

Title: The Impact of the 1862–63 Smallpox Epidemic on British Columbia's First Nations

Abstract: The smallpox epidemic of 1862–63 had a devastating effect on British Columbia's First Nations, impacting the lives of both individuals and communities. This paper argues that the colonial discourse surrounding the disease was equally harmful, as it posited that Indigenous peoples' suffering was somehow inevitable due to their perceived biological differences and supposed moral deficiencies. This damaging colonial discourse enabled settlers to actively disregard their Indigenous neighbours' suffering and, in doing so, deny their very humanity.

The smallpox epidemic of 1862–63 was catastrophic for many First Nations in British Columbia. First, as an introduced and non-indigenous disease, smallpox had devastating impacts on Indigenous peoples, with mortality rates reaching up to 30%.<sup>1</sup> Not only did the disease claim the lives of individuals, but it also changed the fabric of communities through the loss of elders, family members, and cultural and oral histories. Second, the colonial narrative surrounding smallpox was rooted in white supremacy and was thus deeply damaging to British Columbia's First Nations. It posited that the disease was somehow inevitable due to Indigenous peoples' genetic differences and that they deserved to suffer due to their supposed moral deficiencies. Finally, the 1862–63 epidemic played a central role in paving the way for the colonization of British Columbia.<sup>2</sup> Settlers interpreted the epidemic among Indigenous peoples as the manifestation of God's will for the "unclaimed" province.<sup>3</sup> The smallpox epidemic irreversibly changed the lives of Indigenous peoples in British Columbia.

The outbreak of smallpox had a devastating effect upon British Columbia's First Nations. The epidemic was the result of cultural exchange between two groups: European settlers and British Columbia's Indigenous populations. Although evidence suggests the presence of smallpox in North America as early as 1635, the 1862–63 epidemic is particularly notable for its widespread devastation in British Columbia.<sup>4</sup> The epidemic was far-reaching, "[leaving] few regions of British Columbia (and their native inhabitants) untouched."<sup>5</sup> To this day, the total number of Indigenous people who died during the epidemic remains unknown, but historian

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<sup>1</sup> Wade MacAulay, "A fit judgment for their intolerable wickedness: Settler Responses to the 1862 Smallpox Epidemic in Victoria," Master's thesis, University of Victoria, 2016, 2.

<sup>2</sup> Ibid.

<sup>3</sup> Robin Fisher, *Contact and Conflict: Indian-European Relations in British Columbia, 1774-1890* (Vancouver: University of British Columbia Press, 1977), 16.

<sup>4</sup> Luis Barreto and Christopher J. Rutt, "The Speckled Monster: Canada, Smallpox and its Eradication," *Canadian Journal of Public Health / Revue Canadienne De Sante'e Publique*, no. 4 (2002): 1.

<sup>5</sup> Kiran Van Rijn, "'Lo! The Poor Indian!' Colonial Responses to the 1862-63 Smallpox Epidemic in British Columbia and Vancouver Island," *Canadian Bulletin of Medical History* 23, no. 2 (2006): 542.

Kiran Van Rijn estimates “that nearly 14,000 died on the coast alone.”<sup>6</sup> Extrapolating this statistic to the entire province paints a truly sobering picture of the widespread devastation of the disease. A public health report written by the secretary of the Provincial Board of Health in British Columbia, C. J. Fagan, further attests to the extensive spread of smallpox in the province, with hundreds of cases recorded during the 1880s and 1890s.<sup>7</sup> This statistic suggests that the disease had entered the community and become endemic. Indigenous communities were disproportionately affected by the 1862–63 smallpox epidemic.

In large part, the extensive devastation of smallpox among Indigenous peoples can be attributed to its nature as a novel, non-indigenous disease. Communities found themselves unprepared and ill-equipped to fight smallpox, an unknown illness against which traditional and herbal remedies quickly proved ineffective.<sup>8</sup> Smallpox exceeded the scope of pre-existing medicinal knowledge. Indigenous communities dealt with the illness in the best way they knew how, but as Robin Fisher points out, traditional “cures for illnesses proved ineffective against smallpox, and traditional social forms were inadequate to cope with the crisis.”<sup>9</sup> In some cases, Indigenous practices of socialized health and communal living may have even further enabled smallpox’s spread.<sup>10</sup> Consequently, as Indigenous communities had little to no exposure to or knowledge about the disease, they frequently experienced mortality rates exceeding 30%.<sup>11</sup>

Smallpox had a broader effect among British Columbia’s First Nations beyond simply infecting individual persons. Although communities as a whole generally survived smallpox,

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<sup>6</sup> Ibid., 552.

<sup>7</sup> C. J. Fagan, “British Columbia: Smallpox Present,” *Public Health Reports (1896-1970)*, no. 11 (1900): 606.

<sup>8</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 545.

<sup>9</sup> Fisher, *Contact and Conflict*, 16.

<sup>10</sup> Keith Thor Carlson, “First Contact: Smallpox,” *The Stó:lō in Canada’s Pacific Coast History*, Stó:lō Heritage Trust, 1997, 37.

<sup>11</sup> MacAulay, “‘A fit judgment,’” 2.

they, “like individual survivors of smallpox... emerged horribly scarred and debilitated.”<sup>12</sup> The overwhelming number of deaths left surviving communities, families, and individuals in a state of deep shock and grief.<sup>13</sup> In oral accounts of the disease, Henry Solomon of the Tsilhqot'in First Nation recalls the devastation smallpox wreaked upon his family, with only his grandmother and her sister surviving.<sup>14</sup> The deaths weakened the fabric of previously strong, vibrant communities and families. In addition, the loss of elders to the disease “resulted in a loss of [traditional] knowledge and a gap in learning” in many First Nations, which historically relied on oral tradition for cultural survival.<sup>15</sup> Without elders’ knowledge, cultural survival was extremely difficult. The smallpox epidemic also impacted the economic wellbeing of communities as losing family members and their incomes contributed to financial hardship, “which resulted in poverty and feelings of despair.”<sup>16</sup> The effect of smallpox within British Columbia’s First Nations was deep and its reverberations felt throughout entire communities.

Arguably even more damaging than smallpox itself was the colonial discourse surrounding the disease. In his book entitled *Small-pox: the Predisposing Conditions and their Prevention* published in 1872, author Carl Both testified to the supposed inevitability of smallpox among racial minorities. Both suggested that general health is found in the correct or “natural” balance of blood components, and salt in particular. This considered, he claimed that “any variations from this formula of nature is abnormal, and must sooner or later, if the correct balance is not very soon re-established, result in the development of some disorder as the consequence.”<sup>17</sup> This basic framework served as Both’s medical explanation of smallpox among

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<sup>12</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 555.

<sup>13</sup> Henry Solomon, “A Tsilhqot'in Account of Smallpox,” in *Nehemiah: The Unconquered Country*, ed. Terry Glavin (Vancouver: New Star Books, 1992), 85-86.

<sup>14</sup> Carlson, “First Contact: Smallpox,” 39.

<sup>15</sup> Ibid.

<sup>16</sup> Ibid.

<sup>17</sup> Carl Both, *Small-pox: the Predisposing Conditions and their Prevention* (Boston: A. Moore, 1872), 12.

North America's Indigenous populations. He argued that the population is genetically distinct and "so constituted in their organization as to be liable to [smallpox], while those who continued in health were so constituted as to escape uninjured."<sup>18</sup> This explanation rationalizes the destruction Indigenous peoples faced at the hands of the smallpox epidemic, arguing that it was both inevitable and irreversible. To quote historian Wade MacAulay, Both's medical theory of smallpox "reflect[s] more [a] racist-moralist conception of disease than contemporary medical knowledge."<sup>19</sup> In this way, the colonial discourse surrounding smallpox refused to acknowledge the very real and damaging role that settler communities played in the epidemic, both actively and passively. Instead, the colonial narrative was rooted in notions of white supremacy and alleged Indigenous inferiority.

Furthermore, colonial discourse went as far as to attribute the 1862–63 smallpox epidemic to Indigenous peoples' perceived immorality. Although the disease was originally transported to North America via European settlers, traders, and immigrants, many colonists overlooked this fact and instead attributed it to British Columbia's original inhabitants. This is perhaps most explicitly stated by Both, who claimed in his book that "[s]mall-pox is not a disease of nature, but a consequence of some *mistake* of civilization."<sup>20</sup> In the case of the "American Indians" in particular, he stated that "the reason or cause of their being affected [by smallpox] is to be found *in themselves*, and not in the atmosphere alone."<sup>21</sup> According to Both, not only was the smallpox epidemic among Indigenous civilization inevitable, it also served as

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<sup>18</sup> Ibid., 7.

<sup>19</sup> MacAulay, "'A fit judgment,'" 14.

<sup>20</sup> Both, *Small-pox*, 28.

<sup>21</sup> Ibid., 7.

punishment for their supposed immorality.<sup>22</sup> In this way, Indigenous people “were seen as both particularly susceptible to smallpox and particularly deserving of it.”<sup>23</sup>

In particular, the colonial discourse surrounding smallpox was fixated on drunkenness and alcoholism as an explanation for disease. Both made an explicit connection between smallpox and alcoholism by asserting that smallpox exists “among races or nations that use alcohol freely,” but provided no evidence to support this claim.<sup>24</sup> Instead, he appealed to his theory of blood salts and claimed that during the fur trade, Indigenous peoples’ acquisition of alcohol caused their “blood-salts [to be] thrown out by the use of alcoholic drinks... [and] they at once became predisposed to small-pox, and fell victim to its ravages.”<sup>25</sup> This theory was popular among settlers during the 1862–63 epidemic. Rather than pursuing medical or epidemiological explanations for the disease, Euro-Canadian settlers attributed its spread among Indigenous communities to “their supposed tendencies towards violence, drunkenness and poor hygiene.”<sup>26</sup> This theory of alcoholism and moral deficiency was so widely accepted that, under the Colonial Legislature of Vancouver Island of 1854, “Indians” were not permitted to purchase alcohol.<sup>27</sup> Unfortunately, this “focus on the immorality of the aboriginal victims dehumanized them.”<sup>28</sup> In directing attention to Indigenous sufferers’ supposed shortcomings and moral deficiencies, settlers overlooked their suffering.

The settlers’ supremacist view directly impacted their attitudes and actions. Although some colonists displayed concern for their suffering Indigenous neighbours, the belief that they were particularly deserving of smallpox enabled colonists to resign themselves to Indigenous

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<sup>22</sup> Both, *Small-pox*, 28.

<sup>23</sup> MacAulay, ““A fit judgment,”” 34.

<sup>24</sup> Both, *Small-pox*, 25.

<sup>25</sup> *Ibid.*, 19.

<sup>26</sup> MacAulay, ““A fit judgment,”” 34.

<sup>27</sup> *Ibid.*, 15.

<sup>28</sup> *Ibid.*, 14.

suffering and deaths.<sup>29</sup> As Van Rijn points out, this sense of “pity [allowed] the observer to remain aloof” because it freed him “from an emotional commitment to the suffered and absolved him from responsibility, thereby enabling him to turn his back on suffering.”<sup>30</sup> In addition to the complex “mixture of pity, revulsion, and smug sense of inevitability,” there was an “overriding concern for their own self-interest.”<sup>31</sup> Colonists were aware of the risk of smallpox transmission from interaction with the infected, so they typically chose to avoid Indigenous sufferers entirely. The belief that Indigenous peoples were somehow deserving of their suffering enabled colonists to intentionally and actively disregard the wellbeing of their non-European neighbours.

Settler communities took very few measures to prevent the spread of smallpox among British Columbia’s Indigenous population. Perhaps unsurprisingly, “the colonial population took all measures to protect *itself* from smallpox,” but did not extend these measures to Indigenous sufferers.<sup>32</sup> Van Rijn points out that increased education about the disease would have enabled Indigenous communities to take appropriate precautions; however, “very little evidence suggests that colonists took any... efforts to educate First Nations so as to minimize [the] spread” of smallpox.<sup>33</sup> Instead, colonists focused on the supposed Indigenous immorality rather than the need for education and proper precautions, such as quarantining the sick.<sup>34</sup> Furthermore, vaccination against smallpox would have prevented or slowed its rapid spread, but the preventative measure was far more common among settler communities than among Indigenous communities. Missionaries, government officials, and Hudson’s Bay Company (HBC) officials advocated for widespread vaccination within settler communities.<sup>35</sup> While records exist of the

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<sup>29</sup> Ibid., 16.

<sup>30</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 544.

<sup>31</sup> Ibid., 541.

<sup>32</sup> Ibid., 549.

<sup>33</sup> Ibid., 547.

<sup>34</sup> MacAulay, “‘A fit judgment,’” 14.

<sup>35</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 551.

vaccination of several Indigenous employees of HBC, it appears these vaccinations were largely performed out of the self-interest of other non-Indigenous employees.<sup>36</sup> Any efforts to ease the suffering of Indigenous sufferers were surface-level and symbolic, such as the distribution of food and blankets; these “actions were charitable, but likely did little to stop the spread of disease.”<sup>37</sup> Occasionally, particularly harmful measures were taken against Indigenous populations. For example, as smallpox swept through Victoria, British Columbia, the settler community blamed the spread on the local Indigenous population, which eventually resulted in the forcible relocation of the Indigenous population.<sup>38</sup> Fearing the disease and attributing its spread to racial minorities, the local government evicted Indigenous peoples from the town “to a place remote from communication with the whites.”<sup>39</sup> Van Rijn argues that although colonists perhaps did not “consciously [attempt] to devastate the First Nations populations... their frequently negative attitudes towards them ensured that actions to prevent this occurrence were sporadic, poorly planned, counterproductive, or simply minimal.”<sup>40</sup> Colonial responses to the smallpox epidemic were largely influenced by the perceived inferiority and immorality of the disease’s primary victims.<sup>41</sup>

The Euro-centric understanding of smallpox culminated in the belief that the disease cleared the way for the colonization of British Columbia. Indigenous peoples’ suffering “confirmed [many settlers’] expectation that the Indians were soon to die out,” which would allow settlers to colonize their land.<sup>42</sup> Historian Wade MacAulay suggests that the settler worldview hinged upon “a theory of development and land use” in which “aboriginal land was

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<sup>36</sup> MacAulay, “A fit judgment,” 3.

<sup>37</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 547.

<sup>38</sup> MacAulay, “A fit judgment,” 26.

<sup>39</sup> “The Small-Pox Among the Indians,” *Daily British Colonist*, 28 April 1862, 2.

<sup>40</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 543.

<sup>41</sup> *Ibid.*, 542.

<sup>42</sup> Fisher, *Contact and Conflict*, 16.



seen to be at an ‘earlier’ stage of development.”<sup>43</sup> Consequently, the removal of First Nations was considered an essential step in the process of settlement and land development in British Columbia – and smallpox provided a convenient method of removal. Although some colonists expressed concern about Indigenous suffering and deaths, the spread of disease among First Nations was typically viewed as necessary. Occasionally settlers went as far as to interpret smallpox as divine intervention as to some, the epidemic was evidence of “God’s will” for the “unsettled” territory.<sup>44</sup> As a result of their Euro-Christian colonial background, settlers considered Indigenous peoples’ supposed immorality to be a sign of God’s will for the eventual “triumph of Christianity... and the settlement of the frontier by white British colonists.”<sup>45</sup>

However, despite overwhelming odds, British Columbia’s First Nations exhibited incredible resiliency in the face of the smallpox epidemic. The Stó:lō nation of southern British Columbia is an excellent testament to this resiliency. The nation was ravaged by smallpox epidemics in both the eighteenth and nineteenth centuries, including the 1862–63 epidemic. Although “it would have been impossible for Stó:lō life to continue as normal” following devastation by smallpox, the nation and its vibrant cultural history persevered through the disease and endures to this day.<sup>46</sup> The various smallpox epidemics have been integrated into the fabric of Stó:lō cultural history, with elders remembering the victims “in place names as well as oral traditions.”<sup>47</sup> This is true of many other First Nations in British Columbia. Even in the face of the 1862–63 smallpox epidemic and its corresponding colonial narrative, First Nations demonstrated incredible resilience and endurance.

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<sup>43</sup> MacAulay, “‘A fit judgment,’” 7.

<sup>44</sup> Van Rijn, “‘Lo! The Poor Indian!’ Colonial Responses,” 545.

<sup>45</sup> *Ibid.*, 547.

<sup>46</sup> Carlson, “First Contact: Smallpox,” 39.

<sup>47</sup> *Ibid.*, 35.

Ultimately, the 1862–63 smallpox epidemic deeply devastated British Columbia's Indigenous peoples, changing the trajectory of Canadian history. The disease was catastrophic on both an individual and communal level, with the loss of individuals and the traditional structures of communities. Tragically, the colonial discourse surrounding the epidemic contributed to its spread among British Columbia's First Nations. The attribution of smallpox to Indigenous peoples' supposed genetic differences and moral deficiencies allowed colonists to disregard their evident suffering. Furthermore, through this colonial lens, the smallpox epidemic was understood to be a part of God's will to allow colonization of the "new" province. However, British Columbia's Indigenous peoples demonstrated incredible resiliency and vitality in the face of smallpox. Although they sustained enormous suffering and loss, their cultural survival is truly "a testimony to the strength, endurance and innovative nature of [their] cultural traditions" and communities.<sup>48</sup> Even in the face of the 1862–63 smallpox epidemic and its equally damaging colonial narrative, British Columbia's Indigenous peoples demonstrated incredible resilience.

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<sup>48</sup> Carlson, "First Contact: Smallpox," 39.

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