information of Secretary Spring Rice, concerning the vital need for a lighthouse on the Scatterie Island. He informed Hay of the ship, the *Astrea Ridley*, from Limerick, bound for Quebec, which was wrecked in March 1834 off the coast of Cape Breton, and out of 240 passengers, only 3 survived.[31] Worries over the consequences of shipwrecks found its way into the *Acadian Recorder* that June, with commentary over the particularly poor state of emigrants arriving across British North America that season. A larger than normal number of shipwrecks occurring near Lower Canada, Newfoundland and Cape Breton resulted in a 'heartbreaking tale for those who expect happy tidings of them in their native land'.[32] According to the newspaper, bodies were recovered off the coast of Cape Breton already that year, and consideration was given to erecting a monument to remember those who perished.

By early summer, ship inspections and quarantine were in effect once more in Halifax Harbour, conducted by Health Inspector Dr. William Almon, and Superintendent of Quarantine, Jacob Miller.[33] With the focus on emigrant vessels, each ship was charged two guineas for the health inspection, and one dollar per passenger, with the passenger tax going towards a provincial fund for destitute emigrants.[34] If the vessel was declared to be in a healthy state, it was not required to spend time in quarantine.

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[30] Ibid. The Assembly claimed that over the past two years, they have already used the £700, raised from tax on emigrants, and £1056, granted from the colony itself, in order to support 'those objects'.
[31] CO 217/157. 18 June 1834. To R.W Hay, from John Bainbridge. TNA.
[32] 28 June 1834, *Acadian Recorder*, 3. NSARM.
[33] CO 217/156. 9 May 1834. To Stanley, from Government House, Halifax. TNA.
[34] This tax was originally recommended by Goderich in 1831.

In July 1834, remarks were made in the *Acadian Recorder* on the growing number of destitute people without work in Saint John, N.B, expressing the fear 'that a similar statement might be made of Halifax'.[35] The following week, an article titled 'Public Cleanliness' was printed, describing the insalubrious streets, the unclean water and the amount of refuse found around town. The article asked 'If a great dread of cholera was entertained in former years, why should all remedies against it be despised now?'[36] Throughout July and early August, there was a clear concern from the Halifax community that the town was implementing little in the way of preventative measures.

On 2 August, the *Acadian Recorder* announced the 'melancholy intelligence' that cholera had again found its way to Quebec, Montreal and in the vicinity of Cincinnati, U.S.[37] It also reported four deaths from cholera onboard the *John Wallace* from Quebec, that arrived on Prince Edward Island, roughly 70 kilometres from Charlottetown, ending with the statement: 'We trust that the cleaning of Halifax will now be undertaken'.[38] Four days later, *The Novascotian* announced deaths from cholera occurring in Lower Canada, remarking that the 'Canadian papers do not say more about it than they can help' – a characteristic which came to define a number of British North American ports in the midst of a cholera outbreak.[39]

On 13 August 1834, *The Novascotian* announced, with scant detail and sceptical language, that over the past week deaths had occurred in the Halifax Poor House. It described the disease as having 'exhibited some of the symptoms of asiatic

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[35] 5 July 1834, *Acadian Recorder*, 3. NSARM.
[36] 12 July 1834, *Acadian Recorder*, 3. NSARM. The article continues by stressing the importance of 'good water', claiming that, unlike Halifax, other towns have put much effort into purifying their water supply.
[37] 2 August 1834, *Acadian Recorder*, 3. NSARM.
[38] Ibid.
[39] 6 August 1834, *The Novascotian*, 6. NSARM.

cholera'; lamely assuring residents that some physicians believe it to be 'common cholera', apparently a disease of 'usual' presence that time of year.[40] Following the remarks was a direct quote taken from the minutes of Sir James C. Hume, at a Board of Health meeting on August 12, stating that after consultation with medical officials, they '…have no account of any case of *Malignant* [original italics] Cholera at present in existence, in any part of the town'.[41]

The 16 August edition of the *Acadian Recorder* published the same announcement from Hume, stating that there were sicknesses 'rumoured' to be asiatic cholera in the Poor House, but that the paper was unable to acquire a report from the Board of Health on recent numbers.[42] A few days later, *The Novascotian* commented on the spread of cholera in Quebec, Montreal and Prince Edward Island. And on 23 August, the *Acadian Recorder* published an in-depth article titled 'Health of the Town' on the status of cholera in Halifax and its infection of the Poor House, the military and other parts of town – a featured column which was updated in the weeks to come.

The 'Health of the Town' article danced around the question as to whether it was cholera infecting the town – a reaction not uncommon in the face of highly feared epidemic disease.[43] 'Several victims to a disease very similar to that which is called the Asiatic Cholera, have fallen among the Military. Some sickness and deaths have occurred among the townspeople, respecting the nature of which we

[40] 13 August 1834, *The Novascotian*, 2. NSARM.
[41] Ibid. The Board of Health also recommended for residents to keep clean, healthy and sober as a precautionary measure against cholera.
[42] 16 August 1834, *Acadian Recorder*, 3. NSARM. While much of the Board of Health records for this time in Halifax are scattered, mislabelled, or lost, the quotations of their minutes in the local papers are quite helpful in piecing together their minutes.
[43] For more information on the reactions of communities to the threat of epidemic diseases, see Charles E. Rosenberg, *The Cholera Years: The United States in 1832, 1849, 1866* (Chicago, 1962).

understand, medical gentlemen differ'.[44] The beginning of the article quotes death tolls in Lower Canada, and explains the ways in which the Montreal medical community believed cholera was most effectively treated; however, the press remained vague in confirming its existence in Halifax. Not only would a declared outbreak intensify the degree of panic and fear already brewing in the community, but Halifax Harbour would have to declare itself infected, forcing trade, population growth and social development – all stimulated by British and Irish emigration – to come to a grinding halt.

Just before the paper went to print, however, an address from the Board of Health was attached confirming that it was 'malignant cholera' infecting the poor house, the military and in certain areas around town.[45] The announcement stressed the importance of domestic and personal cleanliness, recommendations for a proper diet, and the observation of premonitory symptoms. Local residents wrote to the *Acadian Recorder* to complain of poor drainage and the unhygienic nature of various localities in Halifax; however, the newspaper stated that most of the general commentary that week had to be screened, listing many letters as 'unfit' or 'too personally pointed' for publication.[46] Brief and relatively bland announcements of cholera outbreaks in other areas of British North America were swiftly replaced by lengthy recommendations, local reports and commentary, in frank and apprehensive language, from newspaper editors and Nova Scotia Board of Health officials.

On 27 August, *The Novascotian* provided a list of the number of deaths in Halifax from cholera, giving a total of 79 victims from the garrisons, the poor house

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[44] 23 August 1834, *Acadian Recorder*, 3. NSARM.
[45] Ibid. The 'Health of the Town' article finishes by stating 'The Halifax Board of Health has just issued an address to the public, which we subjoin'.
[46] Ibid. The column 'To Correspondents' lists one report of the 'noxious effluvia' rising from the drains in Halifax, but claims that the rest from 'A Subscriber', 'G.B' 'Caloric' and 'C.P.B' were acknowledged, but deemed unfit for print.

and the town, since 5 August.[47] It issued an exceptionally long article on the status of cholera in Halifax: 'As the most exaggerated and absurd statements have been circulated as to the extent of the mortality in the town and garrison, we have taken some pains to ascertain the whole number which are supposed to have fallen victims to Cholera here'.[48] Throughout August, and particularly now that cholera had arrived, factual updates and information became muddled and lacked continuity. A discrepancy between the information available in 1832 without an epidemic, and in 1834 when cholera was known to be present since 5 August, left readers of *The Novascotian* wondering over the length of time it took to publically acknowledge the outbreak.

Local criticisms soon rose at the end of August 1834, when government and the Board of Health finally sounded the alarm. *The Novascotian* described the Board of Health as a 'body composed of rather discordant materials', without any money at its disposal.[49] It remarked that Lieutenant Governor Campbell was hesitant to provide funds without the approval of Legislature, claiming that instead he suggested donating 50 guineas from 'his private purse', and that a public subscription of funds be enforced. Inevitable comparisons were drawn between the cholera preparations in 1832, and 1834:

> Two years ago the most ample preparation was made and very heavy expenses incurred, for the reception of Cholera, but the Cholera did not come. In voting the money, Members of Assembly declaimed against what appeared to have been a lavish expenditure. It is probable enough that the whole thing might have been managed with more economy; and if any body could have foreseen that the disease would have been two years travelling from Canada here, several thousands might have been saved. But the money was spent, and now, when there is a real necessity, nearly three weeks of very

[47] 27 August 1834, *The Novascotian*, 2. NSARM. There was also a figure claiming that 29 had died from the Rifle Brigade and 3 for the 96th Regiment, up until noon on 27 August 1834.
[48] Ibid.
[49] Ibid.

> precious time have been wasted, while the lay Members of the Board have been accusing the Doctors of a desire to create jobs and pocket the public money; and the Doctors have retorted charges of inhumanity, and a disregard of the sufferings of the poor.[50]

Distress and vacillation became themes of local commentary on cholera in Halifax, as the town was left to struggle through an epidemic which seemed to have caught the community completely off guard.

While papers continued to stress that those inclined to debauchery and drunkenness would be the most susceptible to disease, associating infection with immoral behaviour, Halifax's first victims were its soldiers, with 34 of the garrison dying from 5 August – 28 August.[51] This came as something of a shock. Regarded as protectors of the colony and models of a healthy and disciplined lifestyle, the soldiers were not considered to be susceptible. 'The military are supposed to be kept clean, well clothed, and regularly fed. These particulars are acknowledged preventatives of cholera, why then, according to the nature of things, should those enjoying them be selected as victims?'[52] The contradictions generated confusion, speculation, and general loss of morale as Haligonians attempted to rationalise cholera's virulence and its capability for destruction.

At the Exchange Coffee House in Halifax on 6 September, a meeting was held in an attempt to pool funds for cholera relief. Chaired by The Hon. H.H. Coggswell, President of the Halifax Banking Company, the meeting discussed Lieutenant Governor Campbell's offer to donate 'liberally' to enable the poor to survive the cholera outbreak, reminding those that 'the preparations made by the former Administration for the reception of cholera were founded on a vote of credit from the Legislature', an option claimed to not be available to the current

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[50] Ibid.
[51] 30 August 1834, *Acadian Recorder*, 2. NSARM.
[52] Ibid.

Executive.[53] The meeting raised £200, with the acknowledgement that, particularly under the influence of disease, the poor emigrants in Halifax needed representation and relief. At the end of the epidemic, Campbell stated that although casual revenue was running out, the Provincial Treasury and private contributions from residents paid for over two thirds of the epidemic expenses, not hesitating to note that '…the greater part of the large sum has been applied in relieving destitute and half starving emigrants, either suffering under the disease, or thrown out of employment owing to the almost entire cessation of business which it occasioned, and who, as absolute strangers in the Province, had established no claim to support or assistance at its expense'.[54]

By September, the public was inundated with medical advice, updates on current laboratory experiments around the world, and information on the virulence of cholera. 'Extremely distressing' reports came from Quebec and Montreal, revealing that death tolls in those parts of Lower Canada were still not abating by September that year.[55] Many reports in the *Acadian Recorder* added disclaimers to their updates of cholera, particularly from Lower Canada, reproving '…the appetite for shocking details, and for exaggeration, which some indulge in on occasions of public calamity. We are not without cause for such reprobation here; causes have been multiplied by repetition, until the grossest lies get circulation, spreading terror by their imaginary troops'.[56] While Halifax newspapers admonished readers over

[53] 8 September 1834, *The Novascotian*, 2. NSARM. Unsurprisingly, leaders in the banking industry seemed to be the ones called upon during the community crisis, requiring emergency funding. During the cholera epidemic in Montreal in 1832, the President of the Bank of Montreal, the Hon. P. McGill, was thanked in the report of the Sanitary Committee for donating £ 130 4 11 during the 1832 epidemic. The bank voted on the sum, to be given on a charitable basis. For more information see: *Report of the Special Sanitary Committee of Montreal Upon Cholera and Emigration, for the Year 1834* (Montreal, 1835), 13.
[54] CO 217/157. 30 September 1834. To the Treasury, from Campbell. TNA.
[55] 27 August 1834, *The Novascotian*, 2. NSARM.
[56] 30 August 1834, *Acadian Recorder*, 2. NSARM.

the extent to which other news sources tampered with facts of cholera in their respective regions, this did not stem the tide of 'information' circulated pertaining to the disease. Commentary published on Saint John, New Brunswick in the *Acadian Recorder* remarked that to have '[Saint John] escape is more that we have a right to expect, the scourge is gone forth, and we must bow to the rod'.[57] Although the piece commends the Saint John Board of Health and lists strict preventative measures in place around town, it also suggests that New Brunswick was failing in its efforts to protect itself. Statistics, folkloric remedies and rumours from local and international sources continued to inundate Halifax newspapers, with many 'facts' contradicting others from week to week. Newly arrived emigrants also became a source of information, as those who had previously dealt with cholera in their homeland now became experts, providing advice to residents in the colonies. Of course, rumour and hysteria have always plagued societies under threat of epidemic disease. In Nova Scotia, the volume of conflicting information on cholera from local and foreign parts only added to the confusion, doubt and frustration of both residents and emigrants as they searched for effective cures for cholera.

On 2 September, Governor Campbell wrote to Spring Rice, in a private letter explaining the severity of the outbreak and the need for funds for the relief of emigrants, military and the lower classes. He blamed the outbreak on earlier shipwrecks and Irish emigrants '…who were cast away upon Cape Breton… and who came here in the hope of procuring work or assistance'.[58] His letter asked that he be allocated the same grant as Governor Maitland in 1832 from the Treasury for cholera relief, '…to assist the unfortunate strangers and lower classes who are

[57] 13 September 1834, *Acadian Recorder*, 2. NSARM.
[58] CO 217/156. 2 September 1834. Private letter: To Spring Rice, from Campbell. TNA.

suffering under the disease'.[59] He claimed that £250 has already been raised in the form of a subscription, but that the sum would do very little in the way of relieving nearly 200 people, with almost 100, not including the military, already dead from cholera.

In a follow-up letter written on 30 September 1834, Campbell reminded Spring Rice of the request for £500, claiming that the King's casual revenue and provincial treasury in Nova Scotia do not have the funds, and that the halt in trade has greatly affected the ability of residents to contribute to a subscription. Campbell reasoned that 'I consider I am acting in the spirit of the despatch, and that it would not be just and fair towards the community here to throw the whole burthen of the expense upon them, when it is known and ascertained that the disease was first brought into the Province by the shipwrecked emigrants from Ireland and from Canada and that no Quarantine regulations or precautions would have averted the disease'.[60]

Campbell's focus on shipwrecked emigrants may very well have been strategic, to divert attention and criticism away from the lack of official quarantine and precautionary measures practiced in Nova Scotia that summer. Regardless, Campbell wrote to the Treasury on 30 September, attaching his letter to Spring Rice, and including a bill of £467.11s.6d., to be paid to Charles Wallace, the Treasurer of Nova Scotia.[61] Similar to all of Campbell's previous statements on the topic, he referred to the £500 granted by Goderich in his original circular to Maitland on 2 March 1832. Campbell continued to state that he did not believe he was over-extending the permissions placed by Goderich in 1832, and that the total colony's

[59] CO 217/156. 2 September 1834, To Spring Rice, from Campbell. TNA. In his attempt to secure funds with the Colonial Office, Campbell re-emphasises the grant allocated to Maitland, while clarifying that most of the 'lower-class' residents he is seeking to help are emigrants.
[60] Ibid.
[61] CO 217/157. 30 September 1834. To Treasury, from Campbell. TNA.

expenses surpassed £1500, with over two-thirds covered by the government and residents of Nova Scotia.[62]

The morbidity and mortality figures for cholera were published in the *Acadian Recorder* for the first half of September, taken directly from Dr. Hume's minutes, which broke down the statistics provided by three cholera management centres in the region – the Dalhousie Hospital, Private Practice and the Poor House. Although the Poor House had initially begun to take in small numbers of cholera patients, Private Practice received the largest number of patients in the first two weeks of September.

The Dalhousie Hospital averaged 40 cases of cholera a day between 31 August and 14 September, with about six deaths per day. Private Practice averaged 58 patients and eight deaths from cholera per day during this period.[63] These death rates were significant given the small population of the town. By the end of September, the affliction abated with cases of cholera rapidly declining. By mid-October, a clean bill of health was finally issued to the port.[64]

In a letter dated 2 October 1834, Spring Rice acknowledged to Campbell that the £500 would be made available to the colony. On 5 November a letter from the Treasury to R.W. Hay referred to the transaction of funds for the amount requested by Campbell, and speculated as to how they will balance their books, claiming that they should try to tally the amount into the Colonial estimates 'unless the colonial funds, should afford, the means of so doing of which there would appear to be but

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[62] CO 217/156. 12 November 1834. To Spring Rice, from Campbell. TNA. Campbell also points out that he had drawn just under the £500, which was used in full by Maitland two years earlier. He stated that the rest of the payments would be made by the province and from the '…liberal contributions of the inhabitants'.
[63] 13 September 1834, *Acadian Recorder*, 2. NSARM.
[64] Geoffrey Bilson, *A Darkened House: Cholera in Nineteenth-Century Canada* (Toronto, 1980), 99.

little probability'.[65] In Campbell's address to this Majesty's Council for the year 1834, he announced to Nova Scotians that the 'Parent State' gave a 'liberal sum' towards the support of emigrants during the outbreak of cholera. On 12 November, he wrote to Spring Rice that he was 'gratified' that Rice was so agreeable in the request.[66]

Although Campbell claimed that the Lords of the Treasury were supportive and understanding of the predicament in Halifax, according to Martell the feeling was not mutual. Campbell's conviction that emigrants were the fly in the ointment of an otherwise healthy community led him to send nearly 80 unemployed English pensioners, widows and children back to England after the epidemic in 1834.[67] Martell claims that this did not go down well with the Treasury, who, in concurrence with the Secretary of War, were of the opinion that those sent to the colony, at the expense of the state, should not be able to return.[68]

Cholera came to Halifax suddenly, unexpectedly attacking the military, and forcing inhabitants and government officials to scramble for an understanding of how best to manage the disease. The contrast between the voluminous press coverage and public information in 1832, during a time when an epidemic did not emerge, and the relative lack of coverage in the early summer of 1834, encouraged a belief that there was nothing to worry about. Once information arrived at the end of August 1834, confirming that cholera was infecting the garrison, and that the disease had been in the town for weeks, apprehension was largely left uncorroborated, and

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[65] CO 217/157. 5 November 1834. To R.W. Hay, from Treasury Chambers. TNA. The 2 October 1834 letter from Spring Rice to Campbell is referred to in this document, as well as in 12 November 1834 letter from Campbell to Spring Rice, see: CO 217/156. 12 November 1834. From Campbell, to Spring Rice. TNA.
[66] CO 217/156. 12 November 1834. To Spring Rice, From Campbell. TNA.
[67] Martell, 29. Martell claims that the widows and orphans were Chelsea pensioners, sent over by England, who died of cholera in Halifax.
[68] CO 217/159. 24 June 1834. To Grey, from Stewart. TNA.

valid questions left unanswered. There was no time to come to terms with the threat of cholera, as citizens were suddenly forced to reconcile themselves to the outbreak, and cast about for what to do. The lack of cholera control apparent throughout the town and within government only fuelled the atmosphere of rumour and hysteria, and created doubt in the ability of the town, and more widely, British North America, to ward off such illness. The arrival of diseases such as cholera in Halifax accentuated underlying conflicts and fractures attending emigration, colonialism and empire throughout British North America at this time.

Disease Management in Nova Scotia after 1834

Not surprisingly, and like much of the rest of the world, once cholera left Halifax in 1834, other diseases, as they arose, took precedence in the colony. In early September 1836, smallpox was reported in Sydney Mines on Cape Breton Island onboard the emigrant vessel, *Clansman*, from Greenock.[69] The Health Officer in Sydney, T.E. Jean, tended to the sick and reported that over 50 passengers, many of them children, were infected with smallpox by 19 September.[70] Jean blamed the virulence of the disease on the cold, wet weather in Cape Breton. On 27 September, he reported seven more deaths from smallpox, with four children and one man in a 'dangerous state'.[71]

In 1840, the Central Board of Health in Halifax met in order to discuss the need for a 'suitable establishment' to help treat sick emigrants and the local poor.[72] The Board was aware that most emigrants arriving in Halifax from the British Isles

[69] RG 25. To Judge Marshall, President of the Board of Health, Sydney Mines, from T.E Jean, Health Officer. 3 September 1836. NSARM.
[70] RG 25. To Judge Marshall, President of the Board of Health, Sydney Mines, from T.E Jean, Health Officer. 19 September 1836. NSARM.
[71] RG 25. To Judge Marshall, President of the Board of Health, Sydney Mines, from T.E Jean, Health Officer. 27 September 1836. NSARM.
[72] RG 25. 'Meeting of the Central Board of Health,' signed by Hume. 19 June 1840. NSARM.

and other areas of Europe were in need of temporary medical assistance and relief, a burden heavily felt by the Commissioners of the Poor in Halifax. They resolved that the masters of emigrant ships from the British Isles should bear more of the financial responsibility for the support of their passengers while in Nova Scotia.[73] The reality, however, was that unexpected emigrant ships kept arriving, and that regardless of the available finances of the passengers, or their vessels, most were desperate for relief. In 1841, the Waterloo Hospital in Halifax was developed to support emigrants and resident paupers, in conjunction with the Poor House.[74] While the poor in Halifax were frequent visitors of the Waterloo Hospital, an overwhelming number of patients listed in the hospital records were emigrants, suffering predominantly from smallpox and 'fevers'.[75]

By 1841, the population of Halifax had grown to 15 000, and in 30 years it would double that size.[76] Although the town was experiencing continued success in the timber trade, shipping and fisheries, a general lag in the Nova Scotian economy occurred in the early 1840s. By 1848, local crop failures and the subsidiary effects of the troubled economies in Britain and the United States caused trade to fall even further.[77] Throughout the 1840s, however, emigration from the British Isles increased, causing irregular but severe problems as disease and destitution accompanied thousands of emigrants to port towns throughout Nova Scotia.

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[73] Ibid.
[74] RG 25. 'Response to the Central Board of Health', Provincial Secretary's Office, Sir R.D. George. 15 January 1841. NSARM.
[75] RG 25. 'Statistics and Miscellaneous Records from the Waterloo Hospital, 1841'. NSARM.
[76] Susan Buggey, 'Building Halifax, 1841-1871', *Acadiensis* 10:1 (Autumn 1980), 90.
[77] David Sutherland, 'Halifax Merchants and the Pursuit of Development, 1783-1850', *Canadian Historical Review* 59:1 (1978), 12.

In June 1847, smallpox was found onboard an emigrant ship from Londonderry, which had arrived in the port of Pictou.[78] In the same month, an outbreak of typhus fever was reported amongst emigrants arriving at Guysborough, Nova Scotia, on the brig *Corsair* from Liverpool.[79] Medicines, medical officers and nursing staff were essential in order to help contain these diseases. The costs and availabilities of such services, however, generated strain on local boards of health, which then required financial aid from the Central Board of Health and the colonial government in Halifax.

Public information on health, infectious disease and recommended medicines became more mainstream in Nova Scotia by the late 1840s and early 1850s. Although criticisms continued to be voiced over the way in which various ports in British North America and the United States responded in the threat of epidemic illnesses from emigrant ships, advertisements, booklets and public opinion were publicised, with the implication that residents could help protect their own health through personal hygiene. Pamphlets on the prevention of cholera and other transmittable diseases from the General Board of Health in London were re-published by Provincial Secretary, Joseph Howe, in Halifax in 1848, entitled 'Notification: In Respect to the Nuisances Removal and Diseases Prevention Act'.[80] With outbreaks of cholera in Europe in 1848-49, detailed information and current research on cholera's virulence was at the forefront of the discussion, and included practical remedies recommended in the event of an outbreak.

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[78] RG 25. 'Letters to the Provincial Secretary from the Board of Health in Pictou concerning Smallpox, ect.' June 1847. NSARM. There is no exact date in June 1847 on the record.
[79] RG 25. 'Petition to the Guysborough Board of Health', 7 February 1848. NSARM.
[80] RG 25. 5 October 1848. 'Notification: In Respect to the Nuisances Removal and Diseases Prevention Act', from the General Board of Health in London. An extract from the *London Gazette*, re-printed by Joseph Howe. NSARM.

Advertisements for Radway's pills, Holloway's ointments, local cordials and cleaning agents became prevalent, dominating the first page of most provincial newspapers by the 1850s. Announcements of cholera at Grosse Isle in July 1854, re-printed from the *Toronto Colonist*, concluded with the statement: 'Cleanliness is one of the best preventatives'.[81] Advertisements of ways in which individuals could manage their own cleanliness, such as through the use of a washing powder from Boston in Figure 4.1, were regularly carried in the Halifax paper, the *British Colonist*, in 1854:

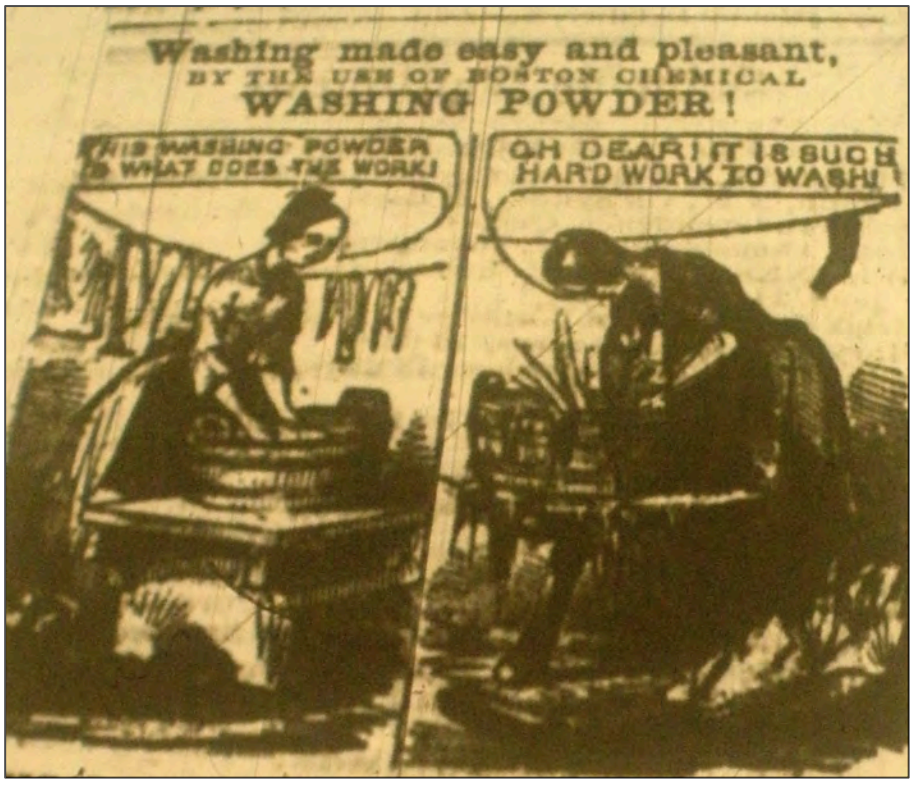

Figure 4.2. 6 July 1854, *British Colonist*, 1. NSARM.

As reports arrived in Halifax of cholera targeting men of 'broken constitution and dissipated habits' in Saint John, N.B, in 1854, personal responsibility for physical

[81] 4 July 1854, *British Colonist*, 2. NSARM.

well-being, domestic cleanliness and 'regular habits' continued to be a common topic and trusted preventative in the wake of transmittable disease.[82]

Halifax, unlike Saint John and St. John's, was fortunate enough to remain cholera-free in 1854. By July, reports of cholera in Saint John were printed in the Halifax papers, with many updates taken directly from New Brunswick sources. Death rates in Saint John were reported in Nova Scotia, and were said to be ranging from three to ten people a day. It was further remarked that a large number of residents had vacated the city. The report from Saint John, printed in the *Acadian Recorder*, exaggerated history in order to downplay the severity of the outbreak, indicating that Halifax, at the height of the 1834 cholera epidemic, had over 180 deaths per day, concluding therefore that the alarm in New Brunswick was unnecessary.[83] The article was, however, sensible in pointing out that, given the population of Saint John, the outbreaks of cholera could hardly be termed an epidemic, and that deaths from scarlet fever in the province over the past two 'seasons' far exceeded the current death toll from cholera.[84]

Despite these rationalisations, alarm penetrated into the various ports of Nova Scotia from news of cholera in Saint John. While concern continued over cholera onboard international emigrant ships, the acute focus was now on the Atlantic colonies, and specifically, their connection to each other. By the 1850s, Halifax, as well as several other Nova Scotian ports, had developed direct shipping lanes with Saint John. On 2 August 1854, the Board of Health at Annapolis Royal met and announced that two deaths from cholera had occurred in town. Mary Wilson, one of the two cholera victims, had arrived on board the steamer, *Pilot*,

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[82] 5 August 1854. *Acadian Recorder*, 2. NSARM.
[83] Ibid.
[84] Ibid.

from Saint John in order to take care of her father in Annapolis Royal.[85] The Board quickly moved to appoint local physician, Dr. Robert Leslie, as medical officer to examine all ships arriving from Saint John and to advise further necessary protocols and restrictions in the port.[86]

This followed a report days earlier, on 31 July 1854, that a male passenger with cholera had been discovered in Digby.[87] The man was prevented from coming ashore, according to Digby's Mr. Desminon, because the town lacked a designated shelter, hospital or funds to care for him. Desminon wrote to the Provincial Secretary, concerned over the lack of resources and possible spread of cholera in Digby, asking him to consider supplying funds for the town. He added that he had heard over 1000 families left Saint John due to cholera, and reckoned that without any government support, only one in five would survive an outbreak in Digby.

While isolated reports of cholera cases came in from areas around Nova Scotia, nothing more substantial came of them that summer. Halifax implemented quarantine restrictions on vessels arriving from domestic and international ports infected with cholera. Vessels arriving from cities such as Quebec or Boston, both infected with cholera at that time, were quarantined in Halifax Harbour, with their status announced and updated in the *Acadian Recorder*. While some vessels had no reported sickness, others had passengers with cholera-like symptoms, such as severe

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[85] RG 7 – *Provincial Secretary Reports*. Undated correspondence to Peter Barrett of the Annapolis Board of Health, from Robert Leslie. NSARM. Leslie claims that although he is no longer on the Board, that as a physician, he must report the cholera symptoms found in Mary Wilson, claiming that she and her father reside in a 'dilapidated old house – filthy and unclean in the extreme – a fit nucleus for the generating and spreading of disease'. Also, in this letter, Leslie refers to the vessel which Wilson arrived on as the *Pilot*; however, at a meeting of the Board of Health on 31 July, the steamer was termed the *Maid of Erin*. See RG 7. 31 July 1854, 'Meeting of the Annapolis Board of Health'. NSARM.

[86] RG 7. 2 August 1854. 'At a Meeting of the Board of Health for the District of the County of Annapolis, held at the County Court House'. NSARM. It was also stated that Leslie was to be paid seven shillings and six pence for each ship inspection.

[87] RG 7. 31 July 1854. To Provincial Secretary, from Ian Desminon. NSARM.

diarrhoea, which required them to remain in isolation for longer periods of time.[88] But despite widespread fears, no outbreak occurred and Halifax would remain free from cholera until 1866, when the last major outbreak in the British North American colonies came to McNabs Island, in the town's harbour.

The Arrival of the 'England' – April 1866

On 9 April 1866, the *England* arrived in Halifax Harbour from Liverpool via Queenstown (a small community within the harbour of Cork), bound for New York. Of the 1202 passengers listed on board, Halifax officials reported 160 cases of cholera and 46 deaths.[89] According to Nova Scotia's Governor W.F. Williams, the *England* left Ireland with 1260 passengers and one hundred crewmembers, and after a few days at sea, cholera was found onboard. The Provincial Secretary, Charles Tupper, who had much to do with Nova Scotia and Confederation in 1867, and later became Prime Minister of Canada in 1896, observed that cholera was discovered after the hatches had been barred for three days during a severe storm on the Atlantic.[90] Several of the vessel's engineers were infected with cholera, after which the Captain decided to land in Halifax, for fear that without proper support, he would not be able to navigate to New York.[91]

Once in the harbour, the ship went straight to a low-land cove on McNabs Island called Meagher's Beach (see Figures 4.2 & 4.3), a designated quarantine station in the outer area of Halifax Harbour where health officers and quarantine officials, when called to duty, lived with the McNabs family and other permanent

[88] 5 August 1854, *Acadian Recorder*, 1. NSARM.
[89] MG 100 Vol.222 'Shipping' – *Miscellaneous Manuscripts Collection*. 9 April 1866. To Provincial Secretary, Charles Tupper, from J.P Morrow. NSARM. The 'Cove of Cork' or 'Cove' was re-named 'Queenstown' in 1849. Its original name was reinstated in Gaelic, 'Cobh', in 1922.
[90] MG 100 Vol.222. 17 April 1866. To Dr. R.J McDonnell, from Tupper. NSARM.
[91] CO 217/238. 12 April 1866. To Cardwell, From Lieutenant-Governor Williams. TNA.

residents. Dr. Slayter, chief Health Officer for the port of Halifax, came to McNabs Island to meet the *England*. The large number of passengers and crew onboard, many of them exhausted, ill and infectious, meant that Slayter and his team, comprising of two medical officers, Dr. Gossip and Dr. Garvie, had their work cut out for them.[92] Charles Tupper, himself a physician, was in constant communication with Slayter as the crisis unfolded.



Figure 4.3. 'Aerial Map of Halifax Harbour and McNabs Island'. *Compiled from Documents in the Colonial Department, To Accompany the Report of the Emigration Committee*. Bodleian Library Maps Room, Oxford.

[92] Dr. Garvie was training as a medical student at that time.

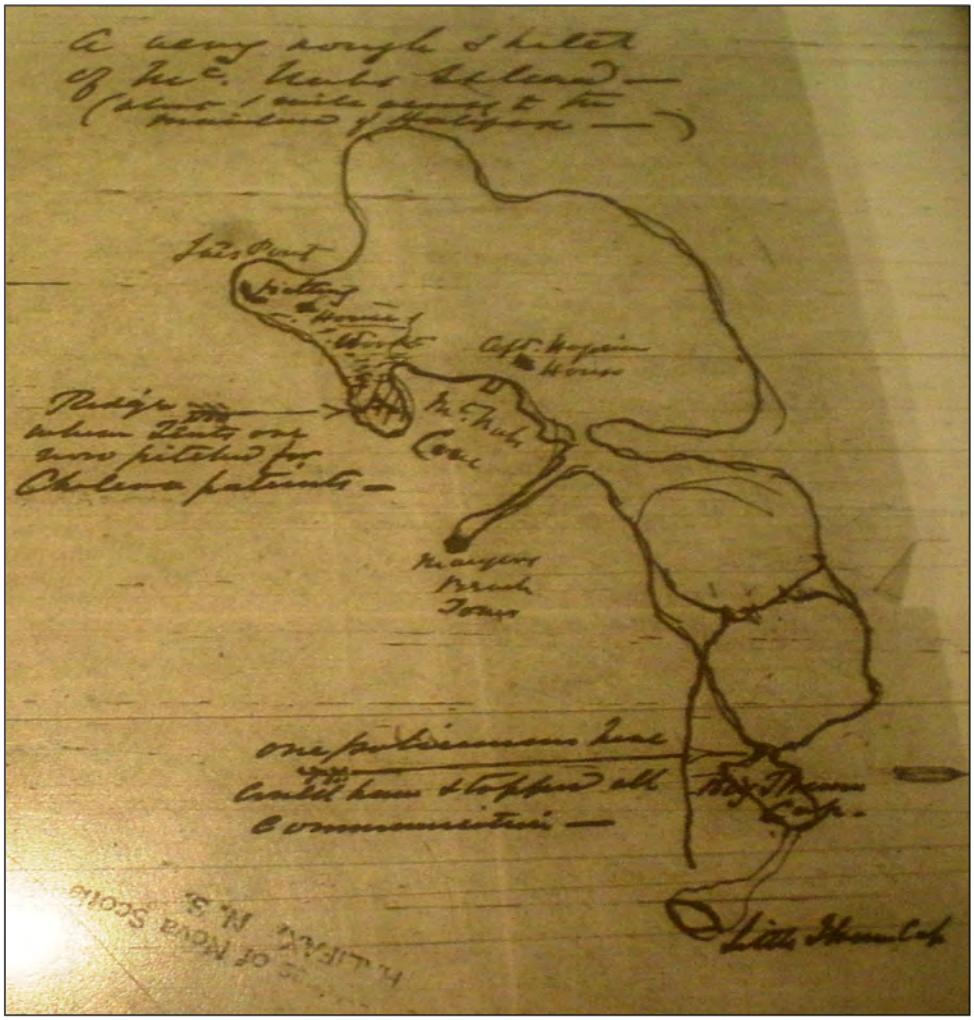

Figure 4.4. A 'rough sketch' of McNabs Island, by Colonel Westmouth. *MG 100 – Vol.222 Miscellaneous Manuscripts Collection*. NSARM.

Over the coming days, chaos ensued as health officers strove to care for sick emigrants, and Tupper focused on ensuring that cholera kept its distance from Halifax. It became apparent that in order to cope with over a thousand human beings in quarantine, some of whom had already begun to escape the island, reinforcements were necessary. Anxiously, J.P. Morrow, government official on McNabs Island, declared that men were needed to bury the dead, pointing out that '…Slayter is so busy with the living he has had no time to attend to the dead'.[93] The panic is evident in Morrow's writing here, as he stresses to Tupper that there cannot be any further

[93] MG 100 Vol.222. 10 April 1866. To Charles Tupper, from J.P Morrow. NSARM.

delays, and that certain issues must be attended to immediately, using the term 'action' repeatedly: 'you can greatly understand the need for action'. On 12 April, Tupper contacted Hastings Doyle, Major General Commander of the military, and ordered the 2/17th Regiment in Halifax to McNabs Island. Doyle responded to Tupper, confirming the request, and asked to be informed of the existing quarantine laws in the province, of the location of the emigrants on the island, and stated that it would probably be necessary '…to use force or to fire upon those who will not obey the Law'.[94]

Slayter's and Tupper's priorities collided in the early days of the ship's arrival, as instructions from Tupper to ensure cholera's confinement were met apologetically with delayed updates from Slayter, who, overwhelmed by the situation, was up against practical limitations on his ability to carry out the orders. On 11 April, Tupper requested the removal of everything from the *England* to Green Hill, an area on the southern end of the island. Emigrants were forbidden to make contact with residents of McNabs Island, bodies had to be buried in 'deep graves' and a detailed description of the disease was to be sent to the Government immediately, along with daily reports.[95] Slayter replied to Tupper that evening, stating that because of a lack of transport and the 'unruly conduct' of passengers, not all of Tupper's requests could be 'carried out as fully as I could wish'. He feared that a scarcity in supply of coffins had made burial difficult, forcing people to throw some bodies, 'heavily weighted', overboard. He reported that since he had separated the sick from the healthy, by converting the vessel *Pyramus* into a hospital, only a

[94] MG 100 Vol.222. 12 April 1866. To the Lieutenant Governor Williams, from Hastings Doyle, Major General Commander. NSARM.
[95] MG 100 Vol.222. 11 April 1866. From Provincial Secretary, Charles Tupper. NSARM.

few new cases of cholera had developed on the island. The average death rate was about 25 per day.[96]

Tupper confirmed with Slayter on 12 April that the military was on the island and ready to act under Slayter's orders, but reminded him of the need for around-the-clock surveillance of the *Pyramus*, in order to guard effectively against 'anything being done to endanger the health of the community'. Whether by 'community' he meant McNabs Island or Halifax, or both, Tupper was direct in his orders for the full containment of cholera. On 13 April, a report from Slayter to Tupper gave a despondent view the situation on McNabs Island. Slayter wrote that although the disease was not spreading to the island, the sick were quick to die on the *Pyramus*. He reported that they had constructed tents for the healthy emigrants on the island, but that the German and Irish emigrants from the *England* were not getting along, and had divided themselves into their own quarters.[97] There was a large number of children infected with cholera, while others had become orphans, many left 'clinging to their dead mother'.[98] Slayter finished the correspondence on a bleak and exhausted tone, plainly stating: '[the] emigrants are filthy'.[99]

On 14 April, Slayter wrote to Drumming, Lieutenant Commander of the 2/17th Regiment, asking that the military vacate their barracks on McNabs Island so that they could provide women and children currently on the island and 'in danger of

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[96] MG 100 Vol.222. 11 April 1866. To Charles Tupper, from Slayter. NSARM. Although Slayter had initially thought to send infected passengers to the Lighthouse, 'high winds and the nature of the beach' meant that they could not all safely land and be properly cared for. Instead, he converted a functional vessel, the *Hulk Pyramus*, into a hospital.

[97] In a later correspondence, Gossip tells Morrow that he is able to send on the names of the remaining English and Irish emigrants on the island, but that he will need an interpreter for the German names, claiming 'that if I attempted to pronounce their names I should break my jaws and as for spelling them that is simply impossible'. See MG 100 Vol.222. 1 May 1866. To Morrow, from Gossip. NSARM.

[98] MG 100 Vol.222. 13 April 1866. To Charles Tupper, from Slayter. NSARM. Slayter also mentions that there were two priests, one Irish and one French, from the *England* who were helping out considerably with panic-stricken individuals.

[99] MG 100 Vol.222. 13 April 1866. To Charles Tupper, from Slayter. NSARM.

infection' with an isolated place to stay.[100] In the meantime, Drumming wrote to Tupper, informing him that the military had created a line of guards, half a mile long, in an effort to cordon emigrants to the northwest corner of the island, but advised that he did not believe this method to be effective at night.[101] In a follow up letter to Tupper, Doyle agreed with Drumming, remarking that '…unless a Marine Police is established the emigrants will no doubt continue to escape from the island'.[102]

The Ultimate Sacrifice: Dr. Slayter and Local Newspaper Coverage

On 13 April, the *Acadian Recorder* became the first newspaper to publically announce the arrival of the 'Pest Ship' on McNabs Island. The report praised the work of Slayter, Gossip and Garvie, reporting at the same time that 'We [have] heard it stated that a family of five children, the eldest not ten years old, have been bereaved of both parents by the dreadful disease. Four of the policemen have been detached for duty in a schooner to prevent any communication with the shore'.[103] Halifax's *Morning Chronicle* mentioned the status of the *England* on 14 April, further commending the work of Slayter and his team, claiming that these 'gentlemen deserve the highest praise for their energetic exertions in the work of humanity in which they are engaged'.[104] Although the 'disease' was not termed as

[100] MG 100 Vol.222. 14 April 1866. To Drumming, from Slayter. NSARM. I have no information which follows up on Slayter's request, although technically the military and Drummond where to act under any orders given by Slayter. On April 11, Tupper informed Slayter that His Excellency in Council appointed him as a Justice of the Peace, which legally allowed Slayter to give direct orders to the military force concerning protocols for protecting the population and enforcing quarantine. See MG 100 Vol.222. 11 April 1866. To Charles Tupper, from Slayter. NSARM.
[101] MG 100 Vol.222. 14 April 1866. To Tupper, from Drumming. NSARM. Drummond also adds that the military was led to believe that the emigrants were camped out in the south end the island; however, they were all found to be located in the north.
[102] MG 100 Vol.222. 14 April 1866. To Tupper, from Doyle. NSARM.
[103] 13 April 1866, *Acadian Recorder*, 2. NSARM.
[104] 14 April 1866, *Morning Chronicle*, 2. NSARM.

cholera, a concern for the condition of emigrants, the health of local officials and the potential virulence of the illness, was evident in the papers that week.

Daily correspondence continued between Tupper and Slayter as well as Tupper and the military officials, but on 17 April Garvie wrote to Tupper informing him that Slayter was ill. Before he was able to sent the letter, he was forced to append a further message to the bottom of the page: 'Dr. Slayter died at a quarter to 10 o'clock this morning. Send a lead coffin from Halifax at once'.[105]

Dr. Slayter's death from exposure to cholera, at the age of 37, set off an outpouring of grief in the community, as can be seen by the lengthy and emotional coverage in the Halifax newspapers. The *Weekly British Colonist*, *Acadian Recorder*, *The Novascotian* and the *Morning Chronicle*, all covered the news that one of Nova Scotia's own physicians lost his life in the struggle to contain disease on McNabs Island. Under the heading, 'The Pest Ship', the *Morning Chronicle* published a tribute to Dr. Slayter's heroism:

> Dr. Slayter himself fell a victim to this dreadful disease. Dr. Slayter was the possessor of a warm and generous disposition. He has died in a good cause – that of aiding and relieving his stricken fellow man. His name will long remain green in the remembrance of all who appreciate genuine worth as exhibited in a philanthropic gentleman who failed not to come boldly forward to do as his kind heart prompted him, even though 'in the day and the hour of danger.' We, in common with the entire community, deeply sympathize with his wife, his mother, and his children.[106]

Similar obituaries and letters were written to the editors of local newspapers in the weeks after Slayter's death, applauding his ability as a doctor and his influence on Halifax:

> He was not ostentatious, but *his* were the acts of a good Samaritan. The very cause of his death was his earnest desire

[105] MG 100 Vol.222. 17 April 1866. To Tupper, from Garvie. NSARM.
[106] 18 April 1866, *Morning Chronicle*, 2. NSARM.

> to do the greatest good. Throughout the whole of his professional life, I believe he never refused to attend, night or day, sick or well, the poorest victim of suffering humanity, and his services on many occasions were singularly beneficial. As a surgeon, there was not, perhaps, his equal in the Province; cool and determined, he operated with ease and elegance, and was becoming proficient in delicate operations on the eye. Dr. Slayter's death is a public loss, and although his services were not so well appreciated during life as his merit demanded, there is now an opportunity in some suitable way to show by this community their appreciation of his talent and heroic conduct.
> We, in common with the whole community, deeply sympathise with his sorrowing family and friends.[107]

The writing expressed the pride felt in the community for local men risking their lives, not only for the town, but in order to come to the aid of recently landed emigrants from the British Isles and Europe. The response from the community reveals a peculiarly colonial outlook from Nova Scotia, focusing on Slayter as a native, raised and educated in Nova Scotia, revealing the personal loss felt by those who may have never meet him. Slayter left five children and a wife upon his death. On 26 April, the Nova Scotia Legislature voted unanimously to donate $2000 to his wife and family.[108]

A wave of patriotic sentiment filled local newspapers with the announcement of Slayter's death. The coverage made it clear that his death had cut deep into the community – Halifax had lost one of its own. By 1866, the city had become large, diverse and increasingly independent. A generation had come and gone since its initial surge of growth in the early nineteenth-century, which meant that more residents considered themselves natives to Nova Scotia. Articles and letters to the editor emphasised Slayter's exceptional character, his successful career and his loyalty to Nova Scotia, with one correspondent reasoning that the patriotic sentiment

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[107] 25 April 1866, *Weekly British Colonist*, 2. NSARM. This is an excerpt of a much longer written column.
[108] CO 217/238. 26 April 1866. To Cardwell, from Williams. TNA.

stemmed from the fact that '…Nova Scotia has given birth to *one* [original italics] who was endowed with such bravery and judgement as to take charge of a forlorn hope to meet the most desperate and relentless foe which, on any previous occasion, has attempted to invade our happy and healthy country, and in the attempt has been successful altho' unfortunately with the sacrifice of his own life'.[109] On 4 May, a verse on Slayter was published in the *Acadian Recorder*:

> The laurel's he's won, e'en the grave must relinquish
> 'Tis due to his offspring as gratitude's claim,
> That a garlanded column of love and affection
> Of sorrow yet pride should be reared to his name.[110]

The title suggests that the verse would be part of a public monument dedicated to Slayter, used to memorialise his legacy in Nova Scotia.

While the press coverage focused on Slayter, on 21 April, another Halifax tragedy resulted from the attempt to control the outbreak. A pilot, James Terrence, who had guided the *England* safely into port, became sick from cholera in Portuguese Cove, located on the western side of the outer opening of Halifax Harbour. Dr. Thomas Pryor, the Health Officer for Portuguese Cove, reported that Terrence's two children, an infant, and a nine year old, had also fallen ill, as well as a thirteen-year-old girl from the Purcell family.[111] On 25 April, the *British Colonist* announced the death of Terrence and his two children, from cholera.[112] Terrence's death, which occurred nearly two weeks after the completion of his duties for the *England*, generated further anxiety over the possibility of infection on the mainland. The houses of the cholera patients were quarantined under Pryor's surveillance in Portuguese Cove, with newspapers ensuring residents that 'we believe there is no

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[109] 18 April 1866, *Morning Chronicle*, 2. NSARM.
[110] 4 May 1866, *Acadian Recorder*, 2. NSARM.
[111] RG 7. 21 April 1866. To Tupper, from Thomas Pryor. NSARM.
[112] 25 April 1866, *British Colonist*, 2. NSARM.

foundation for the rumo[u]r that any case had occurred in or near [Halifax].[113] The citizens of Nova Scotia were forced to come to terms once again with the classic forms of anxiety attending a cholera threat. The panic only increased when local officials succumbed to a disease which they had, with varyingly levels of success, attempted to forestall and manage for decades.

While Slayter, and to a much lesser extent Terrence, were both profiled in newspapers as local men who lost their lives in an attempt to save emigrants and protect Nova Scotians, Garvie and Gossip continued to carry out the quarantine duties on McNabs Island. Immediately after the announcement of Slayter's death, Tupper wrote to Gossip on behalf of Lieutenant Governor Williams, who appointed him the new Health Officer for the port of Halifax.[114] He ordered a full report on the status of the *England* and the *Pyramus*, and told Gossip to get the former boat away 'as soon as she is properly purified with all passengers who are now well'. Tupper advised Gossip that once the *England* left, the medical team could more effectively accomplish their work with the sick.[115]

After a full eruption of cholera on McNabs Island lasting ten days, the *England* left for New York on 19 April, with the Master, 115 crewmembers, and 901 passengers.[116] The 'storekeeper' from the *Pyramus*, 19 city volunteers, and one steward from the *England*, who chose to remain, stayed on the island in order to help tend to the remaining sick, which amounted to 52.[117] As cholera abated on the island, however, Gossip began to report an array of other illnesses in the remaining

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[113] Ibid.
[114] MG 100 Vol.222. 17 April 1866. To Gossip, from Tupper. NSARM. There seems to have been some initial confusion in the press over who was appointed Health Officer. The *Acadian Recorder* claimed, with surprise, that Garvie was appointed, however, the *Morning Chronicle* announced Gossip was the ports new Health Officer.
[115] MG 100 Vol.222. 17 April 1866. To Gossip, from Tupper. [separate letter sent on the same day]. NSARM.
[116] MG 100 Vol.222. 19 April 1866. To Tupper, from Gossip, 10 A.M. NSARM.
[117] 23 April 1866, *The Novascotian*, 3. NSARM.

patients, including 'fever' and typhus fever, He observed that an amputation would be performed on at least one of three cases of gangrene.[118]

After 19 April, 'healthy' patients were discharged from the *Pyramus* to the island, where they remained in tents. By 26 April, Gossip reported to Tupper that Morrow was in the midst of organising transportation to New York for the remaining passengers, and that there were no new cases of cholera on the *Pyramus*.[119] Although rates of infection had lessened, on 30 April, Catherine Howley, an emigrant from the *England* who had initially recovered from cholera, died from 'fever'. Gossip blamed the fever on her exposure to wet weather, and claimed that the remaining patients at the quarantine station were well.[120] By early May, as the quarantine ground and the *Pyramus* prepared for the remaining passengers to be sent on to New York, correspondence between Gossip and Tupper concluded. By mid-May, expenses, returns and reports from the quarantine ground were compiled as officials finally had a chance to assess the events and tally up the damage.[121]

Under Pressure: Tupper, Williams and the Colonial Office

Throughout the cholera outbreak, Charles Tupper was unyielding in his insistence upon detailed and continuous updates from McNabs Island. It was evident

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[118] MG 100 – Vol.222. 20 April 1866. To Tupper, from Gossip; 23 April 1866. To Tupper, from Gossip. There were two reported cases of gangrene, which Garvie was scheduled to operate on the following morning (24 April); 26 April 1866. To Tupper, From Gossip. On 26 April, Gossip reported to Tupper that there was now a third case of gangrene, of which he anticipated 'a fatal result'. NSARM.

[119] MG 100 Vol.222. 26 April 1866. To Tupper, from Gossip. NSARM.

[120] MG 100 Vol.222. 30 April 1866. To Tupper, from Gossip. NSARM. Gossip explains to Tupper that '…in spite of my orders [Catherine Howley] uncautiously exposed herself to the wet a few days ago and was attacked with fever which assumed a dyphoral form and she gradually sank and died'. Tents in April on McNabs Island would not have provided a lot of protection from the elements.

[121] MG 100 Vol.222. 15 May 1866. To Vice-Admiral Command in Chief, from Naval Store Keeper, E.J Davys. 'Return of the expense incurred on account of the 'Pyramus' receiving ship, since her arrival at the Dockyard, from the Quarantine Grounds, on the 5 May 1866'. NSARM.

from his correspondence with Slayter and Gossip that Tupper's top priority was the successful containment of disease at the quarantine station, away from mainland shores. While Slayter, Gossip and Garvie were on the frontline, face to face with cholera patients, Tupper, as Provincial Secretary, had to ensure that information and orders were effectively communicated among a variety of agents and agencies, including the Mayor and Lieutenant Governor, while continuing to promote calm and assurance amongst residents. He was also at pains to convey the impression that the government was in control of the crisis.

Pressures rose, however, particularly from Slayter's death and from the outbreaks of cholera in Portuguese Cove. These events defined Halifax's physical proximity to the disease, which only intensified when reports arrived that emigrants were finding ways to escape the island. Newly arrived emigrants, worn out from the arduous journey, traumatized from being on a cholera ship and completely unfamiliar with their new surroundings, were desperate to flee the situation. Reports of emigrants found missing from their tents in the mornings was not infrequent, and became a typical reason given by Gossip when unable to state precise numbers.[122] Drumming wrote to Tupper on 15 April, reporting suspicious behaviour between emigrants and residents on McNabs Island. Military officers had discovered an unofficial boat off the island, which claimed to be fetching supplies for emigrants in Halifax. Drumming expressed mistrust of certain locals, who, perhaps through bribery, were tempted to help emigrants off the island and into Halifax. He suggested to Tupper that another schooner be assigned to prevent these escapes.[123]

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[122] MG 100 Vol.222. 19 April 1866. Statement by Gossip. 'The following is the report of cases on the island at 5 PM, and onboard the *Pyramus*'; 20 April 1866. To Tupper, from Gossip. NSARM. One of Gossip's explanations: 'The only way in which a report can be obtained of the state of the people on the island is by a personal visit through the tents counting as you go. This is very subject to fallacy as I have counted them five or so times today and every time with a different result'.
[123] MG 100 Vol.222. 15 April 1866. To Tupper, from Drumming. NSARM.

In the days to come, Drumming claimed that there was reason to believe that a man named Ellinger was selling alcohol, in an 'illicit manner', to emigrants and residents on the island. On 23 April, the military caught Ellinger in the act and charged him with violating quarantine – believing him to be an enabler for fugitive emigrants.[124] On 25 April, Tupper wrote to Gossip that once the outbreak subsided, Ellinger would be prosecuted '…with the utmost rigor of the law'.[125]

Worry of emigrants spreading cholera overwhelmed Tupper and his office. On 19 April, Gossip mentioned to Tupper that bedding and clothing from the *England* was left on the island after its departure, and would need to be burned. On 23 April, Tupper wrote to Gossip that 'there was a good deal of alarm here' over accusations from the community that the linens from the *England* had been tossed into the harbour.[126] Tupper urged Gossip to confirm the status of the bedding and clothing, as anxiety grew over the idea that soiled cloths would lead to infection on the mainland.

Tupper's inquiries on the subject were most likely instigated by an article printed in the *Acadian Recorder* on 23 April, reporting a child with a case of cholera at Freshwater. The child lived in a house 'near the bridge', and its illness was blamed on the 'infected clothing which drifted ashore from the steamship *England*'.[127] On the same day, conflicting information was published in *The Novascotian* in a short report similar to Gossip's private correspondence to Tupper, previously mentioned, on 19 April – the bedding was still on the island, and would be burned once they found men to complete the job.[128]

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[124] MG 100 Vol.222. 23 April 1866. To Tupper, from Gossip. NSARM.
[125] MG 100 Vol.222. 25 April 1866. To Gossip, from Tupper. NSARM.
[126] MG 100 Vol.222. 23 April 1866. To Gossip, from Tupper. NSARM.
[127] 23 April 1866, *Acadian Recorder*, 2. NSARM.
[128] 23 April 1866, *The Novascotian*, 3. NSARM. From my analysis of the two papers, *The Novascotian* typically published factual updates and statistics in concurrence with the private

On 7 May 1866, the *Acadian Recorder* followed up on the previously reported child, and now its mother, from Freshwater, who both died from cholera. Although there was no mention of soiled clothing this time, the article gave additional details, claiming that the father of the family was in a poor state, left with a fourteen-month old boy, and recently found wandering drunk in the streets with the child in his arms. The police took him in, and the paper asked that residents consider adopting the child, claiming that he was 'pretty and intelligent looking, with large black eyes, and a very expressive countenance'.[129]

The tone and language used by Tupper and Gossip in their private correspondence reveals the tension felt by both parties, particularly when their respective duties clashed. Tupper repeatedly insisted on communication, to which on one occasion Gossip replied testily, 'I beg to state that it is impossible or has been to reply to correspondence from the City without neglecting the sick'.[130] Although it was understandable that Gossip chose to see patients over writing to Tupper, his lack of precise updates created communication errors and confusion amongst supporting authorities, namely the military, health officials, and suppliers of provisions. These predicaments infuriated Tucker, who was aware that mistakes of this nature made the government look weak and out of control. He eventually wrote to Gossip on behalf of the Lieutenant Governor:

> The Government at this moment have been unable to ascertain, how many passengers and others have been attacked with the disease and how many have died previous to the arrival of the ship and during her

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statements made by Gossip to Tupper. The *Acadian Recorder*, on the other hand, in a few instances published misleading information, including a statement that Garvie was the new Medical Officer on McNabs Island, when it was in fact Gossip. Although *The Novascotian* was a weekly paper, and therefore published fewer articles on the status of cholera, what it wrote was largely correct. This suggests that the paper may have had a connection to a government source.

[129] 7 May 1866, *Acadian Recorder*, 2. NSARM. The advertisement ends with 'Such a pretty and intelligent looking child (a boy, by the way) should not be left to the tender mercies of a drunken father'.

[130] MG 100 Vol.222. 19 April 1866. To Tupper, from Gossip, 10 A.M. NSARM.

> stay at this port. His Excellency is fully aware of the great difficulties which have been encountered by the Medical Officer and the very arduous nature of their duties but as he has been assured that there is no necessity for further medical aid, both by your predecessor and yourself and hopes that you will now be enabled to furnish the requisite information which it is not creditable to the Government to be without.[131]

A lack of understanding between the needs of the emigrants, the requirements of public health officials and the reputation of the provincial government during the threat of cholera all came to a head in Halifax and on McNabs Island in April 1866. The sailing of the *England* on 19 April, and the reduction in reports on cholera by the end of the month, meant that officials in the province were able to stop the crisis management and properly assess the events of the past three weeks.

Governor Williams informed the Colonial Office on 12 April 1866 of the serious problems posed by the arrival of the *England*. His correspondence with Edward Cardwell, Secretary of State for the Colonies, provided a fairly factual report of the situation; however, he did not hold back in placing blame on the 'Imperial Authorities' for Nova Scotia's predicament:

> Although the Imperial statutes in this case may have been complied with, there can be no doubt that the crowded state of the vessel and the necessarily confined and impure atmosphere in which so many human beings were compelled to live were the primary causes of the breaking out of the epidemic, and I would beg very respectfully to suggest that it hardly appears to be safe or wise to allow such numbers to be crowded into one vessel as to require them to be packed or huddled together on one deck above the other, so that the tainted atmosphere breathed by those below must of necessity also affect those above.[132]

Williams criticised the 'cupidity' of the ship-owners and the current passenger laws, arguing that although technically the amount of cubic space per passenger was legal

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[131] MG 100 Vol.222. 20 April 1866. To Gossip, from Tupper. NSARM; Gossip wrote to Tupper on April 22 with a substantial update, and explaining: 'Garvie and myself since our arrival at quarantine have hardly had two hours sleep a night – I will appoint Dr. Garis to attend to the sick tomorrow and will answer as well as I can your communication' see MG 100 Vol.222. 22 April 1866. To Tupper, from Gossip. NSARM.

[132] CO 217/238. 12 April 1866. To Cardwell, From Williams. TNA.

onboard the *England*, when storms occur at sea and passengers are forced together, the amount of available space is cut significantly – claiming that 'no better example of the truth of these remarks can be adduced that the one which I now have the honor of reporting'.

Clearly upset by the condition of the *England* and the predicament in Nova Scotia, Williams later remarked in a letter to Cardwell: 'I would respectfully suggest that the Emigration Officers of Liverpool and Cork be admonished to do their duty thoroughly and that every possible precaution be taken to prevent a similar occurrence'. He used the natural behaviour of terror and panic amongst emigrants on McNabs Island to emphasise the significant burdens placed on Nova Scotia. He informed Cardwell that the male emigrants, in particular, created havoc on the island, so much so that the military had to be despatched to ensure that emigrants remained within their confines, and that order was upheld.[133]

The Colonial Office, however, provided a largely defensive and dismissive response. On 26 April, T.W.C. Murdoch acknowledged receipt of Williams' letter to Cardwell, in a correspondence to T.F. Elliot. Murdoch claims he called upon the two emigrant agents at Liverpool and Queenstown, who were quick to quote Section 14 of the 1855 Passenger Act in order to clarify that the number of passengers onboard was within the legal limits of the Acts of Parliament. He re-stated the act, which required at least 15 feet of space in the upper deck, and 18 feet in the lower deck of a vessel, for each adult.[134] The *England*'s upper deck measured 11041 feet, and its lower deck was 7579 feet, which meant that they could technically hold upwards of 1156 ½ 'adult' passengers on board. Murdoch claimed that 1202 'souls' converted

[133] CO 217/238. 26 April 1866. To Cardwell, from Williams. TNA.
[134] Murdoch does state that in the lower deck, if ventilation 'be below a certain proportion', it could go to 25 feet per adult. This aspect was not taken up, or discussed any further, within the notes to Murdoch.

into 1080 'adults', figures most likely adjusted to account for infants and small children onboard. Murdoch stated, therefore, that the agents acted in a perfectly legal manner, arguing that they would have had no reason to object to the status of the *England*, and stressing that no one could be blamed for cholera onboard the vessel. He attached returns from 1863 and 1864 on the number of annual sailing vessels from the U.K and their relatively low mortality, claiming that this was the first instance of cholera onboard a passenger ship from a U.K. port since 1854.[135]

The second acknowledgement of Williams' report by Murdoch stemmed largely from Williams' remarks on the need to reprimand the emigrant agents in Liverpool and Cork. On 21 May, Murdoch wrote to Elliot in defence of those emigration officers, claiming that it would have been impossible for them to discover cholera as it was not found onboard until nearly a week after its departure, stating that 'it is unnecessary to point out that it is impossible by any medical inspection to discover the disease while in this latent form'.[136] For information, Murdoch also gives Williams' statistics on the death count onboard, but seems sceptical, adding: 'I apprehend however that the above numbers cannot be taken as absolutely accurate'.[137] Murdoch maintains throughout his correspondence, through the use of technical evidence and statistics, that emigration officers and the imperial

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[135] CO 386/85. 26 April 1866. To Elliot, From Murdoch. TNA. Murdoch insisted that : 'If blame attaches anywhere it is scarcely to the [ship] owners still less to the Emigration Officers'.
[136] CO 386/85. 21 May 1866. To Elliot, From Murdoch. TNA.
[137] Murdoch does have a point here. Williams claimed that 150 passengers died at sea from cholera on the *England*, before arriving into Halifax Harbour, and that no less than 56 had died on McNabs Island from April 9-12. He announced on 12 April, to Cardwell, that 1260 passengers left Queenstown, with authorities in agreement that 1202 arrived onboard at McNabs Island. However, in addition to the original number of 1260, there were 100 crewmembers, making the total onboard at Queenstown 1360. Research has not revealed the number of crewmembers in Halifax once the ship arrived on 9 April, but unless all of the crewmembers died at sea (and there was certainly reported infection amongst some of them), then the death toll at sea is not accurate. See CO 217/238. 12 April 1866. To Cardwell, From Lieutenant-Governor Williams. TNA.

government were in no way responsible for the state of the *England* or the havoc it caused in Nova Scotia.

While Williams' criticisms and frustrations were understandable, if emotionally charged, the response from the colonial office was bureaucratic and procedural, and did not address Williams's criticisms of the laws themselves. Murdoch emphasised technicalities and re-stated official Acts of Parliament, information Williams was undoubtedly familiar with, allowing the laws to speak for themselves: officials had done nothing illegal in Britain, and the state of the *England* in Nova Scotia was not their problem. Although Murdoch's use of evidence ended the immediate discussion over who was technically to blame, his response ignores the greater issue of why, after decades of experience, emigrant vessels were still arriving unexpectedly in the Atlantic colonies in such poor condition, and forced under the care of whoever was there to provide for them.

Regardless of the stance taken by officials in the Colonial Office, Halifax deserved some credit in confining cholera to the quarantine station that spring. As cholera continued to affect port towns throughout the United States, the British Isles and continental Europe over the summer months, Charles Tupper proceeded to publish proclamations on behalf of Williams on disease prevention in Halifax.[138] Once the impact of cholera at the quarantine station that April could be assessed, the provincial government provided $7000 in compensation to the residents on McNabs Island in August 1866, 'for all damages and injuries sustained by their properties'.[139]

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[138] 8 June 1866, *Acadian Recorder*, 4. NSARM.
[139] MG 100 Vol.222. August 1866. 'Statement', to the 'Humble James McNab', from Provincial Government. NSARM.

An attempt to decipher death tolls from Slayter and Gossip's correspondence can lend some understanding to Tupper's frustrations on the lack of reliable documentation from the quarantine grounds. The number of healthy, sick and dead passengers, listed from health officer reports, varies considerably, with numbers typically not measuring up with earlier updates. The lack of corresponding numbers could be due to the offloading of healthy passengers from the island to Halifax; however, it is not clear the extent to which this happened, if at all, and in at least one case, after the *England* had left on 19 April, the total number at the quarantine station rose slightly from one day to the next. Although the cumulative estimates of mortality on McNabs Island range from 200 to 400, depending on the source, it is probably safe to conclude that around 133 passengers died from the *England*, with the need to account for a small number having fled quarantine within that number, from the time it arrived on 9 April to the time the ship sailed on 19 April.[140] After 19 April, there seems to be a rough average of about two deaths per day from the remaining passengers on the *Pyramus*, until 22 April, though whether they were deaths from cholera or from other illnesses is not known. After 22 April, the correspondence between Gossip and Tupper lessens, with the last full update from Gossip on 30 April, reporting with 'great pleasure' that they have gone 11 days without a cholera death on the island.[141]

The intense management of cholera by provincial government officials over the course of those three weeks demonstrated Nova Scotia's ability to protect itself

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[140] This number comes from assuming from the official announcements that 1202 arrived alive on 9 April, and that 1017 left, bound for New York on 19 April, are correct. This leaves 185 passengers, either dead or alive, within that time frame. According to Gossip, 52 were left alive on the island on 19 April, after the *England* sailed, making it logical that the remaining 133 perished, most of them likely due to cholera, while also having to account for a small portion who fled the scene. This does not include the 46 deaths that claimed to have occurred at sea, once the *England* arrived in Halifax Harbour on 9 April.

[141] MG 100 Vol.222. 30 April 1866. To Tupper, from Gossip. NSARM.

from transmittable disease, with or without the support of Britain. The town risked its physicians, military and naval staff, all of whom came to the aid of emigrants on the island, and worked hard to protect the health of the province. The death of Slayter in the fight against cholera made him a provincial hero in the eyes of many Nova Scotians, only adding to the growing sense of patriotism among natives of the colony by that time. After nearly 40 years of varying levels of success in disease management in Nova Scotia, the confinement of cholera in 1866 to a quarantine station boosted the sense of independence and self-sufficiency felt by the provincial government and its residents.

Chapter Five

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Saint John, New Brunswick: A Case Study

> If it is not a land flowing with milk and honey, it is at all events a land of promise…
>
> - Thomas Baillie. *An Account of the Province of New Brunswick,* 3.

New Brunswick has been an important contributor to the development of agriculture, emigration and trade in eastern North America for centuries. Its geographical location provides a direct route to mainland Canada and the north-eastern United States, and its long-established ports connected by major shipping lanes to Quebec, Prince Edward Island, Nova Scotia, and Maine, means that New Brunswick has always been used to foreign traffic. At the beginning of the nineteenth century, Saint John was the largest and most frequented commercial centre in New Brunswick. As the century went on, large investments in the shipping industry were responsible for significant increases in the size of the merchant marine fleet of the North American colonies.[1] As T.W. Acheson states: 'Shipbuilding had been an important feature of the city's economy for two full generations by 1840 and the Saint John industry was clearly the most significant in British North America'.[2]

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[1] Eric W. Sager and Lewis F. Fischer, 'Patterns of Investment in the Shipping Industries of Atlantic Canada, 1820-1900', *Acadiensis* 9:1 (1979), 20. Sager and Fischer then go on to state that between 1820 and 1914, Saint John registered 1.8 million tons 'dwarf[ing] all other ports in the Atlantic region'.

[2] T. W. Acheson, 'The Great Merchant Fleet and Economic Development in St. John 1820-1850', *Acadiensis* 8:2 (1979), 6.

The intensity of maritime traffic increased in the port of Saint John after 1815; in 1824, Saint John had upwards of 8200 inhabitants;[3] but by the 1850s, the population was closer to 30 000.[4] Most emigrants, depending on their condition and final destination after the transatlantic voyage, would then travel from the Bay of Fundy, along the Saint Lawrence, to Lower Canada, or across the border to the United States. Others, however, for various reasons, stayed in Saint John or would board a domestic vessel or travel by land, to other areas of New Brunswick.

While Saint John was the epicentre of commercial trade and economic activity in New Brunswick, unlike St. John's and Halifax, it was not the capital of the colony. Fredericton was the capital, an inland town located sixty miles away, and the headquarters for provincial politics and colonial affairs. With plenty of agricultural land on offer and an acute need for labour, land companies such as the New Brunswick and Nova Scotia Land Company, organised land settlements for emigrants, pensioners and retired soldiers wishing to make a life in the New World, own their own land and contribute to the physical and social development of the colony.[5] Land companies, ship owners, and the colonial office had their own incentives for promoting emigration abroad, and as Helen Cowan explains, 'The optimistic propaganda of these [land] companies promoted immigration and the growth of the colonies in a way very different from the "information only" policy of the migration commissioners in London'.[6]

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[3] Thomas Baillie, *An Account of the Province of New Brunswick: Including a Description of the Settlements, Institutions, Soil and Climate of that Important Province: with Advice to Emigrants* (London, 1832), 58.
[4] Graeme Wynn, 'Ideology, Society and State in the Maritime Colonies of British North America, 1840-1860' in Allan Greer & Ian Radforth (eds.), *Colonial Leviathan: State Formation in Mid-Nineteenth-Century Canada* (Toronto, 1992), 286.
[5] Helen I. Cowan, *British Immigration Before Confederation* (Ottawa, 1968), 12.
[6] Ibid.

The bright economic prospects of Saint John after the War of 1812 made it an attractive destination for emigrants and their arrival forced an increased awareness of the threat of transmittable disease on their current and potential inhabitants. Communicable illnesses found onboard emigrant ships exposed the city of Saint John to smallpox, typhus, yellow fever and cholera. This chapter presents the threats and subsequent realities of transmittable diseases to residents and emigrants alike in Saint John, between 1832 and 1854. The traffic of emigrant ships to Saint John increased exponentially after 1815. Although several ships were bound for New Brunswick, many others, as was the case with St. John's and Halifax, arrived unexpectedly. The largely unregulated way in which ships were loaded with emigrants in their port of origin meant that Saint John would find itself caring for emigrants, while also struggling to implement protective measures to ensure the health of its own residents.

The purpose of this chapter is to present the ways in which Saint John managed the arrival of emigrant ships, and subsequently, the way in which residents and government shaped new initiatives towards public health in the province. New Brunswick in general, but particularly Saint John, had the greatest number of emigrants bound for their territory, and subsequently, was heavily affected by cholera, smallpox and other infectious illnesses, between 1832-1866, establishing a reputation within the Atlantic region as a city continually managing transmittable diseases, and subsequently, a source of comparison and criticism in the neighbouring colonial capitals of St. John's and Halifax. Presenting the Saint John case study is used to highlight the complex differences between seemingly similar colonial port towns in eastern British North America presented in previous chapters, in order to better understand the ways in which these towns coped with the expected, and many times unexpected, surge of emigration.

This chapter will discuss disease and emigrant healthcare protocols in Saint John over the course of three main time periods: the preparations for an outbreak of cholera in 1832 and 1834, the Irish emigration of the 1840s, and the 1854 cholera outbreak. Cholera visited and revisited Saint John between 1832 and 1866. Adding to the challenges facing colonial authorities from the cholera outbreaks was the mass displacement of destitute and sick emigrants fleeing the famine in Ireland to New Brunswick, which created immense pressure on local government, charities, physicians and residents. Understanding how Saint John received emigrants at the end of their transatlantic voyage helps to clarify the economic, social and colonial strains occurring in the colony, and within a broader 'imperial space'.[7]

Saint John – 1832-1834

The Early Years of Development

Like many port towns in the Atlantic region, Saint John developed through its land- and ocean-based natural resources and its close proximity to mainland British North America and the United States, stimulating industry and international trade as early as the eighteenth century. When, after 1815, Britain terminated its timber trade with the Baltic, handing the monopoly to its imperial possessions in British North America, Saint John quickly became one of the Empire's most essential wood exporting and shipbuilding centres, developing rapidly from a collection of small villages in 1800 to an international industrial town by the 1820s.

With forestry, shipbuilding, and artisan trade increasing dramatically, New Brunswick needed a larger workforce. The burgeoning demand for labour and

[7] Lester explains the term 'imperial space' as a conceptual space where formulated colonial connections, circuits and webs occur. The term lends itself to geographical theories and approaches, as well as the understanding of the formation of multiple trajectories within Empire. For more information, see Adam Lester, 'Imperial Circuits and Networks Geographies of the British Empire', *History Compass* 4:1 (2006), 129.

abundance of space enabled New Brunswick, much like Upper Canada, to offer land ownership to labourers wishing to leave the British Isles and work to develop roads, agriculture and industry in the colony. This conversion of labourers into landowners was discussed frequently between the Colonial Office and representatives in New Brunswick, initially with the intention of planning the maximum number of emigrants, fixed destinations and optimal times for their arrival in a given year.[8] Thomas Baillie, Commissioner of Crown Lands and Surveyor General for New Brunswick, was a controversial British colonial administrator, notorious for his grandiosity, '…loquacious declarations of authority', and overall inability to identify with or gain the respect of local residents.[9] Known for assuming superiority in the colony, and highly disliked by various colleagues and local residents, he was, however, a devote supporter of New Brunswick:[10]

> Next to the protection of our trade, the most essential thing towards our increasing prosperity is a great population; and while the small farmer in England is year after year becoming poorer, and endeavouring to eke our an existence, and pay a high rent and necessary taxes, some of the finest land in the world is open to his labour in New Brunswick, and invites him to cultivate and improve it.[11]

With gypsum, timber and shipbuilding stimulating New Brunswick's economy, and crown lands available for sale, Baillie, not unlike other British colonial administrators, including Buchanan, was enthusiast of emigration. His vision for the colony was sweeping, however, which meant he either was not exposed to, or chose

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[8] CO 385/6. 15 March 1832. 'Land and Emigration Records to North America'. TNA.
[9] Baillie was known for ostentatious displays of wealth and stature in Fredericton. He, at one stage, 'outraged local egalitarian pride by attempting to dress the clerks of his office in uniforms with brass buttons'. For further information on Baillie, see: W.S. MacNutt, 'Baillie, Thomas', *DCB Online* 1861-1870 (Volume X1) (Toronto, 2000).
[10] Ibid. Baillie had a background with the British army, entered the Colonial Office in 1824, and in the same year left for Fredericton. His tumultuous career in the colonial politics in New Brunswick lasted nearly three decades, ending in 1851.
[11] Baillie, *An Account of the Province of New Brunswick*, 2-3.

not to be affected by, the major pressures of increasingly unregulated forms of emigration on the New Brunswick ports.

After 1815, emigrant ships arrived in New Brunswick with varying degrees of success, largely dependant on a multitude of factors. One crucial factor for the preservation of the health of emigrants once in British North America was that vessels did not set sail too late in the year. Snow, ice and sub-zero temperatures made travel into the harbours of New Brunswick, let alone around its inland territories, virtually impossible. A letter written to the Honourable R.L.P. French, Commander of His Majesty's 74th Regiment in Fredericton, from Charles Stewart, a Barrack Sergeant of Great Peaks, New Brunswick, on 9 March 1821, reveals not only the conditions of emigrants arriving at Stewart's post, but what both emigrants and New Brunswick residents had to contend with without government resources, planning or financial support:

> I consider it my duty to let your Honour know how I have been so much distressed with poor emigrants from the mother country this three years past all going to Canada, and numbers of them without money or provisions and in a distressed state for clothing and without snow shoes at this season of the year and a great many of them frozen…
>
> …one of the persons that left this post 13th January was frozen to death upon the lake on the 16th January and is not put in the ground yet by no person his body still remaining on the lake, in the winter 1819 I kept a man 5 weeks was frozen below the Great Falls had neither money nor provisions, 2 more a fortnight I had to keep and numbers […] days and weeks and even in the summer time when the water is low they are going round the shore on their way to Canada, numbers in distressed state, they are my fellow creature and I can not see them perish for want when they come to this post, some of them both hungry and almost naked – and frost bit.[12]

[12] RS 555 – *Provincial Secretary – Immigration Administration Records, 1811-1891*. 9 March 1821. From Charles Stewart to Hon. R.L.P French. PANB. Although I am not sure where Great Peaks was in New Brunswick in 1821, there is a town called Grand Falls on the St John River, which would have been a community on the river route to Lower Canada.

Stewart's account portrays the immense strain in struggling to find means to care for emigrants. It includes a description of a man from County Roscommon, with two frozen feet, wanting to return to Ireland, but without any means of doing so. Stewart asks that Commander French forward his letter to the Lieutenant Governor in the hopes of securing funds to ameliorate the condition of such 'objects of charity' in Great Peaks.

Residents located in towns with high amounts of emigrant traffic throughout New Brunswick saw first-hand the deplorable state of many emigrants after a transatlantic voyage. Communities attempted to respond to this situation through newly created emigrant societies and established church organisations. As early as 1825, the New Brunswick Agricultural and Emigrant Society was instituted for those emigrants in need of advice, support and land applications, with branches located in Saint John and York County. By 1826, however, the society was already writing to Baillie, asking for government grants to offset their sixty-pound debts.[13] Parishes in York County paid 165 pounds 16 shillings and 5 pence between 1828-29 to support the arrival of 'distressed and indigent' emigrants, and in April 1830, wrote a petition to the President of New Brunswick for reimbursement.[14] The majority of funds were spent on clothing, rooms and food.[15] Expenses incurred by the city of Saint John between 1829-30 amounted to 234 pounds 6 pence and ½ a shilling, all going towards the relief of emigrants, and the care of orphaned children of emigrants.[16] The financial accounts of local physicians, charitable organisations, parishes and

[13] RS 555. 15 September 1826. From R. Simonds to Thomas Baillie. PANB.
[14] MG 9 – *New Brunswick Executive Council, Welfare, Almshouse and Public Infirmary, Saint John*. 12 April 1830. Petition from York County to William Black, President of the Province of New Brunswick. PANB.
[15] MG 9. 'Account of Expenses actually incurred by the Commissioner of the Almshouse and Workhouse in the County of York for the support of Distressed Emigrants during the year 1828 and 1829'. PANB. Some emigrants are listed as having clothing supplied to them for upwards of 31 weeks.
[16] RS 555. 'Account of supplies furnished and other incidental expenses incurred and paid by the owners of the poor for the parish of Saint John for the relief of indigent and distressed emigrants from 1 January 1829 to January 1830'. PANB.

municipal governments were rising as the number of emigrants arrived in New Brunswick. With residents in New Brunswick scrambling to find ways to ameliorate the condition of impoverished emigrants, many of whom were ultimately destined for areas beyond their harbours, the threat of cholera would require more extensive and immediate attention, not only for the protection of transient emigrants but also for the growing resident population of Saint John.

Cholera 1832

Demands to accommodate and provide for distressed emigrants, coupled with the pressure from Britain to increase the processing and exportation of timber, meant that the town of Saint John was struggling to keep its head above water. Compounding the situation was the influx of sick emigrants, threatening to expose New Brunswickers to transmittable disease. Unlike other Atlantic colonies, New Brunswick had significant international emigrant and cargo traffic arriving at local towns outside of Saint John. While Saint John began to implement protective measures to prevent outbreaks of transmittable disease in the late 1820s, communities such as Fredericton, Saint Andrews and Miramichi were also in need of executing serious measures in an attempt to safeguard the province. Customs House records state 19 503 emigrants arrived from the United Kingdom into Saint John during the years 1823 to 1831.[17] In the port of Saint Andrews, with the majority of vessels arriving from Ireland destined for the U.S., the total number of emigrants listed from the Customs House records, arriving from 1823 to 1831 was 4044 – while certainly not insignificant for a town of its size, the likelihood is that the actual number of

[17] RS 555. 'An Account of the Number of Emigrants that have Arrived at this Port between 5 January 1823 and 5 January 1831', PANB.

emigrants arriving or passing through Saint Andrews and Saint John was much larger.[18]

On 2 July 1831, a petition was written by the Saint Patrick's Society of the City of Saint John, a benevolent organisation consisting mainly of emigrated Irishmen, regarding the ways in which government needed to improve emigration. It described the hardships endured by

> … many of those unhappy emigrants who arrive here from their native land that they often leave their own country and with bright but fallacious dreams of the wealth which they may in a short time easily acquire in the new world, that they are exposed also to the knavery of agents who assist in deluding them, and of Masters of vessels, who care for little else than a profitable voyage, by which means the vessels are overlooked, the confinement the filth, and the want of proper provisions bring on fevers and smallpox, and they are landed on our shores only to be thrown into an hospital, or to be detained on board their vessels in all the wretchednesss of a quarantine…[19]

The petition asked that the government appoint agents at every port in Britain, in order to '…greatly tend to their health and comfort, and to their reaching the Provinces free from diseases'.

This petition demonstrates a keen awareness by emigrants and residents of the real deficiencies in the existing system of emigration to New Brunswick. It argues that without proper supervision and authority in the ports of departure, transmittable disease will undoubtedly find itself in the ports, cities and country towns of British North America. The petition was answered on 13 August 1831, by Downing Street with a simple statement that while some recommendations were in the midst of being dealt with, others could not be implemented. It ended by asking that further petitions

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[18] RS 555. 'An Account of the Number of Emigrants that have Arrived at the Port on such of the years 1823, 1824, 1825, 1826, 1827, 1828, 1829, 1831 and up to January of the Present Year [Port of Saint Andrews]'. PANB. Other than Liverpool, all ports listed were from Ireland.

[19] *New Brunswick Despatches Received from Secretary of State in London 1831-32*. 'From The Saint Patrick's Society of Saint John, New Brunswick, to Viscount Goderich', 2 July 1831. LAC.

'…from certain persons styling themselves the Saint Patrick's Society', should be made directly to the Lieutenant Governor of the Province, Sir Archibald Campbell.[20]

The filthy conditions of many of the country towns and urban centres of Ireland and England on the advent of cholera in 1831, together with the great exodus of thousands of emigrants, meant that it was only a matter of time before the disease reached ports in New Brunswick. With 15 years of experience under their belt in 'managing' emigrants, on 21 May 1831, Goderich sent an extract of a statement by Earl Byron to the President of New Brunswick, William Black, arguing the need for an emigrant agent in New Brunswick. He states that a two-year appointment should be made in Saint John, at an annual salary of £300, after which Lieutenant Governor Campbell will assess whether the appointment should be granted another term.[21] With the announcement drawing comparisons to the importance of an emigrant agent in Lower Canada, it was obvious that when it came to appropriate protective measures, the frequency of emigrants arriving in Saint John needed to be considered similar to that of Quebec.

Warnings of cholera's transmission into the North American colonies came as the devastation wrought by the disease increased throughout Britain and Ireland. On 30 June 1831, Goderich wrote a sober letter of warning to Campbell on the need for ensuring protocols for the preservation of health in New Brunswick. Along with over fifteen pages of attached Parliamentary Papers from the House of Commons on the status of cholera in Russia, the pathology of the disease and theories of its transmission, he warns: 'I should apprise you that it is highly contagious in its nature,

[20] From Downing Street, to Sir Archibald Campbell. 13 August 1831. *New Brunswick Despatches Received from Secretary of State in London 1831-32*. LAC.
[21] CO 188/50. 21 May 1831. From Goderich to Campbell. Extract taken from Lord Byron. TNA.

and must therefore, be met by those precautions however severe, which are considered necessary against the plague'.[22]

In the fall of 1831, with cholera making its way from Sunderland to the inner parts of Britain, the general conditions in Saint John, in terms of cleanliness, health and well-being were hardly better than in communities and cities in the British Isles. Although the prisons tended to remain clean, the poor houses, and those areas of town frequented by emigrants, were in particularly pitiable condition. While Saint John struggled to ameliorate public hygiene and sanitation in town, Lieutenant Governor Campbell focused largely on defensive tactics, similar to Halifax that year, in the form of quarantine protocols for Partridge Island. Campbell was adamant on the importance of quarantine in the face of cholera, and as Geoffrey Bilson remarks, 'The health officer on Partridge Island himself spent the summer isolated from the population, communicating only by speaking trumpet'.[23]



Figure 5.1. Sketch of Partridge Island by A.J. Hill, *Canadian Illustrated News* (27 January 1871).

[22] 30 June 1831. From Goderich to Campbell, *New Brunswick Despatches Received from Secretary of State in London 1831-32*. LAC.
[23] Geoffrey Bilson, *A Darkened House: Cholera in Nineteenth-Century Canada* (Toronto, 1980), 105. There is no footnote next to this statement to demonstrate where Bilson found this piece of information.

By April 1832, the newly installed Board of Health reported Campbell's wishes for quarantine on all vessels, claiming that '…[members of the Board] have been anxious to enforce a strict and deliberate examination of all vessels arriving in this harbour from places where diseases of a contagious nature have been however recently to prevail'.[24] While Campbell focused narrowly, but naturally, on the importance of quarantine measures executed on Partridge Island, parishes located in the filthier, overpopulated and under-resourced areas of Saint John felt vulnerable to the threat of disease. By July 1832, petitioners in Saint John were writing to the Executive Council asking for assurance that parishes would be compensated for the amount of money they have put into cleansing the 'dense[r] populations' of town, particularly the Parishes of Portland, Lancaster and Saint Martins, which may 'aggravate the malignant cholera'.[25] At the end of July, Campbell announced that he would put £1000 towards cholera hospitals in the main ports of New Brunswick, after the Saint John Board of Health petitioned for a hospital to receive potential cholera patients in Portland.[26]

On 15 May, Saint John newspaper, the *Weekly Observer*, reported the brig *Susan*, which had arrived into Saint Andrews from Dublin, with cholera onboard. It reports 'much alarm and anxiety' in Saint Andrews, while stressing that there is no official account of cholera prevailing in Dublin as of yet. A visiting physician, Dr. Thomson, is cited as saying that 'although the disease had been of a virulent character, and fatal in some cases, he found after his second visit that it was easily removed by cleanliness; the three persons who were very ill on the arrival of the

[24] RS 315 – *Board of Health Records, Cholera 1834-35.* 13 April 1832. From Secretary to the Board of Health to Provincial Secretary. PANB. This letter also states that it will keep up the quarantine until it '…has been fully ascertained that Asiatic cholera has not existed in Britain, or has entirely disappeared'.
[25] MG 9. 12 July 1832. 'Petition for Pecuniary Aid', Saint John. PANB.
[26] 31 July 1832, *Weekly Observer*, 2. PANB.

vessel were getting much better on Wednesday'.[27] The report remains confident that 'the disorder resembling the Cholera Morbus' was confined to the vessel, and that there was no increase in reported cases.[28]

On 21 July, it was reported that the brig *Tyro*, seven days out of New York, had arrived into Saint John with cases and deaths from cholera. John Paddock, health officer on Partridge Island, assured the community that no communication with the *Tyro* would occur while in quarantine. By the end of July, only two passengers remained sick with cholera. On 31 July, an article in the *Weekly Observer* raved over the bustle on Partridge Island, observing that 'Our Quarantine ground begins to exhibit a business-like appearance! There being now no less than five vessels majestically riding at anchor at the place of rendezvous with the yellow flag floating in the breeze'.[29]

While residents observed the high traffic flow of vessels coming and going past Saint John, Paddock continued to witness the disastrous state of emigrants arriving at Partridge Island. On 21 August, the brig *Heber* arrived from Belfast in such distress that the emigrant agent and the Overseers of the Poor in Saint John were asked to assess them and supply provisions. The Master, whose conduct, according to the paper, 'should not be allowed to go unpunished', was accused of supplying meagre amounts of provisions, with passengers found neglected and dirty. Paddock elaborates in a report to the *Weekly Observer*:

> Nothing can exceed the misery of these unfortunate people, who have been short of provisions for some days past, not only their own stock but that of the ship is completely exhausted, and the major p[ortion] when they arrived *had not tasted a mouthful for two days – they are*

[27] 15 May 1832, *Weekly Observer*, 2. PANB.
[28] *Weekly Observer* reported: 'From a gentleman who has recently been at much pains in taking the census of [Saint Andrews], we bear the following results: Males Over 16 years of age: 543; Males Under 16 years of age: 434; Females over 16 years of age: 554; Females under 16 years of age: 471'. 12 June 1832, *Weekly Observer*, 2. PANB.
[29] 31 July 1832, *Weekly Observer*, 2. PANB.

> *wallowing in filth, and present altogether a sad spectacle* [original italics]. I believed their necessity last night by conveying on board such provisions as was at hand.[30]

Descriptions of emigrants in such poor condition persisted throughout the New Brunswick ports, making officials increasingly concerned about their circumstances, the cause of death onboard, and the threat of infection.

By the end of the year, no official cases of cholera were reported on land in New Brunswick.[31] After over £3000 spent on protective measures against the cholera outbreak, in March 1833 the Legislature passed 'An Act to Prevent the Spreading of Infectious or Pestilential Distempers', and with that, Quarantine Laws, and an official Board of Health were instituted in several areas throughout the province of New Brunswick.[32] At the time, the terms 'infection' and 'contagion' were used to distinguish the transmittable nature of diseases. Contagion was associated with diseases such as smallpox, which were clearly transmitted from person to person. Infection, on the other hand, was more contingent, and typically regarded as a more indirect transfer of disease, either through merchandise or clothing, and potentially stimulated by certain weather patterns. As Mark Harrison explains, both theories of disease were used to understand and regulate public health protocols and commercial initiatives in most U.S ports in the early nineteenth century, and 'covered a range of possibilities'.[33]

Throughout the disease outbreaks in the United Kingdom, Goderich kept in communication with Campbell on the particulars of the disease, the arguments for and against quarantine, and descriptions of the way in which Britain was attempting

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[30] 21 August 1832. *Weekly Observer*, 2. PANB.
[31] *The Weekly Observer* re-printed an article from the *Miramichi Gleander* reporting 'contagion' onboard the *Terry*, creating a 'good deal of anxiety' and currently in quarantine at Miramichi. 5 June 1832, *Weekly Observer*, 2. PANB.
[32] CO 188/50. 14 July 1834. From Campbell to Stanley, Colonial Office. TNA.
[33] Mark Harrison, *Contagion: How Commerce has Spread Disease* (New Haven and London, 2012), 64.

to manage outbreaks at home. In a letter written to Campbell in early March 1832, Goderich attempts to assure him by explaining: 'For the British North American provinces, extreme poverty is happily so little known that no reason exists there for that anxiety with which the progress of this complaint has been with too much reason contemplated amongst the crowded societies and destitute poor of Europe'.[34] He finishes by attaching more official scientific papers on cholera in Britain, as well as a statement that no more than £500 can be taken from the Treasury for the support of poor emigrants in quarantine in New Brunswick.

As with the rest of the Atlantic region, cholera failed to find its way to New Brunswick communities fearing its first virulent mark on the western world in 1832. In 1833, £1193.16s.7d. went into a Passenger and Emigrant Fund, accumulated from duties paid by emigrants passing through New Brunswick ports. This account contributed £200 to the development of buildings on Partridge Island, and went towards the payment of temporary physicians on the quarantine island.[35]

New Brunswick scrambled to cleanse its ports, take care of emigrants threatening to infect their communities, and implement preparatory measures under the threat of a highly contentious disease, and the colony was able to remain cholera free in 1832. Considering the amount of emigration and cargo traffic from overseas, as well as from Lower Canada, Saint John was extremely lucky to avoid infection. The close contact between New Brunswick and Lower Canada meant that New Brunswickers were all too aware of the devastation of cholera, as it found its way to Montreal, Quebec, Kingston and York that year. In 1834, the threat of cholera returned to British North America, and the financial, physical and psychological costs

[34] From Goderich to Campbell, 2 March 1832. *New Brunswick Despatches Received from Secretary of State in London 1831-32*. LAC.
[35] CO 188/50. 'Passenger and Emigrant Fund for the year 1833'. TNA.

of preparing for cholera would have to be considered once more by officials and residents in the colony.

Saint John Cholera Outbreak – 1834

After 1832, some preparatory measures established in the event of a cholera outbreak in Saint John, Saint Andrews, Miramichi and Fredericton remained, and were even expanded upon, while others fell through the cracks. Campbell's tactics for managing cholera in 1832 focused primarily on quarantine regulations and the examination of emigrants, but other public health protocols in New Brunswick now needed to be addressed. John M. Wilmot, Mayor of Saint John, wrote to Campbell in April 1833 on the establishment of a Board of Health in the town and county. He asserted that those appointed to the board must have extensive knowledge of the quarantine laws, most likely a criterion recommended by Campbell. Dr. Bayard, a local physician, was one of those named to the Board, as well as '…many of the most intelligent, respectable and influential men of the community as can be obtained'.[36]

Once the Saint John Board of Health was established, a proper hospital to receive those stricken by infectious disease became a priority. In 1833, the newly established Board paid £362 for the erection of a new hospital, '…for the reception of such persons as may be attacked by cholera or other contagious disease, which building has been for time past in readiness for the reception of patients'.[37]

[36] RS 343 – *Archibald Campbell Records: 1833*. 27 April 1833. From Wilmot to Campbell. PANB.
[37] RS 343. From Charles Simonds, Chairman of the Saint John Board of Health, to Campbell. PANB. This letter was written in order for Campbell to repay the costs of the hospital, claiming '…they had to draw money on their own responsibility to pay the several bills'.

By 1834, Saint John, Miramichi and Saint Andrews had emigrant agents operating in port with their payment listed under the King's Casual Revenue.[38] While the government of New Brunswick remained active against the spread of infectious disease after the 1832 scare, its ability to control transmittable disease was ultimately cut off at the quarantine stations of its major ports. Emigrant vessels continued to arrive from the 'Parent State'[39], on crowded ships, sick and in absolute desperation throughout New Brunswick. The threat of cholera in 1834 only intensified the colonial and ethical dilemmas felt by residents, as physicians, charities, and the local population – some of whom were received as emigrants only years prior – strove to care for those arriving, all with the capability to wreak havoc on the health of Saint John.

Financial support for emigrants entering New Brunswick came mainly from an imposed emigrant tax issued in February 1832. The duty charged five shillings per passenger if the vessel contained certification as an emigrant ship bound for the North American colonies, and ten shillings if the vessel possessed no such papers. As the Board of Health states, 'The money arising [from the tax] is applied expressively [*sic*] by the act towards harbouring destitute and distressed emigrants, and to assist them in reaching their several places of destination within the province'.[40] Other sources for emigrant support were not as obvious, with government resources, colonial treasury grants and local charitable donations having to be drawn on to make up much of the overall costs.

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[38] CO 188/50. 'King's Casual Revenue in the Province of NB between 1st January and 30th June 1834'. TNA. Those payable are Alexander Wedderbrun, Saint John; Henry Cunard, Miramichi; and Beverly Robinson, Saint Andrews.

[39] RS 555. 'Extract of letter from the North American Colonial Association of Ireland to the most noble the Marquis of Normandy Her Majesty's Principal Secretary of State for the Colonies, 1839'. PANB.

[40] CO 188/50. 30 May 1834. 'Return of the following from the Board of Health established at Saint John, New Brunswick'. TNA.

Rates of emigration continued to increase after 1832, with Saint John under immense pressure to find appropriate ways of caring for sick, contagious and potentially cholera-infected emigrants in its town, and the strains were beginning to show. For years, a building in Lower Cove, an area of Saint John, was leased as an immediate shelter for destitute emigrants upon arrival, but, in the summer of 1834, when the Board of Health began to consider ways for it to be used as a hospital for emigrants, local residents threatened to have it destroyed. On 22 July 1834, the Board stated that it was still unable to find proper buildings designated for inhabitants with cholera, claiming that '…such is the repugnance of the inhabitants to the erection of anything of the sort in any vicinity, that no lot can be procured on which an erection can be made'.[41] Inhabitants in Saint John were keenly aware through publications in newspapers and word of mouth of the devastation of cholera in other areas of British North America, Ireland and Britain. Although New Brunswick had the emigrant tax, Judith Fingard states that residents strove to remain directly involved in the way in which measures were implemented.[42] After nearly two decades of searching for funds, organising charitable assistance, and, in some cases, implementing legal measures to ameliorate the condition of new settlers, the threat of cholera-carrying emigrants unnerved New Brunswick communities. Much to the Board's frustration, major objections by residents throughout the town occurred over the use of buildings used for cholera relief.

[41] RS 315. 22 July 1834. From the Saint John Board of Health, to the Provincial Secretary. PANB; A second attempt to find a hospital was proposed as part of a building in Portland. The Board made the necessary preparations in the building for patients only to find it raided over night, leaving it entirely demolished.

[42] Judith Fingard, 'The Relief of the Unemployed Poor in Saint John, Halifax, and St. John's, 1815-1860', *Acadiensis* 5:1 (1975), 33.

By 1 July, 4 153 emigrants had already arrived into Saint John that year, with 300-400 already in quarantine on Partridge Island.[43] Although there was not a cholera case in Saint John over the summer months, the outbreak in Halifax was announced in August 1834. A town of significant commercial and military importance, with less emigrant traffic, but with frequent domestic traffic to Saint John, Halifax was in the process of managing the Atlantic region's first bout of cholera – fuelling a state of panic in New Brunswick. Reports from the Board of Health in Halifax were published in Saint John newspapers, which included accounts of the effects of the disease, re-printed from Nova Scotian papers.[44] Over a month later, on 23 September, Henry Cooke reported to the Chairman of the Board of Health that E. Holder, a man prone to excessive alcohol consumption, was sick and eventually died of 'common' cholera in town. Cooke regarded intemperance as an important contributor to Holder's case, which he finished by stating: 'We hear that the disease has first shown itself by attacking such characters; remove them and we remove a strong hold the disease has on the community'.[45]

While Cooke's report was reluctant to declare a cholera outbreak solely from Holder's death, his underlying message was that residents of Saint John would need to be clean in order to successfully ward off infectious disease. At a meeting of the Board of Health on 23 September, the board was insistent upon appointing three additional members, 'on consent of the near approach of the cholera morbus'.[46] On 24 September, cases of cholera were announced in York Point, an area of Saint John frequented by emigrants and lower class residents. Although another man named

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[43] 1 July 1834, *Weekly Observer*, 4. PANB. In the same issue, it announced cases of smallpox on Partridge Island. The Board of Health passed a resolution, fining anyone £5 if found on the island without the authority of the Board.
[44] 26 August 1834, *Weekly Observer*, 3; 9 September 1834, *Weekly Observer*, 2. PANB.
[45] RS 315. 23 September 1834. From Henry Cooke, to the Chairman of the Board of Health. PANB.
[46] RS 315. 23 September 1834. 'At a Meeting of the Board of Health for the City and County of Saint John'. PANB.

John McArthur was struck badly with a case of cholera, the Board was still reluctant to use this 'doubtful character' as a reason to declare an outbreak in the city.[47]

On 25 September, with several cases of cholera attended to by Dr. Bayard, the Board of Health, with some diffidence, declared that cholera had struck Saint John.[48] Bayard's correspondence continually insisted that the cases, including those he was treating in his own practice, were 'common' cholera, not of the Asiatic variety, and that in his opinion there was not enough infection to officially report the cases as malignant in nature. The Board therefore concluded, with advice from Bayard, that it would continue to issue bills of health until further cases of asiatic or malignant cholera were found active in the town.

A week later, physicians in Saint John reported 11 cases of cholera to the Board of Health – with five dead, three recovering and three remaining.[49] The Board of Health in Saint John and in Fredericton kept in close contact with one another, sending regular updates on any cases of cholera, and describing the advance of the disease from observing individual patients.[50] Another statement on 4 October claimed reassuringly that while there was cholera in town, no new cases had been found that day, but it was clear that cholera had made its mark, creating fear amongst residents that it could only get worse before it got better.

On 30 September, the *Weekly Observer* acknowledged that there were reports of 'malignant or Asiatic cholera' in town, but believed after its own investigations, asserted that it '…cannot discover there are any sufficient grounds to create alarm

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[47] RS 315. 24 September 1835. From Hamilton, Boyle, Walker and Paddock, to Partelow, Clerk to the Board of Health. PANB.
[48] RS 315. 25 September 1834. 'At a Meeting of the Board of Health for the City and County of Saint John'. PANB.
[49] RS 315. 2 October 1834. 'At a Meeting of the Board of Health for the City and County of Saint John'. PANB.
[50] RS 315. 2 October 1834. From Saint John Board of Health, to Fredericton Board of Health'. PANB.

among our citizens'.[51] However, once cholera was confirmed in town, newspapers re-printed Board of Health statements on reported cases each week, and by 11 November, they announced 163 cases and 47 deaths from cholera. Reports from papers such as the *Weekly Observer* suggest a worry over the damage to business in Saint John from cholera. On 14 October, the paper writes of the need for the regular issuing of statements by the board of health in town in order to 'satisfy the public mind both in town and country, - more particularly the latter, where, it is well known, erroneous reports are often prevalent'.[52]

Throughout the fall of 1834, until December, the Board of Health posted regular updates and communications with local newspapers in Saint John. By the end of November, nearly 50 died of cholera in a town of over 20 000 inhabitants.[53] The measures taken by the community to combat the disease were immense, with charities, town councils, boards of health and the government coming together to support ways of stemming the tide of cholera in New Brunswick.

Heavy emigration, a lack of control over the standards and conditions of emigrants, and the threat of cholera meant that those residing in the ports of New Brunswick would need to find whatever means they could to preserve the health and wellbeing of their people. In Saint John, throughout 1832 and 1834, residents realised that the unhygienic conditions in their town, and those living amongst them, would only increase the likelihood for the spread of disease. Although Campbell's focus, particularly during the height of a threat or outbreak of cholera, was the

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[51] 30 September 1834, *Weekly Observer*, 2. PANB.
[52] 14 October 1834, *Weekly Observer*, 2. PANB; The Board of Health acknowledged a £5 donation '…to assist the Board of Health in their humane exertions', and assures the anonymous donor that they will apply the amount 'with their best judgement'. 4 November 1834, *Weekly Observer*, 2. PANB.
[53] The Saint John census for 1834 was published in the *Weekly Observer*, stating 20 568 residents in the County of Saint John (which includes the parishes of Portland, St. Martin's and Lancaster). It also stated the 1824 census, taken from the same districts, reported a population of 12 907. See 9 December 1834, *Weekly Observer*, 2. PANB.

implementation of quarantine aboard vessels, members of the community devised their own methods to fight against an outbreak. Prior to the cholera threat, residents in New Brunswick became accustomed to finding means of caring for lower class residents and destitute emigrants. Practical ways of improving the condition of the poor, such as the distribution of food and clothing, were put in place despite limited access to necessary funds.[54] The threat of cholera and the divisive debates surrounding its potential to infect a community inevitably highlighted the lives of paupers and emigrants in Saint John, and their insalubrious environments.

By 1834, improvements in public health protocols occurred in Saint John, fuelled in most part by the acute fear of the real presence of cholera. The government and the public were active in enforcing preparatory measures; however, emigration from Britain and Ireland continued unabated. Without control, authority, or even communication and cooperation regarding the condition by which ships sailed from the departure ports in the British Isles, New Brunswick would continue to experience the fear and uncertainty of sudden threats to the health and prosperity of its communities. After 1834, Saint John was acutely aware of its vulnerability to infectious disease, however, emigration continued to filter in from Britain and Ireland at an unprecedented rate. By the 1840s, coastal towns in New Brunswick would struggle to maintain public health protocols, financial resources and the capacity to offer assistance as hundreds of thousands of England's and Ireland's most unwanted and uncared for battled their way across the Atlantic.

[54] MG 9. 12 July 1832. 'Petition for Pecuniary Aid', Saint John. PANB.

The Inter-Cholera Years – 1840s Irish Emigration and the Famine Ships

Early 1840s Emigration

Following the 1832 and 1834 scares, port towns throughout New Brunswick were reminded of their vulnerability to cholera. Cholera had finally made its mark on the province, and it was apparent that without forced protocols controlling the way in which emigration was managed in the departure ports, the health and wellbeing of those in New Brunswick would be in constant danger. The fear, hysteria and general chaos ensuing from the threat of cholera made many residents increasingly nervous at the prospect of another epidemic; however, the number of emigrant ships only increased the following year. While the Saint John Board of Health quoted £1139.19s.9d. in expenditures in 1834 'to arrest the progress of cholera',[55] the Report of Sick Emigrants in 1836 recorded £463.11s.9d. spent on relief for emigrants in New Brunswick.[56] Although the direct expenditures on cholera relief declined, significant costs were still being shouldered to care for emigrants in poor circumstances. While there were no serious threats to public health in 1835, communities receiving emigrants would continue to absorb much of the financial burdens. If New Brunswick were to remain disease-free, its success would derive from its own initiatives rather than through attempts to enlist the co-operation of port authorities in Britain.

During the 15 years that followed, yearly emigration patterns from the British Isles to New Brunswick varied remarkably. B. Robinson, the Provincial Treasurer, stated that Saint John received 5 672 emigrants in 1836, 6 977 in 1837, and only 692 in 1838.[57] The volatility in numbers meant that societies, boards, agents and other support groups in public health set in place at a time of mass emigration could

[55] MG 9. 16 January 1835. 'A meeting of the Board of Health'. PANB.
[56] RS 555. 'Account of Expenditure on Emigrants made by the Overseers of the Poor for the Parish of Saint John from the 31st March to the 31st December 1835'. PANB.
[57] RS 555. 28 August 1839. 'Statement of Emigrants arrived at St. John in the Province of New Brunswick in the years 1836, 1837 and 1838', signed by B. Robinson, Provincial Treasurer. PANB.

become lax, lacking purpose and permanency amongst communities in New Brunswick during a low emigrant season. Dr. George Harding, Health Officer for Partridge Island, was a leading physician in Saint John in managing epidemic protocols and emigrant quarantine for over 20 years. Throughout the 1840s, Harding battled fiercely to receive payments for work that he claimed was accomplished while hired by the Board of Health, with some members of government arguing that he was declaring too much. In the years when a local Board of Health deemed itself unnecessary to form and meet during an emigrant season, no organised body was available to hear allegations or assess statements made by residents. As Harding pointed out in a letter to Lieutenant Governor Colebrooke: 'That the Board of Health having ceased to exist, your petitioner, hath no remedy whatever save by application of your Excellency, that justice may be done in the provider'.[58]

While Harding's earnings were an ongoing debate, ships arriving in New Brunswick with sick emigrants meant that in the absence of a Board of Health, infection between emigrants and local residents could occur without a medical authority or organised measures in place to manage the outbreak. With Boards of Health still considered temporary makeshift organisations, by the early 1840s, emigrant societies emerged as important associations in port towns as well as inland communities. Kent County, Miramichi and Queen's County had all either established, or sought applications for the formation of, their own immigrant societies by 1841.[59] The prime responsibility of these societies was to offer help and advocacy for emigrants in need of shelter and employment, as well as provide individual medical

[58] MG 9. 1 July 1843. To Colebrooke, From Harding. PANB. Harding is claiming that he is still owed £55 13 1 for his work as Health Officer to the Saint John Board of Health, on Partridge Island.
[59] RS 555. 11 October 1841, 'The Kent Emigrant Society'; 26 August 1841, 'Rules and Regulations of the Miramichi Immigration Society'; 8 November 1841, 'At a Meeting of the Emigrant Society for Queen's County'. PANB. The meeting of the Queen's County Emigrant Society stated that on 27 October 1841 they resolved to form an Emigrant Society, but that they are still waiting for a subscription in order for the society to carry forth its plans.

aid, all in an attempt to encourage prosperity in the new land. Infectious disease was one of many issues brought about by the arrival of emigrant ships, and in years without severe illnesses on board, supportive bodies would still be required to manage those arriving from overseas.

The variability in numbers of emigrants arriving in Saint John caused instability. Shipping returns, particularly from heavily trafficked ports such as Saint John and Saint Andrews, might list a vessel arriving with 20 emigrants on board, and on the same day, one from a different origin would arrive, unannounced, and carrying over 400 passengers. Unpredictability was a consistent feature of emigration throughout this period, making effective disease preparation and prevention frustrating, and at times, utterly impossible. These kinds of complexities made the management of, and subsequent attitudes towards, public health remarkably diverse and localised throughout New Brunswick.

Although cholera stimulated worry and hysteria in the early 1830s, by 1840, when illness struck, it was often smallpox, typhus and dysentery that caused havoc. In 1841, Gloucester County began vaccinating residents and new immigrants against smallpox by the hundreds, with nearly 820 treated in Carquet. In a letter to the Provincial Secretary dated 27 October 1841, John Saunders of the Executive Council stated that the Board of Health in Gloucester was asking for a £200 grant to help pay for the costs of the vaccinations, which came to a total of £208.9s.0d. When asked to give his opinion, Saunders described the expenditures as 'a gross misapplication of the public money'. [60] The Board of Health at Miramichi claimed £157.5s.9d. in expenditures in July 1839 for the implementation of preventative measures against

[60] MG 9. 27 October 1841. To Provincial Secretary, from John Saunders. Fredericton. PANB.

infectious diseases.[61] In Saint Andrews, the Almshouse had been constructed since 1824 to help house the local poor and destitute emigrants, and as James Whalen points out, without a public hospital in New Brunswick until 1865, almshouses instituted in New Brunswick functioned as much as hospitals as they did shelters.[62] Funds and facilities were put in place in areas throughout the province, including the Sick and Disabled Seamen's Account in Saint Andrews and Saint John, a Provincial Emigrant Fund, and a Provincial Marine Hospital in Saint John – all created for the purpose of finding ways to preserve health and prevent infection within their communities from the threat posed by foreign arrivals.

Justices of the Peace in different parishes and towns in New Brunswick appointed three individuals to act as overseers of the poor. These persons would report on the state of the poor at the General Sessions, and were responsible for requesting necessary funds from the House of Assembly.[63] Overseers of the poor were able to apply for direct funds for those in need; however, in 1844, John Kerr, Chairman of the Committee of Alms and Workhouse in Saint John, remarked on the number of emigrants at the Almshouse, and the inability for those running the Almshouse to locate immediate funds to support sick and needy emigrants on arrival.[64] He requested that the Almshouse have permission to access funds directly from the Executive Council. Charitable and government-funded organisations of this kind, dealing constantly with varied and unpredictable emigration numbers, struggled to find adequate and timely sources of financial support for emigrants.

Even with the almshouses, the overseers of the poor, emigrant societies and other welfare institutions formed in Saint John and throughout the rest of New

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[61] MG 9. 17 July 1839. To Provincial Secretary, from Cunard. PANB.
[62] James M. Whalen, 'Social Welfare in New Brunswick, 1784-1900', *Acadiensis* 2:1 (1972), 58-9.
[63] Whalen, 'Social Welfare', 54.
[64] MG 9. 20 June 1844. To Lieutenant Governor, from John Kerr, Chairman of Committee of Alms and Workhouse. PANB.

Brunswick in the early 1840s, nothing prepared the province for the mass influx of hundreds of thousands of emigrants from Ireland to North America in 1847. The dire state of many ships arriving unannounced was one thing, but what was extraordinary was the volume of Irish emigrant vessels, and the sheer numbers of impoverished men, women and children aboard each ship. Saint John and Saint Andrews bore the initial brunt of Irish emigrants to New Brunswick in 1847.[65] Considering how these ports attempted to care for those arriving from Ireland, whilst also protecting themselves, allows us to better understand the financial, moral and colonial dilemmas presented to those throughout the province.

The Irish Famine: Saint John – 1847

By 1840, the population of Saint John had risen to roughly 27 000, strengthening its status as one of the largest centres in British North America.[66] As the city grew, its economy diversified, largely influenced by turbulent demands in the timber trade, expansion of artisan culture, growth of the military, and overseas immigration. Although the city had been cholera-free for nearly ten years, what continued to occur, and instil worry, were the seasonal deluges of emigrants. While other diseases continued to wreak havoc onboard emigrant ships, residents of Saint John continued to be reminded of the dangers associated with emigration from the British Isles. In the years to follow, however, the arrival of emigrant ships would only increase in frequency, raising the level of anxiety over transmittable disease outbreaks in New Brunswick.

[65] For more information on Saint Andrews, and their comparative dealings with emigration and cholera in the Atlantic region, see Chapter Six.
[66] Acheson, 'The Great Merchant Fleet', 6.

The Colonial Land and Emigration Office stated that 28 280 emigrants left the British Isles for Canada in 1841; in 1842 the number soared to 44 692.[67] Although, as the documents always made clear, a large portion of these emigrants went on to the United States, Saint John, second only to Quebec, was the initial landing port for a significant number of those arriving. In 1845, a year which Emigrant Agent Perley described emigrants as being in 'general good health', 6133 individuals arrived in New Brunswick.[68] What Perley identified as being exceptionally difficult was transporting emigrants from the centres of initial arrival, to where they were required in the agricultural areas of the province:

> No funds whatever being at my disposal, the various charges connected with forwarding immigrants to the rural districts, and certain unavoidable expenses consequent on the arrival of so many persons within a short period, was borne and paid by me. During the emigration season, my salary was wholly expended in this way, and as amelioration for the very arduous, hampering and important duties of my office, at that busy period, I have only the gratification of feeling, that I have endeavoured, to the best of my ability, to discharge those duties fully and faithfully.[69]

Perley continued by stating that the need for labour in New Brunswick varied year to year, and that regardless, the attraction of wages and work in the U.S. meant that most emigrants would gravitate to America. The U.S. had much to benefit from this scheme. Emigrants were received, nursed back to health, and supported with local charity in their initial port entry, only to leave, taking their skills and renewed health with them south of the border.

In April 1847, with an entire season of emigration still to come, the ship *Coronation* arrived in Saint John from Liverpool, after 25 days at sea, with two

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[67] MG 9. 20 November 1847. Statement from Elliot, Colonial Land and Emigration Committee. PANB.
[68] RS 555. 'Report for the Year 1845'. To Colebrooke, from Perley. PANB. The numbers of emigrants stated are also divided into their receiving ports, with 26 landing in Miramichi, 557 in Saint Andrews, and 5550 in Saint John.
[69] Ibid.

crewmembers infected with smallpox.[70] The boat was put in quarantine, and three days later, Harding sent a letter to the Mayor, stating that he was to resume his 'usual' duties as quarantine officer on Partridge Island for the coming quarantine season, beginning 1 May, which included residing on the island for six months.[71] Harding was needed immediately with smallpox announced in quarantine, a feared illness amongst those living in Saint John.

That spring, the Saint John papers continued to remark on ships arriving from the British Isles, and the appalling state of their emigrants. On 9 April, it was reported that the *Thomas W. Sears* had arrived from Liverpool, at sea for nearly two months, with 24 dead from fever and dysentery out of the original 141 who embarked from Britain. It was reported in the *Morning News* that the port physician, Dr. Smith, declared another 20 passengers with fever at Partridge Island, who would have to be taken to the Almshouse, 'where a number of them will, without doubt die'. After Smith boarded the ship for assessment, he '…found it to be in such a state of filth so as to oblige him to forbid its being hauled up to the wharf until purified'.[72]

By the end of May, Harding was overwhelmed with emigrants on Partridge Island. On 27 May, Harding reported the *Dealy* arriving from Bantry, in County Cork, with 169 passengers originally on board, 22 deaths over the course of the passage, and 40 currently sick with fever. Amidst all of this, a new building was being constructed on the Island, which he claimed '…is progressing rapidly, although not raised yet'.[73] As patients rose in numbers, on 29 May, Harding stated:

> I have the Hospitals full, the system I must and am adopting is by taking as many as possible, and the worst cases into Hospital – and putting the others under medical treatment and the free use of chloride of lime, whitewashing and pure air within vessels, as all the

[70] RS 427. 10 April 1847. From Health Officer Peters, to the Mayor. PANB.
[71] RS 427. 13 April 1847. From Harding, to Mayor. PANB.
[72] 9 April 1847, *Morning News*, 3. PANB.
[73] RS 427. 27 May 1847. From Harding, to Mayor. PANB.

> buildings on the Island would not contain the sick and prostrated, that are coming – and I have no other alternative, than to act as I am doing.[74]

Even with improvements made to facilities earlier in the decade, including the construction of additional buildings, Partridge Island was at capacity. Harding finished his letter by remarking on the increasingly warm weather, well aware of famine and sickness in Ireland, and that May only marked the beginning of the 'quarantine season', with the bulk of emigrant ships yet to come.

Days later, Harding wrote another letter to the Mayor of Saint John, continuing to explain the crowding on Partridge Island, and the need for further support, particularly when it came to the supervision of emigrants inclined to escape quarantine. Without proper help on the island, Harding had to resort to whomever he could find, explaining: 'I had one of the passengers, out of one of the vessels in quarantine making coffins the last day, or two for his sons, - and a female or two I think might be procured in the same way for a small sum.'[75] Without space, Harding pointed out, it was impossible to separate the healthy from the sick, particularly with diseases such as smallpox occurring in quarantine. On 14 June, a £500 advance was granted to the Mayor of Saint John out of the £3000 Provincial Emigrant Fund to enable organisations to begin providing immediate relief for those in need.[76]

On 15 June, the *Weekly Observer* stated that unauthorised communication was forbidden with Partridge Island during the '…prevalence of sickness amongst emigrants at that post'.[77] In July, a list of emigrants who had died at the hospital on

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[74] RS 427. 29 May 1847. From Harding, to Mayor. PANB.
[75] RS 427. 31 May 1847. From Harding, to Mayor. PANB. Earlier in the letter, Harding mentions the need for another nurse. The reference to more women building coffins seems odd, and it may be that he is referring back to his need for a nurse when he mentions 'a female or two'. Harding also proceeds to claim that two men, James Cullon and John Burns escaped from the ship *Amazon* and warns the Mayor that they are likely now somewhere in the city.
[76] RS 427. 14 June 1847. From Provincial Secretary, to Mayor. PANB.
[77] 15 June 1847, *Weekly Observer*, 3. PANB.

Partridge Island was published. Between 7 May and 2 July 1847, the *Morning News* listed 21 vessels, 20 of which came from Ireland to Partridge Island, with 176 passengers dying at the quarantine hospital, 194 dying during the passage and 40 dead in quarantine.[78]

Although there were some who arrived on properly maintained ships, with ample provisions and sufficient space, who were granted clean bills of health in Saint John,[79] as the season progressed, it became clear that many other vessels arrived with blatant and severe infringements of Passenger Act regulations. The emigrant ship *Eliza Ann* arrived from Galway in early June, having spent over six weeks at sea, with 67 passengers, all inspected and considered well.[80] In a letter on 27 October 1847, however, Perley reported that the *Bloomfield* from Galway arrived on Partridge Island completely depleted of provisions, with passengers starving and in pitiable condition. A statement by Lieutenant Patterson, emigrant agent for Galway, claimed that the vessel had initially left with the proper amount of provisions onboard, but was forced to return to Galway 'in distress'. Although Patterson protested that he convinced brokers to supply the vessel with wheaten meal upon the outset of the voyage, he asserted that there was no law for restoring provisions once they had been used, although T.F. Elliot, commenting on this incident, stated that the Passenger Act had been amended so that agents had the authority to 'control' vessels in need of returning.[81] Each case of an emigrant ship was unique, and without consistent

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[78] 14 July 1847, *Morning News*, 3. PANB. The list provides the name and origin of each vessel, and the names of each person and their age. The other boats listed came from Liverpool. The barque *Aldebaran* from Sligo listed the most deaths per ship, with 72 passengers from that ship perishing in the hospital. One vessel, the brig *Friends*, came from Waterford via St. John's, NL.

[79] The case of the *Mary* had no deaths recorded on board during the passage, with no obvious problems upon arrival, but while in quarantine, an outbreak of smallpox occurred with one of the male passengers.

[80] RS 427. 7 June 1847. From Harding, to Mayor. PANB.

[81] CO 386/83. 27 October 1847. From T.F. Elliot and C.A. Wood, to Hawes. TNA. Elliot suggests that Patterson had just recently taken on the job as emigrant agent, and '…may possibly have been wanting in experience'.

communication or understanding between the ports of departure and destination, it was impossible to precisely label certain ports as more problematic than others.

At the end of June, Woodward, emigrant agent for Saint John, paid a visit to Harding on Partridge Island. By this time nearly 500 people were sick and in quarantine on the island. Military tents were brought over to provide shelter for sick emigrants, but Woodward reckoned that without additional buildings, the 'disease' would continue to spread more quickly in quarantine then over the course of the overseas voyage. There was an urgent need for wood and straw, to the point that some emigrants were possessed to burn fences erected over the perimeters of grass, owned by a Mr. Reed, who '…will be greatly injured in the loss of grass, that he usually cuts for the support of his cows during the winter'.[82] At this point Harding and other medical assistants were declaring themselves ill, with signs of fever. As Woodward concluded his remarks, he expressed if the past has anything to show, there would be at least another four months of similar, if not worse, commotion and turmoil.

As health officials attempted to care for, and then quickly discharge, emigrants from quarantine and off Partridge Island, those in the town knew that for many, Saint John was the next destination. By 17 June, the Government Immigrant Agency had listed 2925 emigrants already in Saint John that season.[83] Fear of the spread of smallpox and fever, diseases frequently reported from Partridge Island that summer, infiltrated the community. By 26 July, the Almshouse in Saint John had already accumulated £423.19s.11d. in expenditures attending to sick emigrants.[84] As the summer progressed, the bills only increased, and as the pressure flowed from

[82] RS 555. 28 June 1847. From Woodward, to Mayor. PANB.
[83] 22 June 1847, *Weekly Observer*, 2. PANB.
[84] MG 9. 26 July 1847. Audit Office of New Brunswick, signed by Robinson. PANB.

Partridge Island to the Almshouse, the town was quickly overcome by distraught and weak emigrants, fresh from quarantine, and in need of subsistence and support.

By September, more and more emigrants were transferred into town, without any financial means, some having just lost family and friends, and barely recovered from the voyage and subsequent weeks in quarantine. Without money or a place to stay, it was estimated 200 began to camp out in sheds at the eastern end of Saint James' Street. The sheds, built by Mr. Chubbs, a member of the Almshouse Committee, were erected to absorb the overflow of emigrants from the Almshouse, providing shelter to those who had no other choice but to be '…compelled to lie in the public streets, without any protection from the inclemency of the weather'.[85] Their proximity to the rest of the town, however, would generate anxiety and anger, putting pressure on Common Council, and instigating contentious protests and moral arguments amongst residents who, while they may have supported charitable groups from a distance, soon realised the eminent threat of emigrants to their own welfare. By the end of the summer, the town was hit by thousands of famine-stricken Irish emigrants, and although they had been approved by local hospital and quarantine, they did not possess much in the way of strength, health and prosperity – qualities they had travelled so far to find.

On 13 September, Francis Reynolds, a medical officer with the Saint John Garrison, wrote a letter of complaint to the Commanding Officer, regarding the proximity of the sheds to the barracks. He claimed that many emigrants were sick with fever, potentially threatening the lives of the military men, and suggested that the sheds be removed, '…to a more advantageous and healthy spot'.[86] On 15 September, J. Boyd, chief physician of the Provincial Marine Hospital and recognised

[85] RS 427. 18 September 1847. 'A Report of the Committee of Common Council'. PANB.
[86] RS 427. 13 September 1847. From Francis Reynolds, to the Commanding Officer. PANB.

for his work with emigrants in quarantine, wrote to Captain Johnston at the garrison, referring to a recent conversation, claiming that the sheds could potentially harbour devastating diseases '…known to exist among the emigrants', agreeing that they should be removed. He also noted the sheds' proximity to the Provincial Marine Hospital, and generally to those living in that area of town, as a threat to the public health.[87]

This debate reverberated throughout Saint John as worries increased. Johnston, eager to get the message to Lieutenant Governor Colebrooke, pointing to

> …the existence of a contagious and very fatal fever in certain sheds which have been erected for the convenience of emigrants landing at this Port from Ireland. - These sheds have been injudiciously placed on a public highway, in alarming contiguity with the inhabitants of the neighbourhood, and so near to the barracks as to be dangerous to the men under my command, in as much as there is a continual communication between the inhabitants of those sheds and emigrants located in the densely populated precincts of the barracks, habitually frequented by soldiers.[88]

Johnston was firm in his letter to Colebrooke, wishing that '…a more fitting situation', be made available for the emigrants.

Johnston's complaints to Colebrooke, most likely exaggerated (using Boyd's assessment to 'confirm' fever), and written largely out of self-interest, were nevertheless valid concerns, and added fuel to a much larger and necessary debate on emigration in Saint John. While evacuating distressed people from sheds and exposing them to the elements in New Brunswick would have been merciless and cruel, the general lack of control over thousands of poor emigrants scattered throughout the city was alarming. On 18 September, Common Council reported, with reference to Johnston and Boyd's letters, that they visited the site, and claimed that while 200 emigrants were found frequenting the sheds that day, with more estimated

[87] RS 427. 15 September 1847. From Boyd, to Captain Johnston, 33rd Regiment. PANB.
[88] RS 427. 16 September 1847. From Johnston, to Colebrooke. PANB. Johnston's name is sometimes spelled Johnstone, spending on the document.

to be there spending the night, they found no disease or contagion.[89] The report states that after seeking the opinion of Colebrooke, a man of 'accustomed humanity', he suggested:

> A medical gentleman should be appointed to take charge of the sheds, and be authorised to employ sufficient assistants, to enforce on the inmates such necessary habits of cleanliness and good orders, as would contribute to their health, and prevent the spread of infection, if disease should be engendered amongst them: - And also to endeavour to find situations for the parties, or advise them where they might go to seek for employment and thus disperse them through the county to their advantage, and the public relief.[90]

The report ends by stating that the Almshouse would be responsible in carrying out Colebrooke's request, expressing confidence that the Executive Government would cover the necessary costs. In September, with only two months left until winter, the Common Council rightly point out, that by November emigrants would have to get off the streets, as no one could survive a British North American winter living outside.

Although there were no major illnesses reported that year, the living conditions of hundreds of these emigrants were ideal for the transmission of disease. An appointed authority and medical man would provide support to emigrants; however, it was far from a long-term, or even short-term, solution. While there was recognition that the weather would only get worse, no plan of action was drawn up to contend with emigrants come November.

Countless incidents and debates, such as these, occurred throughout the summer and fall of 1847. By 1 October, it was recorded that 15 269 emigrants had

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[89] RS 427. 18 September 1847. 'A Report of the Committee of Common Council'. PANB. Within this volume there was another letter dated 16 September 1847, from Colebrooke to Mayor Partelow, stating his wishes to have Common Council meet in order '…to prevent the spreading of the infectious disorders prevailing in the sheds occupied by the emigrants recently arrived by removal of the sick to the hospital and by providing for the purification of the premises occupied by them…for the safety of the troops as well as of the inhabitants of the City.' The agreement to have someone oversee the poor, and have them remain in their location, must have been struck once Common Council met after this letter was written.

[90] Ibid.

arrived in Saint John that year.[91] By November, with emigrants still arriving, Harding wrote a note to Mayor Partelow, on the destitution of the Irish newcomers. Clearly at wit's end, he describes passengers arriving onboard the *Aolus* from Carney, Ireland, in vivid language:

> I beg to state that I consider my verbal description would but very inadequately convey the true features of the cases, but these peculiarities are strikingly apparent by inspection, which will at once inform the beholder that ninety nine of every hundred must be supported by the charity of this community or otherwise as justice demands…
>
> …there are many superannuated people, and others, of broken down constitution and subject of chronick disease, lame, widows with very large helpless families, feeble men (through chronick disease) with large helpless families, in fact all those causes which rendered them paupers upon the hands of their landlord, are now in existence with added force from recent disease to fasten them upon us. And that nearly four hundred, so glaringly paupers, are thus sent, who so tame as would not feel indignant at the outrage.[92]

After six months of Irish emigration, Harding's frustration was unmistakable. What seemed to be clear and continual infractions of Passenger Act regulations during the emigration season felt like a slap in the face to those struggling to keep their own populations clean and uncontaminated. By the end of 1847, it was obvious to them that Saint John had become one of a number of nominated last resorts for Ireland's most wrecked and downtrodden.

In Carney, however, Dr. W.R. Hamilton, ship inspector for County Sligo, wrote in his defense, on the state of the *Aolus*, arguing that it was '…absurd to suppose that the occurrence of fever on board a passenger ship must be the result of the introduction of the disease previously to sailing to the exclusion of other

[91] CO 386/83. 8 December 1847. To Herman Merivale, from T.W.C Murdock and F. Rogers. TNA.
[92] RS 427. 4 November 1847. From Harding, to Mayor. PANB.

causes…'.[93] Hamilton stated that he 'minutely' inspected all passengers and that he ensured the comfort of all on board prior to embarkation. Hamilton makes valid points on the decline in health of passengers during a long voyage, creating a susceptibility to fevers. Nevertheless, the supposedly hygienic condition of the *Aolus* upon leaving Carney in contrast with its dire state upon arrival in Saint John, created suspicion and mistrust over where it all went wrong, and who was to blame.

Life After the Famine: Saint John, 1848-49

1847 was the busiest year for overseas emigration in Saint John; however, the arrival of emigrants from Ireland and England was far from over. As the Almshouse, the Marine Hospital and Partridge Island tallied their statistics and finances at the end of the year, it became apparent how fortunate they had been in avoiding a major epidemic. An expenditure of £2116.0s.1d. was recorded for aid in the relief of nearly 500 sick seamen in the Provincial Marine Hospital in Saint John.[94] During the height of the emigration season in 1847, the Marine Hospital became overrun with seamen arriving from Ireland, leading Boyd to argue, in his 1847 return, that it was imperative that the hospital be enlarged in order to be able to act as a proper facility for sick seamen and passengers arriving onboard emigrant vessels. During the summer of 1847, he describes the lack of proper space and an organised system within the hospital, as 'Patients labour[ed] under fever of a very dangerous character, with other diseases and accidents crowded together indiscriminately'.[95] The number of acute outbreaks of smallpox and fever recorded by provincial and charitable

[93] MG 9. From Hamilton, to Maxwell. 'Copy of a letter from Dr. W.R Hamilton Medical Attendant at Carney in the County of Sligo to Stewart Maxwell on the subject of Emigrants sent to St. John N.B in the ship 'Aolus' from Lord Palmerston'. PANB.
[94] MG 9. 14 January 1848. From Boyd, to the Commissioners of the Provincial Marine Hospital. Statement and Returns for the year 1847. PANB.
[95] Ibid.

organisations throughout Saint John was alarming, and inspired some astonishment that these illnesses failed to penetrate into the residential community that year.

With Partridge Island continuing to expand its capabilities in quarantine and hospital services, the start of the 1848 season continued to prove worrisome and a strain on local resources. The Irish continued to board boats for British North America, and although the number of emigrants was not as great as in 1847, by the third week in May, 1340 had arrived, with another 657 due from Sligo, Donegal and Cork. Some ships were estimated to have over 400 passengers on board, while other vessels arrived unannounced and without a passenger list. Saint John officials now knew, from experience, that there were Irish ports sending ships without an appointed emigration officer.[96]

New Brunswick Boards of Health, since the early 1840s, promoted smallpox vaccinations to residents and searched for vaccine marks amongst emigrants in order to eliminate its potential outbreak and spread. On 22 May, however, Emigration Officer Perley reported smallpox in Saint John, claiming it was found in several parts of the city, particularly amongst the working class, and in areas '…to which emigrants usually resort on arrival'.[97] On 27 May, Perley wrote again to the Provincial Secretary, sending the names and location of those affected by smallpox in Saint John. Cases were said to be found on the corner of Duke and Germain Street and in York Point, mainly amongst lower-class emigrants, with Perley claiming that 'the cases were chiefly among that class who seldom employ medical men, and it is

[96] MG 9. 22 May 1848. From Emigration Office in Saint John, to Provincial Secretary Saunders. PANB.
[97] Ibid.

the opinion of the profession generally, that cases exist of which they have no knowledge, there being a desire for concealment'.[98]

The city was in a state of alarm, although as Perley reported, the numbers of residents infected by smallpox was relatively low and isolated. On 25 May, one of the Saint John Health Officers, Dr. Hunter Peters, after a conversation with a colleague, Dr. Pidler, wrote to Mayor Partelow on the subject of smallpox in Saint John. He stated that the severity of smallpox in the city was low, and that since boards of health around the province were still not established on a full-time basis, he did not believe it necessary for one to be formed in Saint John. His approach to smallpox was that its cure was entirely dependant on being vaccinated, claiming that it '…can be as perfectly eradicated and extinguished by this means as fire can be by water'. [99] His descriptions of smallpox throughout the letter revealed an attempt to suppress alarm, arguing that the way to eliminate infection would be to hire medical men to visit the areas of the town stricken by the illness, and to ensure that all inhabitants were vaccinated.

Peters' advice to the Mayor was that instating the Board of Health would only create anxiety in the town, with many under the impression that the formation of a board of health signalled that highly feared illnesses such as cholera were suspected. He warned that it could also have foreign repercussions, either affecting trade, or persuading ports in the United States to decline ships from Saint John, '…which are almost daily receiving the Irish Emigrants who land at this port on their way thither,

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[98] MG 9. 27 May 1848. From Emigration Office in Saint John, to Provincial Secretary Saunders. PANB. Interestingly enough, one of the patients reported on the corner of Duke and Germain was a nine-year-old girl, with 'confluent smallpox', and a vaccination mark on her arm.
[99] MG 9. 25 May 1848. From George Peters, Health Officer, to Mayor Partelow. PANB. In the letter, Peters terms himself the Provincial Vaccine Surgeon as well as Health Officer.

as to leave a large portion of the burthen upon this province during the ensuing winter'.[100]

With administrators and health officials in Saint John just getting over the trauma, uncertainty and stress of 1847, outbreaks of smallpox amongst the community were discouraging. While health officers fought to maintain authority and control, Peters did raise a valid point that if they were to sound the alarm too early, the transportation of emigrants from Saint John to ports elsewhere might come to a halt, creating similar overpopulation and sickness in the town as seen in 1847.

On 8 June, public notices were posted on the subject of vaccinations. Posters, such as that shown in Figure 5.1., urged those in need to get vaccinated and were displayed in areas affected by smallpox in Saint John. The strategy seemed to work. Smallpox did not make great inroads in the community that year. Most cases originated in emigrant neighbourhoods, were treated by medical authorities visiting the sick, and those vulnerable to infection were vaccinated.[101] Although deaths and outbreaks were minor, this marked another instance where a disease transmitted by emigrant ships found its way beyond quarantine and into the resident community of Saint John.

[100] Ibid.
[101] Ibid. In Dr. Peters letter, he concluded by stating that smallpox had been in Saint John for months, and in other areas of the provinces, for more than six months. He claimed that there had been 20 deaths in total in the province, with two occurring in Saint John.

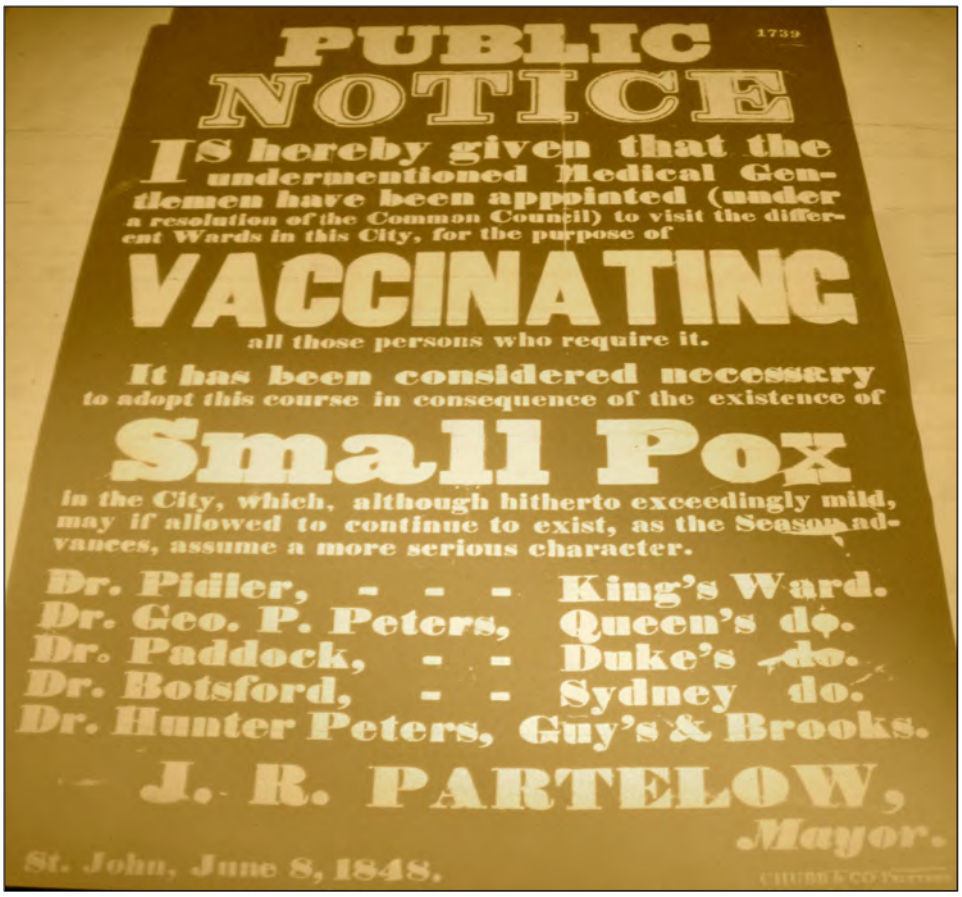

Figure 5.2. MG 9. 8 June 1848, 'Public Notice', PANB.

Around the same time, a shipwreck of the brig *Commerce* was reported at Port Mouton Island off the coast of Nova Scotia. It had left Galway with 68 passengers destined for Saint John, when it hit coastal rocks on the evening of 7 June 1848. Nine passengers drowned and although some passengers remained in Liverpool, Nova Scotia, 40 were shipped to Saint John. Nearly everything was lost in the wreck, including the ship itself as it drifted out to the Atlantic, some passengers '…left nearly naked'.[102] Although they had a list of the passengers who had drowned, Perley stated that because there was no emigration officer in Galway, he had no record of the ship sailing, or been supplied with a list of passengers onboard prior to embarkation.

[102] RS 555. 7 June 1848. From Perley, to Alexander Halliday. 'Wreck of the brig 'Commerce' of and from Galway'. PANB. Perley states at the end that in his six years as Emigration Officer, this is the first shipwreck of a passenger vessel he has reported.

Regardless of what was salvaged, most of the survivors were bound for Saint John, all in desperate need of shelter, food and medical assistance.

Amidst smallpox outbreaks, the arrival of emigrants, shipwrecks, and the normal stresses in a highly active port during the summer season, Partridge Island underwent significant renovations as a quarantine centre. The improvements included the completed building for the accommodation of emigrants (a building in the process of being constructed in 1847), thorough cleansing of the existing buildings and burial ground, a more reliable system to ensure clean water on the island and an improved house for the Health Officer.[103] A dedicated emigrant hospital was also constructed in 1848 to effectively serve those emigrants in need of medical attention upon arrival.

It was no surprise then that at the end of 1848, the Almshouse incurred £852.6s.3d. in expenses.[104] Dr. Bayard, emigrant physician at the Almshouse, reported 883 people were treated between 1 February 1848 and 1 February 1849. While 343 of these patients were quite sick, he claimed that all of those admitted required some type of medical assistance, '…as scurvy, smallpox, typhus fever and dysentery prevailed extensively in the establishment during the past year'.[105] Bayard reports receiving as many as 205 patients at one time in the Almshouse, with the fewest, prior to the smallpox outbreak, being 84.[106] Although Dr. Peters was inclined to downplay smallpox cases and their potential devastation in the community, in June 1848, Bayard's report reveals a more extensive view on the impact of not only smallpox, but also other highly transmittable diseases occurring to emigrants in the Almshouse that year.

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[103] MG 9. 1 May 1848. From Mayor Partelow to Saunders. PANB.
[104] MG 9. 10 April 1849. 'An application for expenses incurred in aid of immigrants in 1848', by Mr. Hazen. PANB.
[105] MG 9. 25 April 1849. Meeting of the Commissioners of the Almshouse. PANB.
[106] Ibid.

As 1849 approached, while improvements were made to Partridge Island, Saint John would continue to experience hardships associated with emigration and disease transmission. 1849 was a cholera year for many ports in the British Isles, and Saint John's previous experience with infectious diseases meant that required preventative measures would need to be implemented. Instructions and regulations were sent out as early as January 1849 from the Saint John Board of Health, asking the Mayor supply funds to ensure measures were implemented immediately.[107] Although 1849 passed without a cholera outbreak, experience taught that Saint John had to prepare for the worst.

Over the course of the 1840s, Saint John was continually put to the test as transmittable disease, emigration, shipwrecks and destitute emigrants arrived, with many newcomers in desperate need of relief and support. The constant demand for medical men, government decisions, amended protocols and provincial monies put considerable strain on the medical and charitable resources in Saint John. While emigration policies and international agreements were being negotiated amongst the higher echelons of power in Britain, life was a day-to-day struggle in the Saint John Almshouse, on Partridge Island or in the Provincial Marine Hospital. The disconnect between colonial policies negotiated in parliament and the plight of physicians, charities, and volunteers attempting to address the extreme poverty transferred from Ireland, forced the town to search for solutions within its power to protect residents while assisting foreigners who persistently threatened its health and prosperity.

[107] MG 9. 15 January 1849. From Board of Health, to Mayor of Saint John. PANB.

Cholera Revisited: 1854

1850-53

By the early 1850s, Saint John had over 20 years experience in disease management, including the implementation of quarantine protocols and the development of social welfare programmes for emigrants. Many emigrants remained in Saint John, and after a generation of living in British North America, they considered themselves residents. As artisan trade grew as an important aspect of economic life in Saint John, by 1850 over half of the city's merchants regarded themselves as New Brunswickers.[108] Shipping continued to be a vital factor in the Saint John economy, as the town steadily developed its reputation as an important international trading port.

With emigrants continuing to flow into the town, Saint John still needed to maintain and improve measures of caring for diseased emigrants. The Emigrant Hospital, constructed in 1848, was destroyed in a fire in 1853.[109] In April 1853, Harding asked that the landings be repaired on the south-east side of Partridge Island. He explained that currently ships were attempting to land on the rocks, with emigrants coming ashore '…endangering their limbs and expos[ing] [their] wet feet' and that it was not safe practice for properly receiving emigrants.[110]

As thousands of Irish emigrants continued to find their way to Saint John during the summer seasons, reported instances of fraud by shipping owners and agents in the British Isles mounted. Although emigrant agents became used to finding care for unscheduled emigrants who were sick, malnourished and in need of subsistence, they were now finding themselves in an advocacy role for emigrants angry over Passenger Act infringements in the departure ports. Emigrants arrived,

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[108] T.W. Acheson, *Saint John: The Making of a Colonial Urban Community* (Toronto, 1985), 49.
[109] MG 9. 19 December 1854. To Provincial Secretary Tilly, From Reid. PANB.
[110] RS 555. 25 April 1853. To the Honourable L. Hazen, from Harding. PANB.

misled by ship-owners, either discovering that they had been greatly overcharged for the passage, provisions and duties, or that the voyage terminated in an entirely different port. Many had purchased a passage to the U.S., only to find themselves in Saint John, without arrangements to go any further south under their current ticket. Furious at their mistreatment, emigrants were now seeking advocacy through government officials in New Brunswick.

On 5 May 1851, Emigration Officer Perley wrote to Provincial Secretary Partelow, concerning the ship *Speed* chartered by John DeWolf from Liverpool. Although the majority of the 218 Irish emigrants were under the impression they were bound for Boston, their voyage ended in Saint John.[111] Perley inspected the tickets and found that 180 had paid the passage to Boston, and that at least 55 tickets had stated Boston as the destination. Once Perley drew the attention of the Boston tickets to Messrs Higgins & Son, the owners of the *Speed*, the ship-owners sent those 55 to Boston.

Others passengers, however, without the destination stated on their ticket, decided to take matters into their own hands, with 40 finding their way to Boston at their own expense, '…which was a great hardship upon them'.[112] Another ship-owner, Messrs Sutter, eventually offered to send the rest of the passengers on his account, as well as agreeing to refund the Saint John Almshouse for expenses incurred tending to these emigrants.

Cases such as this were not uncommon in Saint John, creating an array of issues and controversies for emigrant agents to report and rectify. Rumours and evidence of ship-owners cutting corners on costs, either by offering fewer provisions

[111] RS 555. 5 May 1851. To Partelow, from Perley. PANB. In this case it was said that DeWolf had sold his tickets under the name of Mr. John McGrath, who claimed he had not heard of DeWolf once contacted.
[112] RS 555. 5 May 1851. To Partelow, from Perley. RS 555. PANB.

than required, or by terminating passages at a transit port, were all matters which came on the shoulders of officials in Saint John. In 1851, in a letter from the Colonial Land and Emigration Commissioners, to Perley, the Commissioners warned Perley that it was rumoured that emigrant vessels were scheduled to leave ports that did not have instated emigrant agent, '…with a view of avoiding the more vigilant superintendants which those officers exercise over the preparations for the voyage. This circumstance will doubtless draw your attention the more to any vessel of which there may be ground to suspect that their place of departure has been chosen with such motive'.[113]

The role of emigrant agents in New Brunswick had diversified by the early 1850s. Once regarded as authorities offering advice upon arrival, ensuring that emigrants were sent to their various inland destinations, they were also now whistle-blowers, persistently calling out severe breaches of Passenger Act regulations by British and Irish shipping-owners. Agents such as Perley spoke to emigrants directly, asking them to describe their treatment, reporting regularly on sleeping conditions and quality of food onboard ship.[114] Saint John officials witnessed the unjust, and often times shocking, results of Passenger Act infringements from shipping owners in ports on the British Isles, and while their job was to report the injustices, they continually felt pressure in one way or another to clean up the mess – at least by finding room and board for emigrants arriving in a limbo-like state in Saint John. The utter disregard shown by ship-owners in Britain and Ireland towards the chaos they were creating in British North America was provoking, adding to the number of

[113] RS 555. Undated. From S. Walcott, to Perley. 'Extract of a letter from the Secretary to the Colonial Lands and Emigration Commissioners, to the Government Emigration Agent, St John, N.B.'. PANB.
[114] RS 555. 18 June 1851. From Perley, to Partelow. PANB. Perley's report of the *Perseverance* from Cork, with 303 passengers, reveals the detail of his reporting, down to the taste of the bread and who was responsible for baking it onboard. Perley also reports the weekly excuses of ship-owners for not sending emigrants further to the United States.

political, social and colonial issues motivating officials in Saint John to define and assert themselves, in order to maintain the best interests of the colony.

Cholera Epidemic – 1854

By the time cholera returned to Saint John in 1854, the town had grown at an impressive rate, in many ways in order to adapt to the demand of emigrants, but it was clear that standards of emigrant ships bound for Saint John from Irish and English ports had not made the same adjustments. The strain and pressure from disease, shipwreck, emigration, and emigrant fraud would come to a head in 1854, as Saint John set out to defend itself against the severest bout of cholera to ever affect the Atlantic region.

At the end of April 1854, Perley reported to Partelow that he believed, from his communication with emigration officers in the United Kingdom, that 1854 would be a 'limited' emigrant season, with what emigrants there were arriving primarily from Liverpool.[115] This was an optimistic statement, as a week earlier, on 22 April, Harding wrote directly to Partelow concerning the ship *Blanche* arriving at Partridge Island from Liverpool, with suspected cholera on board. He reported that 35 passengers had died over the course of the voyage, and eight were sick on arrival, with three '…of them well marked cases of asiatic cholera showing the most prominent symptoms, and of a virulent nature – the aphasias, lividity of skin, rice water vomiting, and pulseless state with other appearances confirming the nature of the disease'. [116] The *Blanche* had a significant number of emigrants on board, many

[115] MG 9. 29 April 1854. From Perley, to Partelow. PANB.
[116] RS 555. 22 April 1854. From Harding, to Partelow. PANB. Harding continues by stating that one child was 'sinking on landing' and died that morning, with the father then 'attacked forenoon', 'pulse-less' soon after, and 'sunk' that night. In Geoffrey Bilson's article on cholera in Saint John in 1854, he stated that only one death occurred on Partridge Island on 14 August 1854. See Bilson, 'The Cholera Epidemic in Saint John, NB 1854', *Acadiensis* 4:1 (Autumn 1974), 89.

of whom were of German decent, with Harding listing 340 passengers on Partridge Island on 24 April.[117] The *Morning News* reported that cholera was first found onboard the *Blanche* the day it left Liverpool, and that its cargo was worth £50 000.[118]

The Mayor of Saint John wrote to Partelow on 24 April, claiming as a 'matter of opinion' that he believed the outbreaks on Partridge Island to be English cholera, not Asiatic cholera, but that he would still ensure precautions to be taken in the city.[119] By 26 April, however, two more passengers from the *Blanche* had died on the island, even though, in Harding's general statements, he claimed that all emigrants had improved since arriving into quarantine.[120] Perley sent a telegraph to Partelow in Fredericton on 25 April stating that although there were acute cases of cholera on the island, no new cases had developed.[121] On 28 April at a meeting of the Saint John Board of Health, it was resolved that after examination and purification, 60 'healthy' passengers from Quarantine Island were allowed to come into the city.[122] The next day, Harding began discharging those emigrants from quarantine and transferring them into town, and by 9 May, only 34 patients from the *Blanche* remained on the island, with the rest transferred into Saint John.[123]

Because of this comparatively short period of quarantine (by 3 May, it was announced that 121 had already made their way into Saint John), and in light of the fact that cholera cases were being treated on Partridge Island, residents in the city

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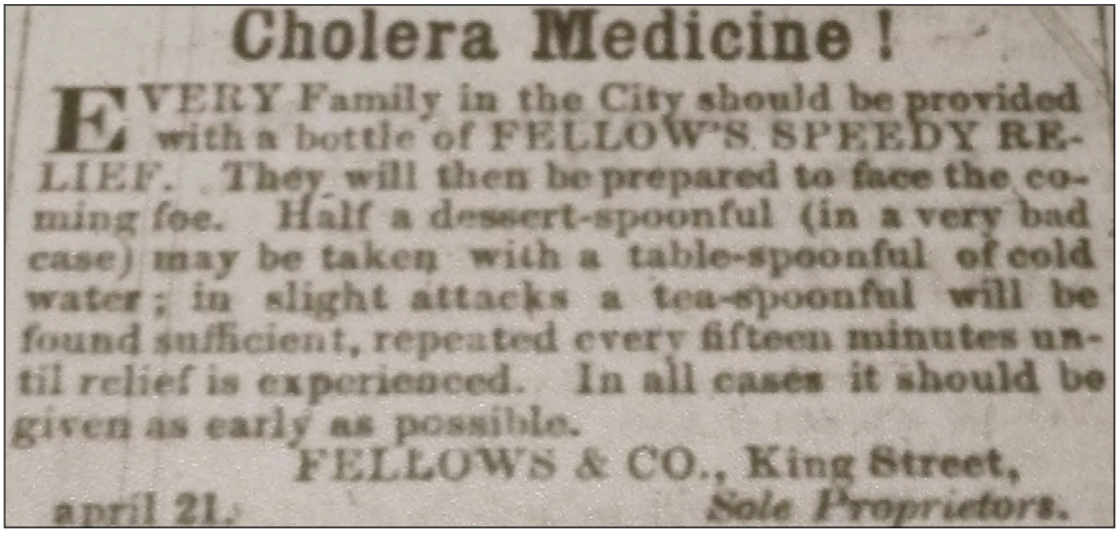
[117] RS 555. 24 April 1854. To the Chairman of the Board of Health, from Harding. 'Daily Report of the State of Emigrants landed from the ship "Blanche"'. PANB.
[118] 24 April 1854, *Morning News*, 2; 17 April 1854, *Morning News*, 3. PANB.
[119] RS 315. 24 April 1854. From Mayor to Partelow. PANB.
[120] RS 555. 26 April 1854. To the Chairman of the Board of Health, from Harding. 'Daily Report of the State of Emigrants landed from the ship "Blanche" on Partridge Island'. PANB.
[121] RS 555. 25 April 1854. From Perley to Partelow. 'From the Office of the Fredericton and St. John Electric Telegraph Co.'. PANB.
[122] RS 555. 28 April 1854. 'At a Meeting of the Board of Health for the City of Saint John and Parish of Portland at the Mayor's Office'. PANB.
[123] RS 555. 9 May 1854. To the Chairman of the Board of Health, from Harding. 'Daily Report of the State of Emigrants landed from the ship "Blanche"'. PANB.

were on the alert.[124] Criticism over the current state of areas of Saint John were made known in newspapers, with the *Morning News* remarking on comments made by the *Newbrunswicker* over construction and renovations due to be made to Cross Street, as a preventative measure against cholera in that area of town. It ended by asking, rhetorically, 'What does our neighbour think of Mill Street, where there are no obstacles in the way of keeping it clean!'.[125]



Cholera Medicine !

EVERY Family in the City should be provided with a bottle of FELLOW'S SPEEDY RELIEF. They will then be prepared to face the coming foe. Half a dessert-spoonful (in a very bad case) may be taken with a table-spoonful of cold water; in slight attacks a tea-spoonful will be found sufficient, repeated every fifteen minutes until relief is experienced. In all cases it should be given as early as possible.

FELLOWS & CO., King Street,
april 21. *Sole Proprietors.*

Figure 5.3. 21 April 1854, *Morning News*, 2. PANB.

In an attempt to clean the city that April, the Board of Health asked that each dwelling be cleaned by 1 May, after which a 40*s* fine would be imposed on each area left unclean. By the end of April, however, the *Morning News* wrote a satirical piece on the attitude of the Board of Health towards the management of filth in town:

> Directly in front of the Common Clerk's Office, there is a pile of official dirt which is truly refreshing to look at. Nobody made it, of course. It came there of its own accord; and what is more there is no authority to disturb it. The dirt must lay at the door of somebody. We would suggest, as no one seems to own the heap, that the Board of Health set a scavenger to work to pitch a couple of shovels – full into each of the public offices and banks in the neighbourhood, by which means the pile will be scattered. In front of the Post Office there is Peruvian guano enough, to manure all the Post Office

[124] 3 May 1854, *Morning News*, 2. PANB.
[125] 26 April 1854, *Morning News*, 2. PANB.

> gardens in the Province. Unless the Board of Health and Common Council set the example of removing the filth from the thoroughfares, how can they expect that individuals will be particular with their private premises.[126]

Criticism of the Board of Health increased throughout this period, as residents were forced to consider the health and cleanliness of their town, and the current way it was managed, now that emigrants were arriving into town, either recovering from or exposed to cholera.[127]

Throughout the month of May newspapers wrote on the need for a major clean up of the more downtrodden areas of Saint John. Mill Pond was condemned as an area '…which generates miasma sufficient to make plagues for a universe', with a note signed as 'Mill Pond', published in the *Morning News*, asking the Board of Health to consider cleaning up the estuary, claiming that 'prevention is better than cure'.[128] Most of the emigrants, including those from the *Blanche*, made their way to Portland and York County, areas known to be frequented by emigrants. By 25 June, the first case of cholera was reported in these areas, fuelling panic and hysteria amongst the Saint John residents.[129]

On 5 July, the *Morning News* published the original statement, re-printed in the *Newfoundlander* on 31 July, and mentioned in Chapter Three, over the status of cholera in Saint John.[130] It refers to the 'great deal of unnecessary alarm' over reports of cholera in the city, claiming 'We do not think that one well recognised case of that disease has occurred as yet; in fact, we are prepared to deny that several cases of

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[126] Ibid.
[127] Opinions on Perley were also published in papers during this time. The *Morning News* criticised the way in which emigrants were managed in Saint John, stating that, given the amount of land available for settlement (the article quoting 12 million acres), more must be done to retain emigrants, such as the Germans onboard the *Blanche*, who are of good standing. The writing pleads for a 'proper' emigrant office, claiming that Perley, '…is away out of the Province attending to any thing else but the duties for which the country pays him'. 21 April 1854. *Morning News*, 2. PANB.
[128] 15 May 1854, *Morning News*, 2. PANB.
[129] MC 239 - MS8A. *Asa Coy Fonds 1854-55*. Statement. 'Church Witness'. PANB.
[130] See Chapter Three – St. John's, Newfoundland: A Case Study, 145-46.

recent death said to be from that cause, was so. If any case has occurred, it has either not been reported to the Board of Health, or that body has not notified the citizens to take the necessary precautions against the spread of disease'.[131] Residents panicked over the possibility of infection, which only increased with the lack of transparency by officials of the town in providing them with information, with many deciding to pack up and leave.

On 19 July, 'A Tax Payer' wrote a letter to the editor called 'Prevention Better Than Cure'. The letter criticised the lack of initiative on the part of government and city officials for keeping the town clean, claiming that '…when disease has already shown itself in appalling forms, it might well be presumed that sanitory measures would ere now have been in active operation'.[132] In acknowledging the letter, the newspaper editors respond, agreeing with 'A Tax Payer' and claiming that the Board of Health must start doing something; however, they raise the point that 'very few' cities in North America, at least, are actually clean at the moment, referring to New York as a city, '...reeking at this season of the year, with filth of the most loathsome description'. The statement finishes by remarking that 'it cannot be denied that there has been a number of very sudden deaths in S[ain]t. John of late'.[133] By the end of July, the Board of Health continued to be criticised in the papers, with one report describing it 'to be a body without any head or tail, certainly without "bowels" or it would now be busily engaged in works of mercy, such as making itself acquainted with the condition of the city…'.[134]

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[131] 5 July 1854, *Morning News*, 2. PANB.
[132] 19 July 1854, *Morning News*, 2. PANB.
[133] Ibid.
[134] 21 July 1854, *Morning News*, 2. PANB. Although there were no Saint John Board of Health minutes published in the papers by this date, a number of earlier issues that July did publish statements made by John C. Craigen from the Halifax Board of Health.

Without government or the Board of Health striving to communicate consistently to its residents, information on cholera was reported erratically, laden with emotion and stimulated by rumour. A report in the *Morning News* remarked on the 'lean appearance' of residents at the markets last Saturday morning, stating that

> [A man from the country] said he heard we were dying fifty a day, and were tumbled into the earth, immediately after death, without coffins; and that men enough could not be had to bury the dead. One poor fellow on Saturday, having veal for sale in his cart, was looking for all sorts of ways, in fear and trembling, as if he felt the cholera was on all sides of him. We never saw such a *skeered critter* in all our life. Now that man could have been frightened into the cholera in ten minutes, had we applied the proper machinery to his case. No doubt he went home and told his wife he had a slight attack of the cholera when in St. John and the good wife exclaimed – Oh! William![135]

Fear and anxiety were regarded by many as a contributing factor for disease through associations of disease transmission deriving from nervous physiology. The story attempts to derail the kind of rumours gaining ground within the colony, and finishes by stating that stories such as these are reason enough for the Board of Health to supply the town with official information.[136]

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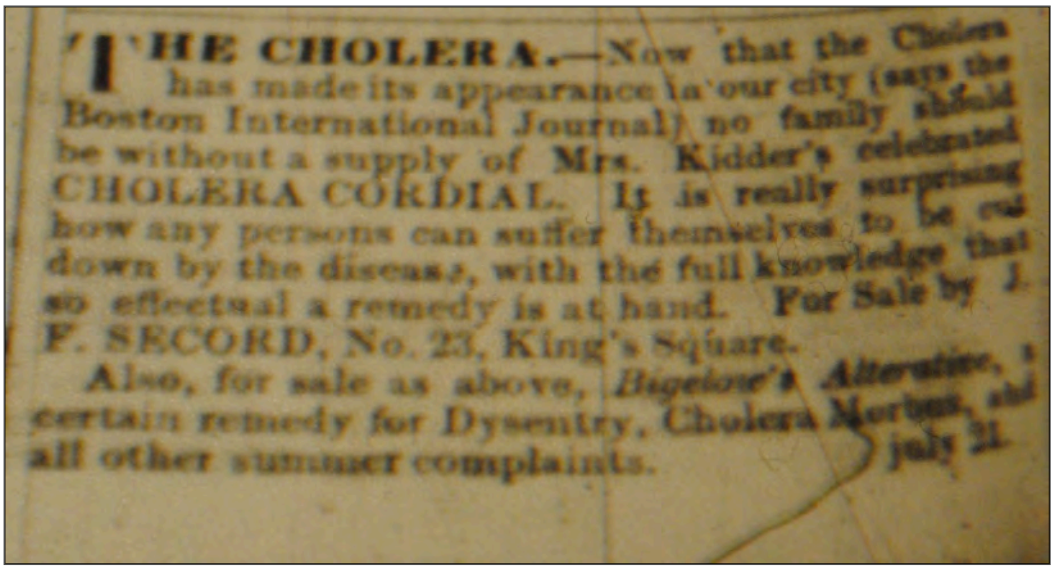
[135] 24 July 1854, *Morning News*, 2. PANB.

[136] In one article, it refers to the way in which public information and bulletins were distributed in Halifax 'every morning' during the 1834 outbreak, claiming that the Board of Health must supply official information to its residents in a similar manner in order to stifle misleading information. See 26 July 1834, *Morning News*, 2. PANB.


THE CHOLERA.—Now that the Cholera has made its appearance in our city (says the Boston International Journal) no family should be without a supply of Mrs. Kidder's celebrated CHOLERA CORDIAL. It is really surprising how any persons can suffer themselves to be cut down by the disease, with the full knowledge that so effectual a remedy is at hand. For Sale by J. F. SECORD, No. 23, King's Square.

Also, for sale as above, *Bigelow's Alterative*, a certain remedy for Dysentry, Cholera Morbus, and all other summer complaints. july 21

Figure 5.4. 26 July 1854, *Morning News*, 2. PANB.

Evidence in the papers, such as the advertisement reproduced in Fig. 5.3, indicates that while some sources, such as the 'Boston International Journal', apparently acknowledge the existence of cholera in Saint John, the local Board of Health continued to remain quiet on the subject. A melange of conflicting unofficial reports, remarks and advice on cholera filled the papers throughout July, as residents scrambled to comprehend the extent of the disease, and their susceptibility to infection.

Asa Coy, a successful entrepreneur in Saint John, corresponded with a business associate, S.K. Brundage, in Fredericton, during the summer months of 1854. In a letter dated 24 July, Brundage inquires into the status of cholera in Saint John:

> I hear that Cholera is making great ravages in your city, but no doubt the reports in circulation here are greatly exaggerated. I do hope the real state of things are not so bad as we are led to believe – the weather here is very warm, 96 to 98, in the shade. I am completely wilted down with the heat.[137]

[137] MC 239 - MS8A. 24 July 1854. To Coy, from Brundage. PANB.

As the correspondence continued between Brundage and Coy, it was apparent that sources of information, such as newspapers and Board of Health statements, were treated with increased scepticism and doubt.

On 8 August, Government House in Fredericton reported that although there were a few cases of cholera in Fredericton, there were many more in Saint John, as people continued to leave the city and the suburbs, so much so that mills and shipyards were forced to close.[138] The letter claims that until the third week of July, cholera had been linked to the 'filthy and unwholesome' areas of Saint John, thought to attack those 'whose place of residence or whose personal habits predisposed them for the malady'; however, by August, the disease had begun to travel to other areas of the town.[139] On 1 August, the *Weekly Observer* reflected on the cholera outbreaks onboard the *Blanche* that spring, stating '…we cannot help considering, that our civic authorities were criminally remiss in their duty, with regard to the quarantine regulations respecting her and her passengers'.[140]

Paul Daly, a shipping contractor in Saint John, wrote a petition to the Mayor at the beginning of August, stating that he would need some form of payment, as the 'present sickly situation' of the port meant that no schooners, vessels or wood boats would come into the Saint John harbour.[141] Also on 3 August, the Mayor wrote to Partelow on the possibility of sending those labouring classes who were unable to seek employment onwards onto the Saint Andrews and Quebec railway. His concern was that if there was no employment to be had during the summer months, either because labourers left town, or because others chose to leave, forcing industries to

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[138] CO 188/122. 8 August 1854. To the Right Honourable Sir George Grey Bart, from Government House. TNA.
[139] CO 188/122. 8 August 1854. To the Right Honourable Sir George Grey Bart, from Government House. TNA.
[140] 1 August 1854, *Weekly Observer*, 2. PANB.
[141] RS 427 2/3. 3 August 1854. To the Mayor, from Daly. PANB.

close, that those workers would become a burden on the province by winter. The shipping industry, as well as other important labour industries, were under immense pressure that summer as the news of cholera stalled domestic and international traffic to the port.

By 4 August, papers continued to report the death counts from cholera while attempting to assure residents that there continues to be 'no cause for alarm in the clean and airy parts of the City'. The *Morning News* stated that over the past 24 hours, 29 deaths from cholera have occurred in Portland, and 12 in the city.[142] The paper, without acknowledging a source for its numbers, claimed that as of 3 August, 221 deaths had occurred in Portland and the city from cholera. By 8 August, the Board of Health finally re-printed its own records of cholera deaths in town, claiming that 561 deaths were reported to the Board of Health.[143] By mid-August, the death rate had increased dramatically, with the *Morning News* reporting 207 deaths between 7 and 12 August.[144] By the third week of August, a subscription was discussed to support the great increase in orphans, due to the sudden mortalities from cholera in town.[145]

As death rates increased and residents left Saint John and scattered throughout the province, Brundage wrote to Coy on 14 August, voicing suspicions that the status of cholera was greater than what people were being told. He stated that many deaths occurring in York Point and Portland were not being reported to the Board of Health in Saint John, and that '…the real state of things are worse then we are led to believe

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[142] 4 August 1854, *Morning News*, 2. PANB. This article also refers to the misinformation occurring in the papers, stating that 'In our last we stated that we thought the disease was on the decline...It will be seen, however, by the following that there is no dim[i]n[u]tion'.
[143] 8 August 1854, *Weekly Observer*, 2. PANB.
[144] 14 August 1854, *Morning News*, 2. PANB; In the 9 August edition of the *Morning News*, Hutchings, Burnham & Clark advertised a supply of coffins, due to the 'increased demand'. See 9 August 1854, *Morning News*, 2. PANB
[145] 21 August 1854, *Morning News*, 2. PANB.

from the accounts given in the papers'.[146] Brundage continued by reporting that five to six sudden deaths had occurred in Fredericton over the past few weeks as well, while other residents suffered from severe diarrhoea.[147] It was clear that cholera hysteria, coupled with a lack of direct and valid information presented by the Board of Health, made residents in Saint John, and throughout New Brunswick, suspicious, susceptible to alarmist speculations, and very worried.

Residents fleeing areas with cholera created hardship on local business and trade throughout New Brunswick. T.R. Estey wrote to Asa Coy at the end of August, justifying his decision to take his family away from Saint John. From St. George, he explained: 'I thought I would take the family with me and I am not sorry for having done so for we leave all improved very much in health since coming down here'.[148] Coy, however, expressed to his son Holly, on 13 August, that he had no interest in leaving Saint John, although he did state that 'the papers give but a lean account of the true state of things here – I am persuaded the mortality has been much above the published statements, especially at the commencement'.[149] In a separate letter to Holly, dated 13 August, Coy expresses his sentiments of staying in the city:

> Half of the people of this city have gone away – and who can wonder at it. I feel very much for poor Mrs. Watts, and others, indeed, for everyone in trouble – I feel to sympathize with, there are said to be 20 050 fatherless and motherless children in this city at this time, not a place to go to. Portland is deserted, they are panic stricken, the doctors say many are frightened to death, especially the Irish. Thou they have been moved down. The dissipated stand no chance at all.[150]

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[146] MC 239 - MS8A. 14 August 1854. To Coy, from Brundage, Fredericton. PANB.
[147] Brundage also mentions how busy his friend, Alderman, has been as a Board of Health member. He has asked Alderman to see if he could look after Holly Coy, son of Asa, who seems to have had much trouble with alcohol in Fredericton.
[148] MC 239 - MS8A. 23 August 1854. To Coy from Estey, St. George. PANB.
[149] MC 239 – MS10A. *Holly Coy Letters, Asa Coy Fonds 1854-55*. 13 August 1854. To Holly Coy, from Asa Coy. Saint John. PANB. Asa Coy uses the cholera outbreak to promote the importance of temperance, a characteristic which he wishes upon his son.
[150] MC 239 – MS10A. 13 August 1854. To Holly Coy, from Asa Coy. Saint John. PANB.

Nevertheless, Coy writes, 'hopes were entertained' that the cholera was abating. By 4 September, the Board of Health remarked that residents were returning to the city and that local business was recovering, with deaths from cholera ending by mid-September.[151]

On 6 September, an article in the *Morning News* reported that although it is impossible to calculate exact mortality figures from cholera, due to the amount of unclaimed deaths in various parts of town, they believe the estimated death toll to be roughly 1500.[152] The hefty death toll, combined with the fact that the disease was cholera, sent residents, without a publically receptive Board of Health, into absolute disarray in July and August 1854. As citizens gradually returned to Saint John, public meetings on the status of drainage, sewage and general filth began to be held in the town. Government had reportedly advanced £2200 to the Board of Health by early September; however, it was assumed that the board would most likely need another £1400 to rectify their costs.[153]

1854 was the first outbreak of cholera to significantly affect the city of Saint John. While the Board of Health scrambled to create initiatives to stifle the infection, those in town had never before experienced a significant outbreak first hand. The Board of Health was regarded as indecisive, distant, and therefore largely ineffective in implementing public health protocols in town during the summer of 1854. Otherwise known as an active community, regularly managing foreign threats, shipwrecks and sick emigrants, the prospect of cholera in town became the final

[151] 4 September 1854, *Morning News*, 2. PANB. This entry was quoted from James Olive, Chairman of the Board of Health.
[152] 6 September 1854, *Morning News*, 2. PANB.
[153] 4 September 1854, *Morning News*, 2. PANB. These figures were quoted from the *Freeman* and re-printed in the *Morning News*, which commented further by stating 'It will be hard if the persons who earned their money by the performance of those services the public welfare imperatively required, must wait for their pay until next year'.

straw, as many fled during the peak of the epidemic, leaving others to fend for themselves.

For over 20 years Saint John had become used to continual threats of cholera, but the reality was that the arrival of almost all transmittable diseases in the area had luckily been confined to Partridge Island, creating a barrier between the town and the infection. While those in town knew of foreign illnesses on the island, with many providing generous support and charity to emigrants in need, the 1854 cholera outbreak hit too close to home for many residents in Saint John. With decades of cholera, smallpox, typhus and fever threats, as well as the constant strains and uncertainties of a typical or untypical emigrant season, while some, like Asa Coy, chose to stay, the 1854 cholera outbreak was a breaking point in Saint John – testing whether or not officials and residents would come together, or fall apart in the face of cholera.

PART III – Cholera in Context

Chapter Six

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Connection, Communication and Distance Between Britain, Ireland and the North American Colonies

> From Englishmen, or the descendants of Englishmen, who are now scattered over almost every quarter of the globe, England receives more stimulus to industry, and actually accumulates more wealth than it would have been possible for her ever to do if none of her population had gone out of the country. At the same time their going out has not been attended with any diminution of the number of people at home. On the contrary these have increased more rapidly; and one of the principal causes is, that destructive periodical diseases have almost entirely disappeared. Emigration is therefore a necessary and a valuable result of great national prosperity: Let us next inquire who they are that should emigrate.
>
> - Robert Mudie, *The Emigrant's Pocket Companion*, 36.

Newfoundland, Nova Scotia and New Brunswick underwent significant social, political and economic change as North American colonies by the mid-nineteenth century. The arrival of emigrants moulded the unique traditional values and characteristics of each area, as their societies, cultures and economies evolved. A multitude of influences came to shape each colony as distinct within the larger British imperial sphere; however an understanding of what was similar in the circumstances offers avenues for comparative analysis. As Lester explains, it can helpful, when interpreting multiple intricate colonial networks, to assess events '…through an explicit recognition of the multiple trajectories that define any space and place'.[1] He goes on to state that by concentrating on the connections, amidst the differences, amongst various colonial societies, new forms of interpreting imperial history can

[1] Alan Lester, 'Imperial Circuits and Networks: Geographies of the British Empire', *History Compass* 4:1 (2006), 124.

emerge. Lester's 'networked conception', which focuses on spatial notions of webs and circuits, becomes useful when assessing Newfoundland, Nova Scotia and New Brunswick as separate yet comparable regions, all loosely grouped within the eastern region of British North America. Over time, although each area focused on its own ventures and colonial pursuits, they were all forced to deal with outbreaks of cholera and the management of sick emigrants, triggering not only an awareness of their connections to Britain, but also an enhanced consciousness and perception of each another as colonies.



Figure 6.1. John Thomson, *A New World Atlas* (Edinburgh, 1817).

The reactive framework in the Atlantic colonies, discussed in Chapters One and Two, had not entirely disappeared after 1832, or even after 1866; however, events such as outbreaks of transmittable disease and the ongoing struggle to accommodate and support unexpected emigrants persistently re-enforced each colony's responsibilities to itself. While a distant Colonial Office sometimes saw these crises as minor issues in the context of the overall imperial project, officials and residents in St. John's, Halifax and Saint John bore witness to the brutal impact of cholera,

shipwrecks, and sick emigrants on the prosperity of their respective ports and colonies at large. During a cholera outbreak, discrepancies between the needs of the colony, their own bureaucratic shortcomings, and the larger objectives of British administrators were clarified, forcing communities to seek a greater degree of control, albeit with varying levels of success, over their own predicaments and situations.

At the same time, the colonies were all, in their individual ways, beginning to clamour for responsible government. After attaining representative government in the earlier decades of the nineteenth century, by the 1840s, spurred on by Lord Durham's report on self-government in North American colonies after the Canadian rebellions, they pushed for more autonomy. In Phillip Buckner and John Reid's words: 'The rapid demographic growth of the four Atlantic colonies [including Prince Edward Island] is sufficient in itself to explain the increasing discontent with a system of colonial government that left executive power in the hands of the governors and the small and unrepresentative provincial councils'.[2] Responsible government meant that while the British monarch continued to reign over the colonies, for all practical purposes executive power went to the cabinet of the governing party in a locally elected assembly.[3] In Durham's assessment of 'the Eastern Provinces and Newfoundland', he pointed out:

> In all these provinces we find representative bodies, owing to the anomaly of their position, aided by the want of good municipal institutions, and the same constant interference of the Imperial administration in matters which should be left wholly to the

[2] Phillip A. Buckner and John G. Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), xiv.

[3] Buckner quotes *The Cambridge History of the British Empire*, which claimed that it was partially the '"unanswerable arguments of Lord Durham" which had forced Imperial statesmen to follow "the true line of advance" after the American Revolution and to concede to the colonies of settlement in the second British Empire self-government through the device of responsible government'. See Phillip Buckner, 'Was there a "British" Empire? *The Oxford History of British Empire* from a Canadian Perspective', *Acadiensis* 32:1 (Autumn 2002), 110. For more information on the technical implementation of responsible government throughout the British Empire, see Alan J. Ward, 'Exporting the British Constitution: Responsible Government in New Zealand, Canada, Australia and Ireland', *The Journal of Commonwealth & Comparative Politics* 25:1 (1987), 3-25.

> Provincial Governments. And if in these Provinces there is less formidable discontent and less obstruction to the regular course of Government, it is because in them there has been recently a considerable departure from the ordinary course of the colonial system, and a nearer approach to sound constitutional practice.[4]

Nevertheless, it took another decade for responsible government to come into effect in British North America. In 1848, Nova Scotia became the first colony in the British Empire to achieve responsible government, with Upper and Lower Canada, now the United Province of Canada, following later that year. Prince Edward Island achieved responsible government in 1851, with New Brunswick following in 1854, and Newfoundland a year later, just after the cholera outbreak, in 1855.[5] As Carl Bridge and Kent Fedorowich argue, in the 1840s it was the Canadians, not the British, who first 'define[d] responsible government'.[6] Two decades later, the North American colonies acted to consolidate their status. Nova Scotia, New Brunswick and United Canada (as the new provinces of Ontario and Quebec) became partners in the Canadian Confederation on 1 July 1867, with Prince Edward Island joining in 1871.[7]

This final chapter analyses the way the Atlantic region coped with the influx of immigrants and transmission of cholera, drawing on research presented in the three

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[4] Gerard M. Craig (ed.), *Lord Durham's Report: An Abridgement of Report on the Affairs of British North America by Lord Durham* (Toronto, 1963), 106. Durham's report is highly contentious, particularly over his views of French Canadians, and his superficial understanding of various areas of British North America, and must be interpreted as such. His loose observations of the Atlantic region, however, do provide insight into how colonial administrators perceived this area of the Empire at this time. For more information on issues of responsible government in Lower Canada, see Elizabeth Abbott Gibbs, *Racism or Responsible Government: The French Canadian Dilemma of the 1840s* (Toronto, 1967).

[5] While New Brunswick was granted the ministerial forms of responsible government in 1848, it was not officially approved for responsible government until 1854. See Ian Ross Robertson, 'The 1850s – Maturity and Reform', in Buckner and Reid (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 342, as well as W.S. MacNutt, 'The Coming of Responsible Government to New Brunswick', *Canadian Historical Review* 33: 2 (1952), 111-128. For more information on the implementation of responsible government in Canada, see Rosa W. Langstone. *Responsible Government in Canada* (Toronto, 1931).

[6] Carl Bridge and Kent Fedorowich (eds.), 'Mapping the British World', in *The British World: Diaspora, Culture and Identity* (London, 2003), 5.

[7] Newfoundland considered but rejected Confederation in the 1860s, not joining until over 80 years later, in 1949. See James Hiller, 'Confederation Defeated: The Newfoundland Election of 1869', in James Hiller and Peter Neary (eds.), *Newfoundland in the Nineteenth and Twentieth Centuries: Essays in Interpretation* (Toronto, 1980), 67-94.

case studies. At a time when each colony strove for greater political independence, the management of events whose origins occurred largely outside the realms of provincial power continued to expose their vulnerability, and test their ability to assume control and rectify problems on the ground. This chapter provides a discussion of three major themes: (1) the effects of persistent discrepancies between protocol and practice, (2) the influence of emigrant traffic and transatlantic communication, and (3) the growing awareness in the colonies not only of their own individual predicaments, but also of the ways in which other North American colonies were managing similar situations. I argue that, as Newfoundland, Nova Scotia and New Brunswick attempted to cope with the often overwhelming effects of emigration and cholera, the management of such circumstances contributed to an extensive list of ongoing colonial struggles, creating a consciousness in officials and residents alike of the need for greater self-sufficiency.

In many ways, the ports of the Atlantic region fared neither better nor worse than the larger cities in Europe or North America when it came to their management of successive outbreaks of cholera. Nevertheless, understanding the way in which Newfoundland, Nova Scotia and New Brunswick sourced information on cholera, strove to manage the burdensome and disorderly presence of emigrants, and dealt with the unique exposure of being a British colony located along the transatlantic route from Old World to New, sheds comparable light on the complex strains felt by ports under such circumstances. Attempts by these communities to manage emigration and cholera provide an increased understanding of the evolutionary tensions and growing sense of dislocation occurring throughout the Atlantic region as the colonies were forced to identify and reassess their place not only within Empire, but also in relation to the larger phenomenon of nineteenth-century global integration.

'An Undue Burthen on the Colony'[8]*: Expecting The Unexpected*

By the mid-nineteenth century, Newfoundland, Nova Scotia and New Brunswick varied markedly as colonies, just as they do to this day, shaped by their unique histories, developmental paths, and natural resources. The fisheries still dominated in Newfoundland. Although society had developed and diversified in St. John's and a few other larger centres, merchants and fisherman comprised the greater portion of Newfoundland's population, which was largely distributed among hundreds of tiny outports along its coast.[9] By comparison, Nova Scotia was a relatively sophisticated society, with three universities and a diverse economy including coal mining, shipbuilding, shipping services, agriculture and the fisheries.[10] New Brunswick remained reliant on the success of its timber trade, which at times created periods of economic instability in the colony. But New Brunswick also had the greatest amount of available land, which meant that it was the colony that attracted the heaviest number of emigrants deliberately seeking to live there.

In the 1840s, Britain moved away from a commercial policy that favoured the colonies to a free trade market, making New Brunswick's timber industries and Nova Scotian inter-colonial trade with the West Indies particularly vulnerable. In 1840, inter-colonial trade comprised 40 per cent of Nova Scotia's exports. By 1848, it had fallen to 18 per cent.[11] As T.W. Acheson points out, the '…sharp change in commercial policy on the part of the imperial government produced enormous

[8] CO 386/83. 8 December 1847. To Herman Merivale, from T.W.C. Murdock and F. Rogers, referring to previous remarks made by Lieutenant-Governor Colebrooke. TNA.
[9] Phillip McCann, 'Culture, State Formation and the Invention of Tradition: Newfoundland 1832-1855', *Journal of Canadian Studies* 23:1/2 (1988), 99.
[10] Robertson, 'The 1850s – Maturity and Reform', 335.
[11] T.W. Acheson, 'The 1840s – Decade of Tribulation', in Buckner and Ried (eds.), *The Atlantic Region to Confederation: A History* (Toronto, 1994), 313.

dislocation in the North American colonies'.[12] Newfoundland was the exception, mainly because its salt fish went directly to a variety of European markets.

By the 1860s, Saint John, along with the rest of the Atlantic region, reaped the successes of its shipbuilding industry, lagging behind only Britain, the United States and Norway as one of the great merchant marine centres of the world.[13] As Sager and Panting point out, 'The [shipping] industry still serves to remind us that Maritimers and Newfoundlanders were capable of great things, before and after the "shabby dignity" that Confederation and dependence bequeathed to the region in the twentieth century'.[14]

As the Atlantic region evolved, what remained constant was the arrival of British and Irish emigrant ships at British North American ports, creating social and economic hardships, and at times transmitting disease. Residents in the colonies read accounts published in local newspapers about the poor treatment emigrants frequently experienced in the port of origin, and many also knew from experience that those emigrants would probably arrive in a state of misery on the other side of the Atlantic. In 1854, the New Brunswick paper, *The Morning News*, quoted a Liverpool correspondent from the American and Foreign Emigrant Society who described dire circumstances:

> …they are hurried on board, fleeced of every penny, without the means often of buying a bundle of fresh straw for their beds. Can we wonder that disease and death should seize them on the passage! That

[12] Ibid, 308.
[13] Hiller and Conrad, 112. Hiller and Conrad point out that in 1851, the *Marco Polo* broke world speed records in a voyage to Australia, which enhanced the international status of New Brunswick shipbuilding.
[14] Eric W. Sager with Gerald E. Panting, *Maritime Capital: The Shipping Industry in Atlantic Canada 1820-1914* (Montreal, 1990), 3. Nova Scotia, New Brunswick and Prince Edward Island came to be known as the Maritime Provinces within Canada. The benefits for these provinces, and eventually for Newfoundland, in entering the Canadian Confederation has remained a contested issue, with some arguing that that the economic potential of each area was sorely compromised from the union. David Alexander uses the term 'shabby dignity' to describe the experience of all four provinces. See Alexander, 'Economic Growth in the Atlantic Region, 1880-1840', *Acadiensis* 8:1 (Autumn 1978), 47-76.

> more do not die would appear a miracle. It can only be explained by reference to the remarkable stamina and power of endurance which these poor people possess.[15]

Oliver MacDonagh mentions the criticisms of philanthropist and 'educated observer', Stephen de Vere, who wrote to Earl Grey in 1847 after enduring a transatlantic crossing to Canada onboard an emigrant ship. Apparently, de Vere's writing sparked considerable interest amongst the London commissioners 'who merely administered from their desks'.[16] Although there were significant legislative changes and noticeable improvements made in the 1855 Passenger Act, the discrepancy between protocol and practice continued to cause problems in the departure and receiving ports.

Given that the resources of St. John's, Halifax and Saint John were overwhelmingly dealing with the influx of visitors and the threat of cholera in the 1830s, it is not surprising that smaller towns throughout the Atlantic region also struggled. Saint Andrews, New Brunswick was a popular destination for predominantly Irish emigrants, wishing to take advantage of the cheaper fares to British North America, but ultimately bound for the United States. Located right on the U.S. border, Saint Andrews managed the flow of transient emigrants for decades, restoring many to health before they carried on southward. During the famine years, however, the port experienced particularly trying times.

On 21 May 1847, the Justices of the Peace in Saint Andrews wrote to John Saunders, Provincial Secretary, stating that five vessels from the British Isles were 'hourly' bound for them, and that 'there [was] no preparation [made] for their reception'. They announced that there were not enough provisions in Saint Andrews 'for a weeks supply', assuming that the emigrants, given the length of the voyages, were bound to arrive in a destitute state. The Commissioners of the Poor shut their

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[15] 26 June 1854, *Morning News*, 2. PANB.
[16] Oliver MacDonagh, 'The Regulation of Emigrant Traffic from the United Kingdom, 1842-1855', *Irish Historical Studies* 9 (1954-55), 169.

doors, refusing to take responsibility for the emigrants, forcing the Justices of the Peace to state the hard facts: 'the inhabitants are much concerned, as to the result of so many persons additional coming, especially as the means of subsistence are not within the reach of such emigrants, as may have the means to purchase'.[17]

The following month, the *Elizabeth Grimmer* from Londonderry arrived, with 221 passengers – eight dead over the course of the voyage, and eight currently 'bad with fever'.[18] By 5 June, passengers were assessed by medical attendant, Dr. Samuel Frye, and sent to Hospital Island, located in Passamaquoddy Bay, just to the south of Saint Andrews.[19] James Boyd, who sat on the Committee of Magistrates 'to attend to the wants of sick and destitute emigrants' in Saint Andrews, claimed that the *Elizabeth Grimmer*'s tween decks were not permanently fixed to the vessel, which was in direct violation of the current Passenger Act. Asked to respond to this criticism, R. Ramsay, Emigrant Officer at Londonderry, denied that the tween decks were installed temporarily, ending with, 'I cannot understand how Mr. Boyd could make such statements'.[20] After a further charge from Boyd, in February 1848 Ramsay was again asked to describe the state of the *Elizabeth Grimmer*, and denied any sickness onboard at the time of her departure, stating 'had I observed any appearance of sickness on board I would not have granted a clearance certificate until a medical gentleman had examined them, as in all other cases when any doubt was on my mind of sickness being onboard, as I could have no interest in keeping a public calamity a

[17] RS 555 – *Provincial Secretary – Immigration Administration Records, 1811-1891*. 21 May 1847. To Saunders, from Justices of the Peace at Saint Andrews. PANB.
[18] RS 555. 5 June 1847. To Saunders, from D W Jack. PANB.
[19] Frye died from fever in September on Hospital Island in 1847. Dr. Andrews, who was in Fredericton with the 33rd Regiment, had also reportedly died from 'ship fever' after 'assisting the medical gentlemen of Fredericton in the discharge of their professional duties among the emigrants'. 11 October 1847, *Morning News*, 2. PANB.
[20] RS 555. 27 October 1847, From R. Ramsay to Saunders. PANB.

secret'.[21] As though to demonstrate his thoroughness as a port official, Ramsay finished by claiming that he had fined the master of the *Elizabeth Grimmer* £21.2s.0d. for breaches of the 5th, 13th and 17th sections of the Passenger Act upon arrival from Liverpool before setting sail for Saint Andrews.

Boyd was a contentious figure throughout this period because of his outrage over the state of emigrant ships in Saint Andrews. After he was asked by the Land and Emigration Commissioners and Lord Grey to qualify remarks he had made to the Lieutenant-Governor over emigration, Boyd wrote to David W. Jack at the Treasurer's Office, responding with blunt observations about the work of shipping agents overseas:

> taking the account of the Shipping Agents, a class of men above all others not to be depended upon, men whom I do not hesitate to pronounce traffickers in human beings, with no more feelings than, or in fact, with regard to the health and comfort of the passengers, with not half so much feeling as those engaged in the slave trade, the latter having a motive to land their cargo in good order, the former having nothing further to expect than the passage money received.[22]

The heavy financial and social strains placed on smaller ports, lacking access to the same resources as St. John's, Halifax or Saint John, encouraged local officials, who bore witness to the severe state of sick and destitute emigrants, to speak out, not only over their treatment, but over the insupportable impositions their conditions caused in the receiving ports.

Although Saint Andrews, along with Miramichi and Saint John, were granted an emigrant agent for a fixed period in 1832, the variability of emigration to their ports for decades meant that there was little in the way of permanent fixtures or dependable resources at their disposal. In January 1848, with the Commissioners of

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[21] RS 555. 22 February 1848, From R. Ramsay, to Saunders, Provincial Secretary. PANB. Ramsay was also quick to rectify 'exaggerated' statements made by Boyd, claiming that the vessel was at sea for nine days, not three weeks, as stated by Boyd, on its transit to Londonderry from Liverpool.
[22] RS 555. 7 December 1847. To David W. Jack, from James Boyd, Acting Emigrant Agent, Saint Andrews. PANB.

the Poor continuing to refuse to take responsibility for destitute emigrants, officials in Saint Andrews scrambled to take control.[23] When, at the end of May, the *Star* arrived from Ireland with 22 passengers sick with 'typhus fever', Boyd wrote to the Lieutenant Governor stating that although Saint Andrews had been denied a Board of Health in 1847, he would like to think that the arrival of the *Star* should suggest that a Board, or at the very least an official Emigrant Officer, would be approved that year.[24] Soon afterwards, Boyd became Emigrant Officer at Saint Andrews, taking over from David Jack, who was currently in the role of 'Acting Emigrant Agent'.

Boyd's appointment no doubt improved authority over emigration in Saint Andrews, but without additional support problems continued to occur. At the beginning of June, Boyd wrote to Saunders over difficulties in communication between his office and the Magistrates in town. He recounted his request that the Master of the *Star* land only married families onboard, in order to avoid mass congestion on shore, but the magistrates ordered the Master to offload all passengers: 'the consequence has been, from the crowded state of the passengers on shore, a large increase in sickness, and there are now fifty-nine people in the hospital'.[25]

Saint Andrews struggled under these circumstances, particularly without the support of the Commissioners of the Poor to help relieve emigrants and contribute to community initiatives. Referring to emigrants from Cork in 1849, who had arrived without any financial means to proceed to the United States, Boyd mentioned that he was in the process of writing to their acquaintances in the United States, asking them to procure funds for their passage onwards, claiming 'with very few exceptions they are miserably poor, and have no means to subsist upon even for a day, widows with

[23] RS 555. 27 January 1848. To Provincial Secretary Saunders, from C.R Hatheway, 'of the committee for taking care of sick and destitute emigrants'. PANB.
[24] MG 9 - *New Brunswick Executive Council, Welfare, Almshouse and Public Infirmary, Saint John*. 29 May 1848. To Lieutenant Governor, from Boyd. PANB.
[25] RS 555. 5 June 1848. To Saunders, from Boyd. PANB.

large families, and most of them cannot speak English'.[26] Boyd also referred to the passengers from the *Star*, many of whom were still in Saint Andrews a year on, continuing to rely on local assistance as they struggled to find a way out.

In 1847, Miramichi, another smaller but busy port in New Brunswick, was in turmoil over the loss of its health officer, Dr. Vondy, a native of the town, to 'typhus fever'. Vondy died while working at the port's quarantine station on Middle Island, with sick emigrants from Liverpool bound for Quebec, who had arrived onboard the *Looshtank* in dire condition.[27] The town was credited for its outstanding support of the emigrants, after the ship reportedly lost a quarter of its passengers to typhus fever during the voyage.[28] The Saint John *Weekly Observer* re-printed an article from Miramichi's *Gleaner*, which states: 'We have seldom witnessed an occurrence that cast so deep a gloom over the community. As soon as [Vondy's] death was announced, all the shops were closed, and business partially suspended throughout the day. The sum of £60 was subscribed in the churchyard, for the purpose of erecting a suitable testimonial to commemorate the sad event'.[29] Much like the loss of Dr. Slayter in Halifax during the cholera outbreak on McNabs Island in 1866, Miramichi keenly felt the loss of a local doctor working to ameliorate the condition of emigrants and protect the residential population from 'typhus fever'.

There is overwhelming evidence that local authorities in Newfoundland, Nova Scotia and New Brunswick strove to support emigrants laid low by shipwreck, famine and disease, irrespective of their destinations, but sources also suggest that there was a

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[26] RS 555. 12 May 1849, From Boyd to Provincial Secretary. Provincial Secretary – Report on Sick Emigrants. PANB. Boyd mentions that most of the emigrants were sent from various poor houses in Kerry.
[27] W.A. Spray, 'Vondy, John', *DCB Online* 1836-1850 (Volume VII) (Toronto, 2000).
[28] 16 June 1847, *The Standard*, 3. LAC. The article mentions that the *Looshtank* belonged to Dublin, and had left Liverpool with 467 passengers, 117 of whom died over the course of the crossing, leaving over 100 'unable to help themselves, and that the crew from exhaustion, were not able to work the ship'.
[29] 13 July 1847, *Weekly Observer*, 2. LAC.

boiling point. While colonial administrators and emigrant agents debated over who was in fact responsible for the condition of emigrants, in the end the pressure to relieve them, as Boyd points out, was on the receiving port. Anger over the way in which emigrant ships were processed in the ports of origin, and over the crushing pressures imposed on the scarce resources of smaller transatlantic ports, reveals that in many instances, British North Americans were left with a decision over whether to sacrifice the health of their resident population to protect incoming sick emigrants. In extreme cases, understandably they chose not to do this.

Such decisions must have been anguished ones, especially in that a large percentage of the settler population of the Atlantic region were of recent Irish descent. They were acutely aware of the state of Ireland through personal correspondence, word of mouth, and from newspaper articles. The Saint Andrews paper *The Standard* published a letter received by a local resident from a friend in Tipperary in February 1847, claiming:

> The present state of things in Ireland is most alarming – the people, many of whom I know, are actually starving. Our whole dependence is on America for supplies of food, and unless we are supplied with provisions from that quarter, I know not what we shall do – Business is stagnated – and no employment for the industrious.[30]

Personal notes of this description were highly persuasive with local residents, many of whom had strong connections back in Ireland, or who had recently migrated themselves, and were easily able to identify with the situation thus described.

Indeed, Saint Andrews was one of several areas in the Atlantic region to raise public subscriptions to help relieve Ireland that year. On 17 March 1847, *The Standard* announced that contributions were being accepted to help support

[30] 21 March 1847, *The Standard*, 2. LAC.

'distressed Irish and the Scotch Highlanders. We hope the collection will be liberal'.[31] A public meeting followed at the Town Hall on 29 March, at which private letters from Irish settlers in Saint Andrews were read out loud, describing the destitution and turmoil in Ireland, providing an encouragement to donate.[32] Funds raised locally throughout New Brunswick were being forwarded to support Irish efforts for famine relief. By 3 March 1847, residents in Saint John had raised £1491, nearly matching the provincial government's initial donation of £1500, and by April, Miramichi had raised £690.6s.4d. for the cause.[33] Similar campaigns took place in Newfoundland and Nova Scotia. Subscriptions were established in St. John's, and in February 1847, the Nova Scotian Legislature, under Lieutenant-Governor Sir John Harvey, forwarded £1000 to Britain to support the cause.[34]

There was no doubt that subscriptions were desperately needed. By 1847, in the workhouses of Irish port towns, such as Cork, famine and fever ran rampant among hundreds of inhabitants. There were 279 fever patients in the Cork's Workhouse on 17 April, with no accommodation available to those sick and in need of care.[35] Circumstances in the Irish workhouses were considered 'disastrous', with citizens arriving as though to a hospital, with extreme overcrowding and rampant infection. As the Commissioners stated, the condition of workhouses '…f[ell]

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[31] 17 March 1847, *The Standard*, 2. LAC.
[32] 31 March 1847, *The Standard*, 2. LAC. Although the newspaper source is generally quite positive with the meeting, it does point out that: 'Although the meeting was not so numerously attended as might have been expected, and as the occasion warranted, still a very liberal contribution was raised and paid on the spot'.
[33] 7 April 1847, *The Standard*, 2; 3 March 1847, *The Standard*, 2. LAC.
[34] BPP, 'Copy of a Despatch from Lieutenant-Governor Sir John Harvey to Earl Grey'. Nova Scotia. 1847 (92). In the despatch, Harvey does point out, '...that while we ought not to neglect existing distress or destitution on our own shores, so neither should we withhold such an extension of relief to our remoter fellow-subjects, in this hour of their grievous visitation, as may be within our means, or as may, at least, afford an evidence of our sympathy in their calamities'.
[35] Poor Relief Letterbooks - 2/440/39. 17 April 1847. 'Table relating to certain Unions in which from the weekly returns and other information it appears that fever prevails to a considerable extent…', enclosed within a statement from the Poor Law Commission Office to the Secretary of the Board of Health. NAI. A larger number of fever patients in County Cork, 477, were found in Kanturk, although the document states that in that Workhouse, they were only able to accommodate 124.

suddenly into disorder and mismanagement and exhibited scenes of a most distressing and appalling nature'.[36] With many areas of Ireland in a state of turmoil, those able to migrate took the option as a way of escaping poverty, sickness and death that year.

Although British North American ports gave generously to the relief of the distressed in Ireland, the irony was that they would soon experience the effects of the famine for themselves, as thousands of Irish emigrants took flight that spring. Throughout the summer, those who found the means to emigrate brought fever, smallpox and destitution along with them, extending the turmoil to ports throughout North America. The arrival of emigrants in such poor health left inhabitants with the overwhelming task of coping with the threat of disease and destitution imported from abroad. As North American ports grew desperate for funds to help support Irish emigrants arriving on their doorstep, the bulk of their donated local finances were being distributed in Ireland.

Given the quantity of emigrants, their state of health and the condition of vessels, the discrepancy between what was thought to be protocol and what was actually happening on the ground was large. The resulting pressures revealed the inadequacies and vulnerabilities of traditional political structures. In December 1847, Sir William Colebrooke, Lieutenant Governor of New Brunswick, wrote to the Colonial Office claiming 15 000 emigrants had arrived that season, and 'of these one third had proceeded to the United States and that the two thirds who remained are of the most miserable and helpless class of Irish "Peasantry"', and he goes on to argue 'that the practice of sending out families before they can be provided for is productive of suffering to the emigrants and throws an undue burthen on the colony'.[37]

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[36] Poor Relief Letterbooks - 2/440/39. 7 May 1847. From the Poor Law Commission Office, to the Secretary of the Board of Health. NAI.

[37] CO 386/83. 8 December 1847. To Herman Merivale, from T.W.C. Murdock and F. Rogers. TNA. This quote refers to comments made by Colebrooke, paraphrased by Merivale.

A heightened awareness of their situation is evident in the local newspapers, and in personal correspondence between relatives and official correspondence between colonial officials. Governmental and community initiatives, such as the establishment of health boards and emigrant hospitals, as well as benevolent societies, the organisation of charitable subscriptions, and the appointment of emigrant officers, were seen more and more throughout British North American society. As Helen Cowan remarks, the management of outbreaks of 'typhus fever' and difficulties with famine in 1847 in the 'colonial reception facilities' stimulated 'a sense of responsibility and independence' in British North America.[38] Residential, municipal, provincial and colonial authorities in the larger centres of St. John's, Halifax and Saint John, as well as within the smaller ports like Saint Andrews, Miramichi, Arichat and Harbour Grace, began to recognise that the vulnerability and exposure that came from being a transatlantic colonial port had outstripped the control they were able to exercise over the protection and wellbeing of their own people.

Emigrants and the Transatlantic Network

Tension and frustration over emigration and disease transmission was felt amongst varying levels of provincial society and government throughout the Atlantic region. At times when colonial governors, legislative officials or boards of health came across as disjointed, unreliable or largely absent in their management of cholera, residents in St. John's, Halifax and Saint John persistently voiced criticism over the state of affairs and the apparent laxity of government officials, providing local opinions and comments on the prevention of disease. What came to enhance the diffusion of information into ports like St. John's, Halifax and Saint John, however,

[38] Helen I. Cowan, *British Immigration Before Confederation* (Ottawa, 1968), 14.

was also its overwhelming cause of anxiety – the strong sense of connection to British and Irish emigrants.

The flow of emigrant traffic provided a direct pathway for the transmission of knowledge from Britain, Ireland, and the North American colonies. Effective communication occurred from those en route to those in the colony, as residents and emigrants struggled for guidance amidst the hardships and uncertainty of moving across an ocean, finding their place in a foreign land, and coming to terms with the prospect of disease. As advances in industrial management, global trade and imperialism amongst dominant nations dramatically increased immigration and commerce, they also enhanced the transference of knowledge – changes which inevitably came to characterise developing towns in British North America. While governments communicated, negotiated and, at times, seemed to absent themselves during a cholera outbreak, the experiences of emigrants from the British Isles and North America, some of whom had endured a cholera epidemic, became highly accessible first-hand knowledge to those preparing for, or currently in the midst of, cholera in the Atlantic region.

Newspapers became a major source for the transmission of information, opinions and ideas on emigration and cholera prevention for British North American residents. Advice and anecdotes from other areas of the world were constantly printed in the Newfoundland, Nova Scotian and New Brunswick press throughout the nineteenth-century cholera outbreaks. As Lester points out, when referring to Benedict Anderson's analysis of newspapers, they '…did not simply give expression to the united 'we' of their readership; they actively helped to forge such a collective

identity'.[39] Although a sizeable portion of their newspaper coverage concerned itself with local events, St. John's, Halifax and Saint John also relied heavily on information sent from connecting British and Irish ports, as well as updates from large North American ports such as New York and Boston. St. John's, with its large Irish population, re-printed official updates on the status of the Irish famine in Cork in 1847 from the *Kerry Examiner* in its *Public Ledger*.[40] In the Atlantic region generally, one of the biggest British trading partners was Liverpool, one of the cities 'hardest hit' by cholera in England in the nineteenth century, with a recorded 1 523 deaths during the 1832 outbreak, and 5 308 deaths in the outbreak of 1849.[41] Cargo, human and otherwise, arrived from Liverpool in substantial quantities, with local papers like the *Acadian Recorder*, re-printing information and correspondence from the *Liverpool Mercury*. During the cholera outbreak in 1854, Saint John's *Morning News* published information on practical advice on cholera from Liverpool:

> Some sea captains who sail out of Liverpool, assert that they care no more for Asiatic cholera than for an ordinary cholic or sickness of the stomach. They have a remedy which they pronounce infallible, and so accessible and simple as to relieve all apprehensions of fatal results. We shall probably tell our readers nothing new when we start the prescription: - Common salt, one table spoonful; red pepper, one tea-spoonful, in half a pint of hot water. The New York Times has heard innumerable instances of its use, and not one of its failure.[42]

In all cases, whether through rumour or truth, port towns sought the latest information from newspapers, local advice, or simple word of mouth, lightening the load of stress and strain associated with disease. At a time when the cause and treatment of cholera was still largely contested, practical information containing accessible ingredients and preventive techniques were valued by residents and emigrants alike.

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[39] Alan Lester, 'British Settler Discourse and the Circuits of Empire', *History Workshop Journal* 54 (2002), 30.
[40] 11 May 1847, *Public Ledger*, 2. LAC.
[41] Asa Briggs, 'Cholera and Society in the Nineteenth Century', *Past and Present* 19:1 (1961), 79.
[42] 4 September 1854, *Morning News*, 2. PANB.

What is important about the detail and distribution of personal experiences of cholera throughout the colonies is that it encapsulates the transmission of information on cholera from one place or another. On 1 September 1854, the *Public Ledger* in St. John's copied a letter from the Saint John *Morning News* from an Englishman who had recently immigrated to New Brunswick who wished to share his experiences with cholera while living in Ireland. The letter, written by 'Compositor', gave advice on warding off cholera by creating fire from tar barrels. The Compositor wrote a persuasive text, claiming that from his experiences in Ireland, the disease was in the air,

> I offer these few observations with the best intentions, and trust, should they be put in practice in the city of S[ain]t John, to see the most favourable results following. I would almost state my life on it if tar barrels were burned in the several large and open squares of the city, where no danger could result to houses, that the cholera would soon be put *hors de combat*. [43]

Communication not only from Britain and Ireland, but from people originating from there, who had become native settlers in North America, gave the people of Newfoundland, Nova Scotia and New Brunswick perspectives, options and remedies outside their own folkloric library. While government in London was able to communicate to its respective governors, the people coming back and forth on the ships were powerful sources of information and comfort to the population at large. Such folkloric responses continued for decades, many of them taking the form of poetry and song, all efforts by citizens to comprehend the effects of emigration and disease in their communities.[44]

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[43] 1 September 1854, *Public Ledger*, 2. PANL.

[44] Projit Mihari Mukharji discussed the meaning of the concept 'cholera cloud', a term found in newspaper articles and folkloric writings in the nineteenth century. He mentions that the cloud could have been sea mist, which would have been found particularly in sea-faring towns like St. John's, Halifax or Saint John. Although I did not come across any direct statements referring to a cholera cloud within the particular years of my research, references to changes in weather are found frequently. Wind and cool breezes are mentioned regularly, however, they are typically regarded positively, as a way of

The Atlantic region also relied on local advice on cholera from British and Irish medical men in the community and abroad. In Halifax, the *Acadian Recorder* interviewed doctors in the Medical Department of the 83rd regiment in Halifax during the cholera outbreaks amongst the military in 1834. Some of these doctors referred to previous experience with cholera in Ireland, and when asked about their work on cholera relief, provided recipes, folkloric remedies, and general strategies for living under the threat of disease.[45] Information was also provided from famous foreign doctors with experience treating cholera and other transmittable diseases threatening populations abroad. In 1834, local newspapers printed instructions on the disinfecting qualities of chlorine gas 'taken from a Pamphlet written by Dr. Saunders, of Edinburgh, and . . . strongly recommended to Householders by the Board of Health; at the cost of a shilling a week families may protect themselves from Cholera'.[46]

Throughout the persistent cholera epidemics, ports in the Atlantic region sought practical advice and information from emigrants who were thought to have special knowledge deriving from their experiences with cholera in the British Isles and in North America. At times when little practical knowledge on cholera descended from the higher echelons of society, the transatlantic communication available between settlers and emigrants in British North America directly influenced the perception and management of disease in the homes and communities in the Atlantic region. Britain, Ireland and other centres in North America provided the most direct contact in terms of the knowledge, experience and human support necessary to comprehend and absorb the scope and severity of cholera. Trade was not purely economic but also involved social networks and communications media giving the

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stifling infection and promoting healthy atmospheric conditions. For more information see: Mukharji, 'The "Cholera Cloud" in the Nineteenth-Century "British World": History of an Object-Without-an-Essence', *Bull. Hist. Med.* 86 (2012), 303-32.

[45] 8 September 1834, *The Novascotian*, 2. NSARM.

[46] 30 August 1834, *Acadian Recorder*, 2. NSARM.

Atlantic ports sources for answers, and some comfort in knowing that others in the world, and within the North American colonies, were coping with the same problem.

While communities relied on the readily available and expedient transfer of knowledge through newspapers, travellers, local physicians, and word of mouth, particularly when direct information from officials was unavailable, the transmission of information on cholera also invited the potential for rumour, speculation, and superstition to take flight. On more than one occasion, newspapers in the Atlantic region in 1854 referred to the notion that simply fearing cholera could cause it to occur. The *Newfoundlander* published remarks taken from the Saint John *Morning News* warning residents of the harm that may come from spreading rumours of cholera in town, as it is '…a well known fact that cholera is oftener caused by the fear of it than by its actual existence'.[47] The larger version of the quote taken from the *Morning News* referred to a man in the markets with an intense fear of contracting cholera at risk of being 'frightened into the cholera'.[48]

Anecdotes of this description, used to emphasise the consequences of spreading rumours, were most likely founded as a way of promoting calm and confidence in towns faced with an epidemic. At a time when the scientific understanding of cholera was still unclear, the fear of cholera generated rumours and anecdotes, providing evidence of how society perceived and rationalised transmittable diseases of this nature. While residents openly discredited certain rumours, others were taken quite seriously, revealing the extent of the desperation of people to protect themselves and their loved ones from cholera. In his study on nineteenth-century epidemic disease and the 'Indian response', David Arnold points out '…caveats aside, rumors take us closer to popular perceptions and responses than other sources

[47] 31 July 1854, *Newfoundlander*, 2. PANL.
[48] 24 July 1854, *Morning News*, 2. PANB. See Chapter Five: Saint John, New Brunswick: A Case Study, 260.

allow'.[49] Analysing rumour as a subject of historical analysis provides a unique view into the way in which societies sought to make sense of disease, particularly when medical professionals were not in agreement over its scientific mode of transmission. It leads us to a deeper understanding of how the residents rationalised, or irrationalised, the potential for diseases, like cholera, as well as their values and responsibilities within society. As the case studies demonstrate, the mixture of local, colonial and global sources informed the perceptions of those searching for understanding, and provided guidance and support to residents in coming to terms with the threat and reality of cholera.

Connection, Communication, and Self-Reliance in the Atlantic Region

At a time when each colony strove for greater political autonomy, those responsible in the receiving ports were appalled by the condition of the emigrants, fearful of the long-term burden they could place on their communities, and felt restricted by the limited power they had over the emigration process. Migration from British and Irish ports, and the overwhelming nature of cholera in the British North American ports, undoubtedly contributed to an ongoing list of tensions, stimulating the need for greater forms of self-reliance in the colonies. The way in which emigration and disease arrived into the Atlantic region not only forced colonial governors, such as Kempt, Maitland, Colebrooke and Williams, to speak out over the heavy and unnecessary burdens placed on their colonies to the Colonial Office; it also consistently provoked debate amongst colonial residents, most of whom were all too aware of the obvious associations between emigration and transmittable disease.

[49] David Arnold, *Colonizing the Body: State Medicine and Epidemic Disease in Nineteenth-Century India* (Berkeley, 1993), 218-19.

Colonial governors held a great deal of power but they varied considerably in how they exercised it, each influenced by a wider set objectives for the colony, not excluding the furthering of their own administrative careers. While several governors throughout this period pointed out obvious causal connections between emigration and the threat of transmittable disease, drawing particular attention to the inconsistencies and growing disconnect between Britain's agenda and the prosperity of the given colony, it seems not all were so forthcoming. Nevertheless, some officials, such as Newfoundland's Colonial Secretary, James Crowdy (who had also served as Colonial Secretary of Cape Breton Island), New Brunswick's Drs. Harding and Bayard, as well as Sir John Harvey (who by the 1850s had been Governor of all four colonies in the Atlantic region), witnessed the challenges of emigration, and had their hand in preparations against the ongoing threats of transmittable disease. They provided a degree of leadership in the development of government within their own colonies, as well as throughout the Atlantic region, with many regarded as provincial authorities with experience and expertise when it came to managing emigration and cholera.

In 1866, Governor Williams voiced his frustrations to the Colonial Office over emigrant ships and cholera in Halifax, raising the overarching point that regardless of the technical compliance with passenger act regulations, ships frequently arrived in Nova Scotia loaded with destitute and sick passengers. Even as a governor, however, his concerns were greeted with a politely dismissive response. Peter Dunkley suggests that the '…tendency in the colonial office to temporise, to balance conflicting interests, and to consider wider ramifications stemmed from a recognition that imperial considerations might not always prove compatible with strictly humanitarian

reform'.[50] By the late 1860s, emigration was ultimately regulated by the growing trend away from out-migration in Britain and Ireland, leading to a natural petering out of emigrants travelling annually along the transatlantic route.

What remained consistent throughout the cholera outbreaks in the Atlantic region, however, was the refusal of its residents to sit back and passively accept their fate. Frustration expressed in local newspapers was typically directed at the state of the town, and towards the conduct, or misconduct, of local government officials. During the 1854 cholera outbreak in Saint John, observations made in the *Weekly Observer* over cholera onboard the *Blanche* are notable, indicating that it was hard to resist the conclusion that 'civic authorities were criminally remiss'.[51] The public was clearly able to connect the rushed process by which emigrants left Partridge Island and came into Saint John that April with the outbreaks of disease that followed in town that July.

In 1834, when cholera arrived in Nova Scotia and New Brunswick, local officials were quick to realise that the disease was no longer a distant foreign concern, but had now become a crucial local issue. Newspapers were highly critical of the levels of filth and unhealthy conditions in their own towns and communities. In Halifax, the *Acadian Recorder* claimed:

> A town of the same size of less energetic local government perhaps nowhere exists, or one where it is more difficult to get authoritative interference for the suppression of evil, *except* money to be made by the transaction. We fervently hope that, as regards individuals and public bodies, the lesson now enforced will not be neglected; that none will make themselves stiff-necked when the cause of terror has passed

[50] Peter Dunkley, 'Emigration and the State: The Nineteenth-Century Revolution in Government Reconsidered', *The Historical Journal* 23:2 (1980), 375. Dunkley mentions Hay, Stephen and Elliot as administrators with a 'certain bureaucratic detachment that reflected not only their insulation but also their views on what government could reasonably be expected to accomplish'.
[51] 1 August 1854, *Weekly Observer*, 2. PANB. See Chapter Five: Saint John, New Brunswick: A Case Study, 261.

> by; and that future inattention will not occasion a renewal of the scourge.[52]

Most residents were deeply invested as natives of their colony, and regardless of the assertions of their governors, communities faithfully observed and drew attention to discrepancies between government protocol and what occurred on the ground – forcing an acknowledgement that things needed to change. During the 1854 cholera outbreaks, ordinary residents, local clergymen, medical staff and emigrant agents in Saint John and St. John's remained active and critical over their own circumstances, and at times seemed to have a firmer grasp on the effects of cholera in the community than officials in higher levels of government.

As demonstrated earlier, newspapers were vital to the dissemination of information into the colonies, which in turn, shaped public knowledge. Although information supplied by emigrants was highly valued by resident populations, reports on how other North American colonies were managing emigrants and disease became increasingly heeded once cholera arrived across the Atlantic. In 1834, the state of emigrants on arrival in Lower Canada was noted in the *Novascotian*:

> PASSENGER SHIPS. –A Montreal Paper has the following reference to two of those infamous 'man traps' called passenger ships. The government ought surely to take some decisive steps to prevent the sewage of human beings in bulk – if one or two vessels were burnt to the water's edge, it would perhaps set a good example.-[53]

Prior to the Halifax outbreak in 1834, Upper and Lower Canada were the only British North American regions with first-hand cholera experience. Re-publishing information and remarks from Montreal newspapers helped locals perceive the ways

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[52] 13 September 1834, *Acadian Recorder*, 2. NSARM.
[53] 8 September 1834, *The Novascotian*, 4. NSARM. The *Acadian Recorder* also terms ships coming into Quebec from Limerick as 'coffin ships', commenting specifically on the loss of life at sea, and the poor quality of the vessels as '…rotten, ill-found, ill-manned, and wretched death-ships employed by desperate adventurers in carrying emigrants nominally to North America but generally, or at least too frequently, to the depth profound, and the coral caves of the vast Atlantic'. 13 September 1834, *Acadian Recorder*, 1. NSARM.

in which Lower Canadians were coping with sick emigrants and cholera on their side of the Atlantic, and of known methods for relief if an outbreak were to occur.

Once cholera came to British North America, and then to the Atlantic region, St. John's, Halifax and Saint John naturally took notice of each other's strategies and methods for managing outbreaks. Although the colonies remained separate, they drew on their close proximity and general commonalities in seeking to control emigration and cholera. During the 1834 cholera outbreaks, minutes of the Halifax Board of Health and reports from the *Halifax Times* were re-published regularly in New Brunswick papers prior to Saint John's publically acknowledging cholera in its own town.[54] In St. John's, death rates from cholera in Halifax were reported as well as updates on new cases arriving at the Dalhousie Hospital.[55] St. John's and Saint John papers displayed a fervent interest in the way in which Halifax was coping with the Atlantic region's first cholera outbreak, as copious information continued to be printed that fall.

As steamers travelled between the Atlantic ports, reports describing the current predicaments of the towns were published in local papers. In 1847, the Saint Andrews *Standard* mentioned the arrival of the *Unicorn* in Halifax from Newfoundland, describing 'extreme distress' in that colony's outports compared with their own issues of limited potato crops and famine. It reported that the local papers are requesting an emergency meeting of Legislature, and that '[a] large number of the inhabitants of Placentia had already petitioned the Governor for relief, or the means to leave the country'.[56]

While St. John's and Saint John were in the midst of managing their own cholera outbreaks in 1854, their papers published updates on how the other port was

[54] 9 September 1834, *Weekly Observer*, 2. LAC.
[55] 7 October 1834, *Public Ledger*, 2. PANL.
[56] 6 October 1847, *The Standard*, 2. LAC.

coping with the crisis. The *Newfoundlander* reported on cholera in the 'neighbouring provinces', and the St. John's *Public Ledger* printed accounts of experiences and medical perspectives of physicians on cholera from the 1834 outbreak in New Brunswick, including remarks by Dr. R. Bayard on his belief that cholera was not contagious.[57] A discussion of quarantine protocols in Newfoundland occurred in the Saint John *Morning News* shortly afterwards, with emphasis on the fact that St. John's had enforced quarantine requirements on Saint John vessels. The paper claimed: 'We confess that this announcement takes us by surprise, as we had supposed all sensible men were fully convinced, by this time, that the cholera is one of those migratory diseases, whose progress no human power can confine or arrest. Cholera is not contagious'.[58] Perhaps feeling somewhat slighted by the imposed quarantine restrictions, the *Morning News* followed up the report with opinions on the non-contagious nature of cholera, using information supplied Dr. Bayard and the *Boston Medical and Surgical Journal* as evidence.

In 1854, Saint John papers reflected on Nova Scotian efforts in fighting cholera in Halifax 20 years earlier, replete with romantic sentiments and heroic depictions. In a piece on cholera in Saint John, the *Morning News* referred to the efforts of Governor Campbell in 1834, who:

> visited the Hospital regularly every day, took off his coat and acted the part of a nurse and servant, to the poor people; indeed no servant in the institution worked harder; he thus set an example to others which no doubt produced a great effect. – How many of our leading gentry have been going about enquiring into the wants and distressed of the suffering poor?[59]

The way in which St. John's, Halifax, Saint John, as well as smaller ports within the Atlantic colonies, exchanged stories and information during the successive cholera

[57] 5 September 1854, *Newfoundlander*, 2; 29 August 1854, *Public Ledger*, 2. PANL.
[58] 8 September 1854, *Morning News*, 2. PANB.
[59] 11 August 1854, *Morning News*, 2. PANB.

outbreaks revealed, and perhaps abetted, an increased consciousness of the similarities of their situations during this period. While they continued to refer to British authorities and emigrants for advice, the Empire became increasingly tangential as residents focussed on communities closer to home, thirsty for knowledge of how other British North Americans, living in a familiar geographical context and colonial framework, coped with emigration and cholera.

As Newfoundland, Nova Scotia and New Brunswick managed emigration and transmittable disease through the establishment of societies, hospitals, and local initiatives, Irish officials acknowledged the terrible state of their emigrants on arrival in British North America. In 1834, the North American Colonial Association of Ireland petitioned to be recognised, stating in the minutes of their initial meeting that 'it has been a matter of equal surprise and regret', that they had only formed an emigrant society now, while Britain and Scotland had already their own established for years.[60] The Association used information published in Quebec and Halifax papers, describing the condition of emigrants on arrival, and acknowledging the destitution of emigrants prior to their departure:

> You are aware that a great number of English, Irish and Scotch, depart annually from these Islands, for the purpose of settlement in North America; the greater portion and the poorest from Ireland. – All accounts concur in establishing the fact, that in too many instances they are ill provided with vessels fit for transport, or with accommodation for their voyage (in corroboration of this melancholy fact, we take leave to enclose one extract, A from the last Halifax papers, and one from the last Quebec papers B) and that those who reach their destination land in a foreign country objects of poverty and disease. It is also well ascertained that many of those who have capital, now select for settlement the United States, in preference to the British provinces, for want of that encouragement, assistance, cooperation and thus enrich the former country with their enterprise and property, at the expense of their native lands.[61]

[60] CSO 4614. 21 July 1834. A General Meeting and Formation of the 'North American Colonial Association of Ireland'. NAI.
[61] CSO 4614. 31 October 1834. To Edward Littleton, Secretary of State for Ireland, from the North American Colonial Association of Ireland Board Room. NAI. The extracts referred to are comments

Societies such as these were established on both sides of the Atlantic in an attempt to exert some form of local influence on the chaos of emigration and disease, and in many instances, in response to ambiguities surrounding Britain's responsibility to the colonies. Pressures to come up with disease management protocols and emigration control in the Atlantic region, particularly when higher echelons of power appeared detached from the problem, forced those living under the circumstances to designate responsibilities and produce initiatives for the protection of both the colony and its often transient emigrants.

From their origins, Newfoundland, Nova Scotia and New Brunswick relied on a largely reactive framework when managing their colonial predicaments. Local governments took care of their own day-to-day affairs and became used to managing issues as they arose, with or without the financial support or guidance of the Colonial Office. Emigration and cholera outstripped the limits of such a reactive system of governance. As St. John's, Halifax and Saint John confronted emigration and successive outbreaks of disease emanating from Britain and Ireland, the way in which officials and residents sought control over these crises demonstrates not only a general development in nineteenth-century colonial society, but also the influence and growth of each area's colonial 'circuits' and global connections.

Unexpected emigrants, coupled with the growing threat of transmittable disease, continued to accentuate discrepancies between the aims of Britain and its Colonial Office, and the growth and development in the Atlantic colonies. Although emigration and outbreaks of cholera did not spark mass political upheaval or colonial

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taken from Halifax and Quebec 'journals', which are most likely derived from emigrant society records or reports made in local newspapers. The quote from Halifax is attributed to a 'Halifax Paper'.

rebellion in any areas of the Atlantic region, evidence does suggest that each colony did, at times, feel vulnerable. Their attempts to assume greater control and responsibility over their affairs over the incoming population contributed to a growing sense of dislocation between the North American colonies and the imperial centre.

Those welcoming sick passengers into the ports of British North America witnessed at first-hand the horrific conditions on board emigrant ships, and in many instances, the effects of neglect prior to their departure from Britain. As emigrant ships continued to arrive in the Atlantic region, causing administrative frustration and exposing the residential population to cholera, the inhabitants of colonial ports came to understand that their primary allegiance was to each other and that the imperial association with Britain did not always serve their best interests.

Conclusion

This thesis has explored the relationship between nineteenth-century British and Irish emigration and outbreaks of cholera in the Atlantic port towns of British North America. It argues that the persistent effects of immigration, and the reality of cholera affecting the immigrant and local population in the port towns of St. John's, Halifax and Saint John, contributed to the understanding residents of these areas were developing concerning their place as colonial citizens within the British Empire. At a time when communities were in the midst of shaping their own cultural identities and seeking greater political autonomy, emigration and the transmission of disease from the centre to the periphery awakened a sense of responsibility among the colonised and an awareness of disconnection with the coloniser. Acute crises such as cholera highlighted vulnerabilities on the part of Newfoundland, Nova Scotia and New Brunswick in their ability to protect their populations from transmittable disease, and clarified the extent to which they were responsible for themselves, as well as the tides of British, Irish and Scottish emigrants every year washing up on their shores.

One of the early aims of this dissertation was to unpack and demystify outbreaks of cholera in Atlantic Canada. Although it was evident that the disease had struck most parts of British North America during the nineteenth century, up until now the scholarship has focused overwhelmingly on Upper and Lower Canada, and was carried out predominantly by one scholar, Geoffrey Bilson. This dissertation provides the most extensive study of cholera outbreaks in the major port towns of Atlantic Canada to date, and offers important discussions of what can be understood from how comparable yet distinct North American colonial towns coped with emigration and accompanying outbreaks of the disease.

As explained in the Introduction, the richest and most accessible sources on cholera in Canada are from the Upper and Lower Canadian outbreaks, with much documentation on the Atlantic region scattered and incomplete. The difficulty in locating sources has led to over-generalised statements and the citation of contradictory evidence in the historical record, and this may be a reflection not only of the greater amount of evidence easily available for towns such as Montreal, Quebec City, Toronto and Kingston, but also to the fact that Atlantic Canadian towns became peripheral to Central Canada in the twentieth century just as they had been peripheral to Britain in the nineteenth. Some historians have attempted to work through this issue by undertaking micro-studies, published in archival bulletins, historical societies or on websites, presenting a factual account of one particular epidemic experienced by one town, in an attempt to simply understand what happened. I was motivated not only to develop a deeper and broader historical understanding of the way in which St. John's, Halifax and Saint John managed successive threats and realities of cholera, but also to draw on the potential for a comparative regional analysis of the three ports.

In his work on cholera in Britain, Christopher Hamlin stresses the value of understanding local government and community response to an outbreak.[1] As the case studies demonstrate, St. John's, Halifax and Saint John reacted individually to outbreaks of cholera in their communities, dependant largely on their own resources and support networks. I believe that understanding the way in which the colonies coped with an array of political, societal and economic issues arising from these crises provides greater insight into each 'periphery's' relationship with the 'centre', as well as to one another.

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[1] Christopher Hamlin, 'Mumbling in Bumbledom: On the Enormity of Large Sanitary Improvements in Four British Towns, 1855-1885', *Victorian Studies* 32 (1988), 59-61.

This dissertation makes important contributions to the history of disease in Atlantic Canada; however, it also offers another viewpoint into the impact of British colonialism and emigration in British North America from the fields of imperial history. The actions and reactions of officials and citizens in St. John's, Halifax and Saint John show the limitations, dependencies and capacities of these towns as ports of empire. The case studies reveal the individual connections each town had to imperial and non-imperial ports throughout the world, providing a broader sense of how they managed similar events, not only in comparison to each other, but also within a greater global framework. The origins of colonial influence, the rise of immigration, and the increasing development of transatlantic and intra-Atlantic networks constitute a complex web of factors crucial to assessing the reaction to, and management of, cholera in British North America.

Although case studies have been conducted on cholera in towns throughout the world, the examination of cholera outbreaks in port towns provides interesting avenues for discussion and analysis. As Mark Harrison points out in his recent book *Contagion: How Commerce has Spread Disease*, there is a direct link between global economic development and the spread of diseases like cholera.[2] Other historians have noted that cholera is intrinsically associated with immigration and movement, making its proliferation from the ports of embarkation to the receiving ports one of particular interest. Cities such as New York, Boston and Baltimore were in a predicament similar in some ways to the port towns that are the focus of this study – forced to receive thousands of emigrants while balancing the threat of disease with mercantile interests. According to Charles Rosenberg, New York's public health protocols in 1832 amounted essentially to quarantine, a response not dissimilar to ports in British

[2] Mark Harrison, *Contagion: How Commerce has Spread Disease* (New Haven and London, 2012).

North America. Mark Harrison points out that Baltimore, like St. John's, Halifax and Saint John, was a port heavily reliant on international trade in the 1830s, as the city strove to balance public health protocols, international quarantine requirements and the economy.[3] St. John's, Halifax and Saint John, however, were isolated port towns in separate evolving colonies of the British Empire rather than burgeoning cities at the centre of an emerging empire. Their status on the international stage was of a different order, and their relationship with Britain, was one of dependence, not independence. They received the majority of emigrants entering into their respective colonies; however, they also contained a large portion of the overall population and were regarded as epicentres for economic growth, making outbreaks of transmittable disease within their ports a significant threat to the political, social and economic wellbeing of the entire colony.

Towns in Atlantic Canada afflicted by diseases such as cholera in the nineteenth century must be looked at more carefully, as their predicaments prompt important comparisons not only to other international ports, managing strikingly similar issues, but also to one another. The arrival of cholera in receiving ports such as St. John's, Halifax, and Saint John provides an understanding of how available resources and local information were used in the struggle to cope with disease. As Richard Evans explains, '[Cholera] came to Europe as a consequence of European mercantile and industrial enterprise, and once it had arrived, it fastened on to the industrial society that was then in the making and exploited and exaggerated many of its most prominent aspects, from urbanisation and overcrowding to environmental pollution and social inequality'.[4] Growing industrial and engineering technologies,

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[3] Charles Rosenberg, *The Cholera Years: The United States in 1832, 1849, 1866* (Chicago, 1962), and Harrison's *Contagion*, 64.
[4] Richard Evans, *Death in Hamburg: Society and Politics in the Cholera Years 1830-1910* (Oxford, 1987), 226.

particularly in water purification, eventually reduced the threat of cholera, at least in the western world, during the latter half of the nineteenth century, making the outbreaks in many ways a transitional crisis of modernising states. Cholera's effect was similar in the fledgling colonial societies of British North America, exposing their lack of control over the spread of cholera to their shores, their limited capacity to manage such a threat to public health, and their dependence upon Britain to hold their best interests at heart.

The scare of the 1832 epidemic, and the so-called 'neglected' epidemics of 1834, 1854 and 1866, forced those living in the Atlantic region to re-evaluate the adequacy of public health and the value of emigration in an attempt to ensure the health of their citizens as well as the health of foreigners arriving in port.[5] The impact of cholera accentuated the miscommunication and disconnect between the colony and the colonizer during a time of political uncertainty and population growth. Its arrival would force many not only to reassess public health and immigration, but also the nature of their colonial relationship with Britain.

Cholera was introduced throughout the nineteenth century to places that had never before dealt with such chaos and catastrophe. In many countries, public health was in serious need of reconstruction, or even initiation. Anti-contagion and contagion debates ran rampant in the writings and proposals of European scientists and local doctors, and reforms were being urged to address the scourge. Cholera continued to be viewed as 'foreign' disease, which threatened western societies roughly once a decade.[6] Although the threat and reality of cholera penetrated a unique anxiety within society, the greater long-standing concerns throughout this period were

[5] The term 'neglected cholera epidemics' is used by Michael Sigsworth and Michael Worboys in 'The Public's View of Public Health in Mid-Victorian Britain,' *Urban History* 21:2 (1994), 240.
[6] Margaret Pelling, *Cholera, Fever and English Medicine, 1825-1865* (Oxford, 1978), 46.

over the need to improve living conditions, particularly for those in the lower rankings of society. As Margaret Pelling points out, '…sanitary practice as opposed to sanitary administration was very much an art of the possible, it being obvious to all sectors of opinion that most causes of epidemic diseases, especially remote causes, were outside current knowledge or control'.[7] This contributed to the demand for public health reforms and infectious disease protocols in Britain. The British North American colonies acknowledged sanitary reforms made in Britain and the U.S., and eventually followed suit over the need to improve standards of living in each province.

Much like residents of central Newfoundland in September 2001, nineteenth-century cholera and emigration forced settlers in the Atlantic region to react and respond to crises whose origins fell largely outside the realm of their control. The study of cholera in British North America reveals how the transatlantic communications network first brought disease and then was used to respond to it, highlighting the lives of citizens in these colonies who, faced with such an affliction, struggled for understanding, protection and remedy.

[7] Pelling, *Cholera, Fever and English Medicine*, 33.

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