AS GOOD AS AN ARMY:

Mapping Smallpox during the Seven Years’ War in North America

Kirrily Apthorp

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ABSTRACT

There is substantial evidence that smallpox was widespread in North American during the Seven Years’ War. However, there have been no attempts to determine the extent to which it occurred. This thesis will map outbreaks of smallpox from the beginning stages of the conflict in 1752 through to the close of the Anglo-Indian War in 1765. It aims to demonstrate the far-reaching nature of a smallpox epidemic that lasted the duration of the war, and during other periods of intense conflict. After a preliminary consideration of effects the epidemic had on the war, it is clear that future studies are required to determine its full impact.
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INTRODUCTION

As autumn closed in around eastern North America in 1757, a group of Ottawa warriors returned to their homes on the western shore of Lake Huron, following a season of campaigning alongside the French in the Champlain Valley. In addition to the spoils of war, which they carried home as evidence of their victories against the British, they also brought with them a tin box purchased in Montreal with the hope that its mysterious contents would do their nation „great good” once opened within the confines of their own territory.\(^2\) Intrigued by the gift they had carried all the way home unopened, members of the Ottawa nation crowded around the victorious warriors as the lid was lifted.

Inside however, they found only a series of smaller boxes until at last they were left with a single box just a few centimetres long. Disappointingly, the contents of the final box consisted only of a mouldy dust which, despite close inspection by many of the Ottawa people, could not be identified.\(^3\) It was not until several days had passed that the true nature of the box”s contents became fatally clear to the Ottawa people. Unbeknownst to them, they had carried home smallpox, one of the deadliest diseases of the eighteenth century, thereby infecting hundreds of their brethren.

The subsequent outbreak of smallpox decimated the region. It killed entire families, vacating „lodge after lodge” until the western shore of Lake Huron along the Mackinac Straits was „entirely depopulated and laid waste.”\(^4\) Despite buying the box in Montreal, the Ottawa


\(^3\) Ibid.

\(^4\) Ibid.
blamed the English for the „wholesale murder” of their people as revenge for their support of the French during the war.  

The Ottawa experience of smallpox in 1757 was symptomatic of a larger, more devastating smallpox event that engulfed the Great Lakes and eastern North America from the outset of the Seven Years’ War. The effects of this event resonated through the oral testimony of the Ottawa nation for one hundred years before it was recorded in print. As thousands of Europeans, Native Americans and colonists flooded into the eastern and western theatres of war, their high levels of susceptibility and expansive mobility allowed smallpox to become embedded within the daily life of the war. As a result, thousands were infected, many died and countless others were left with the physical and emotional scars of a hard fought battle with smallpox.

Smallpox was one the most deadly diseases known to mankind until its eradication by the World Health Organisation in 1979. The exact origins of the variola virus that caused smallpox remain difficult to determine for historians due to the imprecise nature of historical accounts of the disease. However, for thousands of years smallpox had severe effects on the

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5 Blackbird, History of the Ottawa and Chippewa, pp. 9-10. This account, published over one hundred years after the end of the Seven Years’ War in North America by a member of the Ottawa tribe, is one of the few Native American sources to explicitly indicate the presence and effect of smallpox amongst the inhabitants of the Great Lakes during the war. While the veracity of the story may be called into question, written as it was many years after the fact, the account can be verified by modern and historical sources from the war. European sources confirm that there was in fact a smallpox outbreak among the Ottawa in 1757. Louis Antoine de Bougainville, Adventure in the Wilderness: The American Journals of Louis Antoine De Bougainville 1756-1760, trans. Edward P. Hamilton (Norman: University of Oklahoma Press, 1964), p. 193; Pierre Pouchot, Memoir Upon the Late War in North America between the French and English, 1755-60, trans. Franklin B. Hough, 2 vols. (Roxberry, Mass.: Printed for W. Elliot Woodward, 1866), pp. 91, 92.


7 Ibid., p. 10.
political, social and domestic landscapes of nations as it claimed the lives of millions of people around the world. In severe cases, those who survived a bout with smallpox could be left so badly scarred and deformed by the experience that they were ostracised by their community or took their own lives.

Today, smallpox exists only within the memories of those vaccinated during the World Health Organisation’s eradication effort in the mid-twentieth century, and in two small stockpiles of the virus in research facilities in the United States of America and Russia. For the Native American Indians following first contact with Europeans however, smallpox existed as a very real and terrifying threat. The introduction of the disease to America in the sixteenth century resulted in extreme devastation amongst the Native American population. Their lack of expose to the disease, resulted in the death of millions; weakening the social, political and even spiritual fabric of Native American life, as the disease spread across North America in the wake of major European exploration and colonisation in the sixteenth and seventeenth centuries.

Despite these virgin soil epidemics, smallpox continued to plague the inhabitants of North America well into the eighteenth century. It represented a daily threat to nations across Europe, where it was largely endemic, and a constant fear for the inhabitants of America,

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10 Koplow, Smallpox, p. 31.
where smallpox would appear suddenly in devastating epidemics every few years.\textsuperscript{13} No other disease or any war killed as effectively or spread as much terror in its wake as smallpox, particularly within environments already compromised by the conditions of warfare. During the eighteenth century smallpox became „a weapon more effective, of greater range, of surer aim than any rifle or poison gas ever devised. It was, as had been said, captain of the men of death.”\textsuperscript{14}

In the 1750s and 1760s, smallpox ran headlong into the major conflagration consuming the Great Lakes and eastern North America; the Seven Years' War. In some ways the Seven Years” War was a grand finale to the skirmishes between the French and English in North America, which had plagued the region for decades. However, at the same time it was also a war of many firsts; the foremost of which was the extensive smallpox outbreaks that permeated the war.

As a topic of enquiry for historians, the Seven Years” has enjoyed increasing popularity over the last ten years. The developing view of the conflict as the „very first world war” has led many historians to focus on a war previously overshadowed by the American Revolution.\textsuperscript{15} The conflict between the French and English that took place between 1753 and 1760 in the eastern half of North America had significant implications for regional relationships between Native Americans and colonists. It also had substantial ramifications for the global interactions between England, France and the future United States of America;

\textsuperscript{13} Fenner et al., \textit{Smallpox and Its Eradication}, p. 224.
causing tensions that would remain unresolved until the American Revolution just over twenty years later.¹⁶

As the first global conflict to span the battlefields of Europe and North America, the Seven Years’ War resulted in a massive influx of soldiers, both European and American, into eastern North America on a scale not seen before, as well as the deployment of an unprecedented number of North American Indian groups acting as allies. The mobilisation of thousands of English, French, and Native American troops and warriors put the inhabitants of New France (today Canada), the eastern seaboard, and the Great Lakes in contact on a continental scale as a result of the movement of armies and civilians over the course of the war.¹⁷

European reinforcements came armed with an abundant supply of food, goods and firepower with which to fight the war and solidify alliances with Native American nations who expected the giving of gifts of food and weapons as marks of respect.¹⁸ In association with these gifts, Europeans were also accompanied by an armada of contagions, which had severe implications for the inhabitants of the region and the war. As European and colonial troops flooded eastern North America, they circulated numerous diseases, none more deadly than smallpox. In an area accustomed to ten year-cycles of smallpox and disease, the circulation of people and the unhealthy conditions under which they lived and moved saw an explosion of disease, predominately identified by sources as smallpox.¹⁹

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¹⁸ During negotiations with Native American nations, it was customary to present a gift as a mark of respect. It was also expected that the French or English would provide provisions of food and drink to their allies while on campaign.
A popular topic of historical enquiry, histories of disease on a global scale have produced important insights into the extent to which diseases such as smallpox have shaped our world, and continue to do so even today. They have further given rise to the study of disease in specific contexts such as the development of nations and cities, exploring the social and political implications of disease within communities. For instance, studies exploring the impact of smallpox on Britain and London have demonstrated how the increasing prevalence of the disease affected the population growth. They also illuminated social disparities between the wealthy and poor as variolation, a precursor to vaccination, was initially developed as a protective measure taken by the wealthy before its benefits were applied as wider public health initiatives.

Over the course of these studies, it has become apparent that certain diseases have affected various populations in different ways with long-lasting results. In America where the disease had a crippling impact on the Native American population, the impact of „old world germs” on the virgin soil of North America has become a topic of intensive study and debate amongst historians. Although debates over the true population size of Native Americans prior to colonisation continue, historians have clearly established the devastating effect that

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22 William A. Guy, „Two Hundred and Fifty Years of Small Pox in London”, Journal of the Statistical Society of London 45, no. 3 (September 1882), p. 403.
the introduction of common European diseases had on Native American Indians. Following the spread of the disease around America, estimates on the initial effects that smallpox had on the Native American population suggest attrition rates of between fifty and ninety per cent. The lack of an "immunological memory for Old World infectious agents" left Indians at the mercy of contagions such as smallpox, influenza and measles; diseases that developed in association with cities and areas of dense populations.

These studies are critical to our current understanding of why and how Native American populations decreased rapidly following European contact. They also clearly link periods of warfare and colonisation and the resulting eruption of disease. Research into disease epidemics during periods of conflict and their aftermath has revealed an added dimension to the already tumultuous circumstances of war. It has emphasised how "the heightened mixing of both military and civilian populations" that occur during times of conflict, increased "the likelihood of the transmission of infectious diseases." In doing this, historians have demonstrated the viability of reassessing our current understandings of particular wars in terms of diseases.

No other contagious disease had the capacity to intensify the miseries of war like smallpox. Surprisingly however, there have been relatively few studies made of its influence during specific periods of war. Until recently, the absence of such studies had left a significant gap in the historical record. Elizabeth Fenn’s recent ground-breaking study of

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smallpox during the American Revolution has gone a long way in starting to fill that void.\(^{29}\) By studying the outbreak of smallpox over the course of the Revolution year by year, in conjunction with the major events of the war, Fenn has produced one of the first analyses of the breadth and nature of smallpox between 1775 and 1782, demonstrating the significance and the surprising results that can come from looking at smallpox within the context of a specific event such as the American Revolution.

Fenn’s analysis has shown that between 1775 and 1782 almost 130,000 died from a smallpox epidemic that ravaged North America from Mexico to Canada.\(^{30}\) Determining the extent of the outbreak, and its movement in relation to the ongoing war, has allowed Fenn to explore the way in which smallpox influenced the American Revolution. Consequently, she has demonstrated how the smallpox epidemic of 1755-82 had a significant impact on the movement of American soldiers, the way in which colonial troops were introduced into the army, and the strategies used by American and English military commanders throughout the war. For example, having experienced the effect smallpox had on susceptible troops during the Seven Years’ War first hand, George Washington initiated inoculation drives and quarantine for newly enlisted soldiers, in order to limit the influence smallpox had on the American army during the Revolution.\(^{31}\) As a result of her study, Fenn has simultaneously uncovered yet another dimension to the American Revolution, and opened the door for similar studies to be made of smallpox epidemics during times of war.

In writing about the American Revolution, Fenn has also highlighted the absence of any similar works on earlier conflicts such as the Seven Years’ War. Although the recent popularity of the war in historical scholarship has led to several in-depth and influential

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\(^{30}\) Fenn, *Pox Americana*, pp. 273-274. See also map of Smallpox Transmission through North America, 1775-82, p. 7.

\(^{31}\) Ibid., pp. 46-52.
works, few take any serious consideration of smallpox outbreaks during the war. Many historians have made assertions about the extent and impact of smallpox, but few have undertaken any research on the subject. As a result, we are left with very little idea as to what was in fact taking place in terms of smallpox during the Seven Years’ War.

D. Peter MacLeod is perhaps the one exception to this trend. Before Fenn had published her exploration of smallpox during the Revolution, MacLeod was one of the few historians to have undertaken a study of smallpox within the context of an American war. His exploration of the influence that smallpox had on the participation of Native American groups during the Seven Years’ War offers one of the only direct analyses on the effects of the disease. However, even as MacLeod’s work offers some answers to the question of how smallpox affected the Seven Years’ War, it still leaves many unanswered. For instance, although exploring the effects of smallpox on the French and Native America alliance, MacLeod has failed to establish the extent of the disease throughout the region, or the conditions that led to such influential epidemics. Instead he relies, like many other historians, on general reports of epidemics, reports that are often vague and give no real idea of the scope of the disease.

Clearly historians have demonstrated that smallpox and the Seven Years’ War were both important events in eighteenth century North America; smallpox posed a persistent and serious threat to the populations of Native Americans and colonists, and the Seven Years’

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33 Francis Jennings, Empire of Fortune: Crowns, Colonies, and Tribes in the Seven Years War in America (New York: W.W. Norton, 1988), pp. 200-01. Fred Anderson and Ian K. Steele are two of the major Seven Years’ War historians who fail to address the effects of smallpox in their work. Anderson, Crucible of War; Steele, Warpaths.
War was a momentous event in terms of the local and global politics of the region. Yet the two are rarely considered in relation to one another. When they are, historians make only generalised assertions regarding the presence of smallpox during the war and the use of supporting evidence has often been limited. As a result of this, there remains a substantial gap in the historical record.

This thesis will aim to answer some important questions regarding the extent to which the conditions of the Seven Years’ War supported the spread of smallpox, and how widespread smallpox became throughout the Great Lakes and eastern North America during the war. The Seven Years’ War created conditions never experienced before by the inhabitants of eastern North America. As thousands of soldiers and Native Americans flooded into the region they brought with them disease, setting the stage for a significant smallpox event. Between 1755 and 1760, smallpox was of epidemic proportions throughout the Greats Lakes and eastern North America and may have had a marked impact on the course of the war. In light of this, it is evident that in the future, the presence of smallpox during this period cannot be ignored and its potential impact deserves further consideration by historians of the Seven Years’ War.

Over the course of this thesis, I have drawn upon a vast array of sources, primarily in the form of correspondence. These include the fourteen volume set of the correspondence of the American military commander and Indian agent William Johnson, six volumes of The Papers of Henry Bouquet and the ten volume set of Documents relative to the colonial history of the state of New-York all containing thousands of pages of English and French (translated) official communication from the war. In addition, the Pennsylvania Archives consisting of ten series of correspondence and documentation, totalling 138 volumes, was
also used extensively. Due to the official nature of these sources, mentions of smallpox were often secondary to the main information being relayed, making the research process particularly laborious.

Journals and memoirs of military officers, such as Louis-Antoine de Bougainville, Pierre Pouchot, Jeffery Amherst and numerous colonial American soldiers, have also provided insight into the extent of smallpox and its interaction with different groups over the course of the war. Like the official correspondence, these sources have also often proved frustratingly vague regarding discussions of smallpox, reflecting eighteenth-century understanding of diseases, as well as the normalisation of disease due to the insanitary conditions of the war. However, when pieced together, these sources paint a picture of the entrenched nature of smallpox during the Seven Years’ War, the circumstances under which outbreaks flourished, and to some extent the impact smallpox had on the war.

Previously, access to these sources has been limited and the use of them often crippling time consuming. Mentions of smallpox during the war in these sources were often lost in a sea of official information regarding campaigns and the daily administration of the war, making them difficult to locate. However, digitisation has made searching for this type of information faster and easier, increasing accessibility to the important information held within these letters and journals. Electronic access to archives such as the Pennsylvania Archives has provided thousands of new sources to search through, thereby increasing both the availability and volume of information. As a result, digitisation has provided an incredible


35 Bougainville, Adventure in the Wilderness; Pouchot, Memoir Upon the Late War in North America between the French and English, 1755-60; Jeffery Amherst, The Journal of Jeffery Amherst: Recording the Military Career of General Amherst in America from 1758 to 1763, ed. J. Clarence Webster (Chicago: University of Chicago Press, 1931).
amount of resources with which to more accurately plot the movement of smallpox over space and time during the Seven Years” War.

There are some shortcomings to the widespread digitisation of sources. As accessibility has increased, so too has the number of sources. As the process of digitisation continues, the number of sources available grows exponentially, requiring more efficient research techniques such as the use of keyword searches. However, this can often result in missing relevant information when specific terms are not picked up by search engines, or the scanned quality of the source is poor. This was a particular problem in searching for mentions of smallpox amongst the thousands of letters and journal entries. Eighteenth-century writers often used obscure terms and spellings of smallpox, or provided descriptions of disease that only when cross-referenced against other sources were found to be referring to smallpox. As a result, it was necessary to search not only for accounts of smallpox, but also accounts of disease and sickness in general, in an attempt to cast the widest net for references regarding smallpox outbreaks. In light of this shortcoming, it is likely that some references slipped through the research process, and it is necessary therefore to recognise that any mapping of the Seven Years” War can, until further research is undertaken, only ever present a conservative idea of the true event.

Even with only a conservative idea of the true scale of the smallpox outbreaks during the war, this thesis will demonstrate the extensive presence of a smallpox epidemic that engulfed the Great Lakes and eastern North America. Chapter one will set the stage for the epidemic by exploring the epidemiology of smallpox and the conditions of the Seven Years” War that promoted the spread of the disease throughout the region. The presence of thousands of soldiers, Native American warriors and civilians overburdened the region, resulting in famine and disease on a devastating scale. This environment, in addition to the
constant circulation of susceptible bodies, promoted the onslaught of smallpox over the course of the war.

Chapter two will present the main fruits of the research undertaken by mapping smallpox outbreaks year-by-year between 1752 and 1765. The inclusion the years prior and subsequent to the war will reveal the progression of smallpox in the build up to the war, and its decline following it. The events of 1752 and 1763 will further establish the connections between smallpox and periods of conflict, while additionally emphasising the scale and impact of smallpox during the Seven Years’ War.

Chapter three will act as an extended conclusion and explore some of the impacts that smallpox had on the Seven Years’ War in recognition of significant and influential role that the disease played in the war. In recognition of the breadth of such an undertaking, this will constitute only an initial consideration of the full impact of smallpox in order to stimulate further research into the issue and to emphasise the importance for future studies to consider the role of smallpox during the Seven Years’ War.
CHAPTER ONE

The Symptoms of War: An Overview of Smallpox and the Seven Years’ War

In June 1752, French-allied Native Americans from the smallpox-riddled pays d’en haut attacked the Miami town of Pickawillany, host to one of the largest English western trading posts, killing and symbolically eating the body of an English trader and the Miami chief in the process. Fourteen Miamis also died during the clash and five English traders were taken captive before the French-allied raiders destroyed the town and returned to their homes.

This was no random attack. French leaders in New France had been in planning the assault since the year before; the delay had occurred only due to the widespread appearance of smallpox throughout the area at the beginning of 1752. The brutal attack on the town and its associated trading post was a message to the British and any British-allied Native Americans that the French and other Native American groups would not tolerate the presence of English traders in the Ohio Valley. As a warning it elicited mixed results. The Miami tribe quickly reaffirmed their alliance with the French, yet rather than being cowed by the experience, the English viewed the attack as a renewal of the French and English hostilities that had plagued the region for decades. In reality the attack on Pickawillany signalled the

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36 Anderson, Crucible of War, p. 29; William Trent, Journal of Captain William Trent from Logstown to Pickawillany, A.D. 1752 Now Published for the First Time from a Copy in the Archives of the Western Reserve Historical Society, Cleveland, Ohio, Together with Letters of Governor Robert Dinwiddie; an Historical Notice of the Miami Confederacy of Indians; a Sketch of the English Poet at Pickawillany, with a Short Biography of Captain Trent, and Other Papers Never before Printed, ed. Alfred Goodman (Cincinnati: William Dodge, 1871), p. 49.
39 The Seven Years’ War was preceeded in eastern North America by King William’s War (1689-97), Queen Anne’s War (1702-13) and King George’s War (1740-48), yet these wars were predominantly European wars, with the North American theatre of war playing a less significant role. Anderson, Crucible of War, pp. 11, 29.
start of something new. The actions of the French in the Ohio Valley reverberated in the political chambers of France and England, sparking a war that would stretch from North America across the Atlantic to the battlefields of Europe.

The attack on Pickawillany also had a secondary purpose. Not only was it a warning to the English to stay out of the contested territory of the Ohio Valley, it also functioned as a reminder to those Native American nations who would trade with the English, that the French would accept no challenge to their authority and dominance over trade in the region. The attack and the symbolic cannibalism of the leader of the Miami nation reinforced the message, amongst the English and Native American groups alike, that the French controlled the Ohio Valley and the Great Lakes. In effect the attack drew the battle lines for the oncoming war, reinforcing the French alliance with the western Native Americans and asserting their claim to the Ohio Valley. Pickawillany was the first outbreak of hostilities of the war, but it would be another two years before the first official campaigns would take place after a period of political wrangling in Europe.

The events at Pickawillany not only signalled the beginning of the conflict, but also the conditions under which it would be fought. Smallpox had shadowed and influenced the events at Pickawillany, just as it would shadow and influence the oncoming war. The Seven Years’ War introduced thousands of people to the region, resulting in fraternization between Native Americans, Europeans and North American-born men and women on an unprecedented scale. It was the interaction and movements of these groups that set the scene for smallpox outbreaks that would last the length and breadth of the war.

40 Anderson, Crucible of War, p. 29.
41 Pickawillany is considered by many historians to have been the first battle of the Seven Years’ War in North America. See Michael A. McDonnell, ‘Charles-Michel Mouet de Langlade: Warrior, Soldier, and Intercultural “Window” on the Sixty Years’ War for the Great Lakes’, in David Curtis Skaggs and Larry L. Nelson, eds., The Sixty Years’ War for the Great Lakes, 1754-1814 (East Lansing: Michigan State University, 2001), p. 100, n. 5.
Smallpox on the eve of the Seven Years’ War

On the eve of the Seven Years’ War in North America, smallpox had established itself as one of the most deadly diseases of the eighteenth century. Two hundred years before its eradication, smallpox was endemic amongst the populations of major European cities, claiming an average of 400 000 lives per year. While it had become predominately a childhood disease in Britain, towards the middle half of the century smallpox epidemics increased, signalling a resurgence of the disease amongst the greater population. As a consequence of this, by the start of the Seven Years’ War, in Europe smallpox had become „a more regularly occurring check on the growth of the population than the plague had been."

Over thousands of years, smallpox had become synonymous with urban settlement; dense populations provided the most suitable conditions for smallpox to flourish. Unlike many other urban diseases such as the plague and typhus, smallpox had no reservoir outside the human body and thus its primary means of transmission was via human interaction. Spread most effectively by face-to-face contact via airborne droplets from an infected victim, crowded cities and towns with a constant influx of susceptible people, either by immigration or birth, provided the perfect conditions for smallpox to persist for months or years at a time.

In North America however, the relative isolation of settlements prevented smallpox from becoming endemic. Instead the disease circulated the continent in ten year-cycles, devastating generations of American-born colonists and Native Americans who had not yet

42 Fenner et al., Smallpox and Its Eradication, p. 229; Koplow, Smallpox, p. 199.
45 For the history of smallpox around the world, see Donald R. Hopkins, The Greatest Killer: Smallpox in History (Chicago: The University of Chicago Press, 1983).
46 Koplow, Smallpox, p. 12.
been exposed to the disease.\textsuperscript{48} By the start of the war in 1753, millions of Native Americans had been wiped out by smallpox since its introduction to America in the sixteenth century by the first European explorers and settlers.\textsuperscript{49} The prevalence of the disease throughout Europe meant that smallpox was continually carried via ships to America throughout the seventeenth and eighteenth centuries to towns along the eastern seaboard, which offered easy points of entry for the disease. As cities developed around major eastern seaports such as Boston, New York and Philadelphia, and shipping between Europe and America increased during the Seven Years’ War, smallpox became a constant threat to the susceptible inhabitants of North America.

Once smallpox had gained entry to the continent via the ports of Philadelphia, New York or even Quebec in New France, it took only a matter of weeks for the disease to become established amongst the trading posts or Native American nations of the Great Lakes and Acadia. The initial spread of smallpox offered no warning to its victims. The incubation period was symptomless and lasted an average of twelve days before the onset of a high temperature and rash (often initially mistaken for the measles or chickenpox) indicated the beginning of the infectious stage. As a result, an infected individual could be weeks into an Atlantic crossing or settled at a trading post in the middle of the North American wilderness before they even realised they were sick.\textsuperscript{50}

The well-travelled trade routes along the Ohio Valley in the \textit{pays d’en haut} in the west, Lake Ontario in the North, and the Champlain Valley in the east offered convenient access into the heartlands of Canada and the Great Lakes for traders looking to buy furs from

\begin{footnotes}
\footnote{Koplow, \textit{Smallpox}, p. 12.}
\footnote{Russell Thornton, \textit{American Indian Holocaust and Survival}, p. 45; Dobyns, \textit{Their Number Become Thinned}, p. 11.}
\footnote{Hopkins, \textit{Princes and Peasants}, pp. 3-4.}
\end{footnotes}
Native Americans.\textsuperscript{51} Yet occasionally traders carried more than guns and trading goods with them from the cities. Prior to the start of the war, fur traders provided the surest means of communicating smallpox from the eastern cities, inland to Native American nations, and settlers living on the fringes of the colonies.\textsuperscript{52} Once the war had commenced however, traders gave way to soldiers and Native American warriors as the primary carriers of smallpox.

Once the disease had entered a community, nothing could stop its spread; only previous exposure to smallpox could promise protection from another outbreak. The first few days, during which the sufferer developed the characteristic pustules concentrated on the face and limbs, were the most infectious.\textsuperscript{53} After taking hold in the respiratory tract, smallpox was most effectively spread through droplets of water coughed out by the patient. As the pustules spread to cover the entire surface of the body and began to form a crust, victims were left bedridden and unable to move due to agonising pain. While theoretically this limited exposure to the patient, visitors could act as secondary vectors of the disease to the outside world.

Patients continued to be infectious until the last pustule scab had fallen off, however, even then the disease could be spread via dead skin if inhaled by a susceptible person. Smallpox could last outside the human body in scabs left in bedding and clothing for a number of weeks, providing a secondary route of infection in a community long after initial victims had either died or recovered from the disease.\textsuperscript{54} This was particularly serious for Native American nations where custom dictated that friends and family visited the sick, thereby allowing smallpox to quickly spread through a community and spill into

\textsuperscript{52} Michael N. McConnell, \textit{A Country Between: The Upper Ohio Valley and Its Peoples, 1724-1774} (Lincoln: University of Nebraska Press, 1992), p. 36.
\textsuperscript{53} Moore et al., ‘Smallpox’, p. 427.
\textsuperscript{54} Moore et al., ‘Smallpox’, p. 427; Fenn, \textit{Pox Americana}, p. 21.
neighbouring nations.\textsuperscript{55} In contrast, amongst the colonies the mere hint of a smallpox outbreak could empty a town of its inhabitants in a matter of days.

Upon its intermittent arrival in the American colonies, smallpox elicited panic and terror. Families fled the cities, trying to outrun the deadly contagion before it could take hold.\textsuperscript{56} With a high-rate of susceptibility amongst American-born colonists, eighteenth-century communities feared smallpox like no other disease, describing it as:

\begin{quote}
The most terrible of all the ministers of death […] tormenting with constant fears all whom it had not yet stricken, leaving on those whose lives it spared the hideous traces of its power, turning the babe into a changeling at which the mother shuddered, and making the eyes and cheeks of the betrothed maiden objects of horror to the lover.\textsuperscript{57}
\end{quote}

Thirty per cent of those who caught smallpox during the eighteenth century died from the disease.\textsuperscript{58} The pustules that covered the body also spread internally along the respiratory tract and major organs, causing the victim to emit a foul odour.\textsuperscript{59} In fatal cases of the disease, patients appeared to rot to death inside-out within a few days after initial symptoms appeared.\textsuperscript{60} Other victims died from any number of reasons extraneous to the smallpox infection itself. While multiple-organ failure and toxin build-up in the bloodstream as a result of the disease was fatal, death also

\begin{footnotesize}
60 Hopkins, Princes and Peasants, p. 4.
\end{footnotesize}
frequently resulted from complications arising from bacterial infections or pneumonia, which could overload an already compromised immune system.\textsuperscript{61}

Those who survived an attack of smallpox received lifelong immunity, yet the experience marked a victim physically and emotionally for the rest of his or her life. In conjunction with the characteristic pockmarks – permanent scars signifying a bout with smallpox – many victims were also left with limb deformities or blindness.\textsuperscript{62} During the eighteenth century smallpox was responsible for nearly one third of blindness in Europe.\textsuperscript{63} In light of this it is unsurprising that no other disease in the eighteenth-century generated as much fear amongst people as smallpox: it was not only excruciating and killed indiscriminately, but it also left behind lifelong scars of its presence.

In the years prior to the Seven Years’ War, smallpox outbreaks were highly seasonal and best transmitted in cool, dry environments such as winter and spring.\textsuperscript{64} Yet with enough susceptible hosts in a concentrated area, smallpox could circulate throughout a region year-round. Unfortunately for the inhabitants of eastern North America, the eruption of the Seven Years’ War provided these exact conditions. The introduction of thousands of English, French and provincial soldiers to the region, and their interactions with hundreds of Native Americans, provided the perfect circumstances for the introduction and transmission of smallpox. Centuries-old trade routes became highways for armies as smallpox was passed from fort to fort between the American colonies and New France. The increased number of susceptible bodies moving around the theatres of war meant that smallpox could travel from

\textsuperscript{61} Moore et al, ‘Smallpox’, pp. 426, 427.
\textsuperscript{62} Ibid., p. 427.
Halifax, across to the Western shore of Lake Michigan, in a matter of weeks as a direct result of the war.\textsuperscript{65}

\textbf{Overview of the Seven Years’ War}

As a prelude to the war, the intense confrontation between the Europeans and their Native American allies at Pickawillany had played out against a backdrop of smallpox outbreaks. As the conflict spread to engulf the Great Lakes and Eastern seaboard with the official commencement of the war in 1753, smallpox outbreaks began to multiply as the war developed. The unhealthy conditions propagated by the war played a fundamental role in the spread of smallpox across the Great Lakes and Eastern seaboard during the Seven Years’ War.

As a result of their success at Pickawillany, the Governor-General of New France, Marquis Duquesne, attempted to reinforce the French advantage in the Ohio Valley by constructing several forts along the shore of Lake Erie in 1753.\textsuperscript{66} The determination of the French to assert their claim over the valley successfully disrupted English plans for the region, increasing tensions between the two colonial powers. As the conflict escalated, North America experienced an influx of troops and Native Americans to the region on an enormous scale.

The French appropriation of the Virginian fort at the forks of the Ohio, and their subsequent construction of Fort Duquesne in 1754, forced the English into action, starting


\textsuperscript{66} Jennings, \textit{Empire of Fortune: Crowns, Colonies, and Tribes in the Seven Years War in America}, pp. 51-53.
with the recruitment of their own army from the colonies.\textsuperscript{67} Despite the overwhelming presence of the French and their Native American allies in the valley, English representatives in the colonies refused to recognise French claims to the region. Instead, they launched their first campaign against the French, led by a young, highly ambitious lieutenant colonel by the name of George Washington.\textsuperscript{68} In a disappointing start to the war for the English, Washington’s campaign was an overwhelming disaster for the English. What had begun as essentially a reconnaissance mission had ended with an overwhelming French attack on Washington’s small force, following a bungled negotiation attempt that had resulted in the death of the French commander Jumonville.\textsuperscript{69} The defeat of Washington’s small force was an embarrassing start to the war for the English.

During the first few years of the war, the French irrefutably dominated the campaigns. An established chain of forts, from Quebec to Fort Duquesne at the forks of the Ohio River, and the ferocity of Native American and French raiding parties that harried the smaller forts and settles around the Ohio Valley, gave the French a major advantage that left the British on the back foot for the first half of the war.

In 1755 the first troop reinforcements of the war arrived from England and the colonies in New York, and from France in Quebec.\textsuperscript{70} Although the burgeoning population of America was almost twenty times that of New France, the Anglo-American force was hampered by political infighting in both England and America.\textsuperscript{71} Power struggles between English politicians in London undermined the authority of the English military leaders in America, while colonial assemblies were reluctant to supply troops or money without

\textsuperscript{68} Jennings, \textit{Empire of Fortune: Crowns, Colonies, and Tribes in the Seven Years War in America}, pp. 65-66.
\textsuperscript{69} Titus, \textit{The Old Dominion at War}, pp. 52-53. For an in depth account of the campaign, see: Anderson, \textit{Crucible of War}, pp. 50-65.
\textsuperscript{70} Steele, \textit{Warpaths}, p. 188.
extensive compensation from the English government. However by 1758, the British had amassed almost forty-four thousand men; the single largest build-up of English and colonial forces ever seen in North America. In contrast, as French reinforcements from Europe declined from 1756, they increasingly relied upon their Native American allies for men. By the time the French and Native American alliance disintegrated in 1758, the French were left with only around sixteen thousand troops, a force made up of every able-bodied man and boy, trained or not, with which to defend New France.

Native Americans not only provided much needed warriors, but they also acted as highly superior scouts and guides for the French forces, providing a serious advantage over the English in often unfamiliar territory. As the English at times struggled to entice colonial men into the army, Native Americans were often more than willing to join the French in order to remove the English from the Ohio Valley and Great Lakes in general. This shared motivation, together with the gifts and supplies that they received in return for their support, drew hundreds of Native Americans from the far west to Fort Duquesne and Montreal to join the French, a feat unparalleled American history. Their knowledge and terrifying presence in battle provided the French with a tactical and psychological edge over the English. Accordingly, over the first few years of the war, the French drove home their advantage and heavily supplemented their armies with hundreds of Native Americans.

In 1755, English campaigns against Fort Niagara and Fort Frontenac stalled due to sickness and low morale during the summer, and attacks against Fort Duquesne in the Ohio Valley and Fort Frederic in the Champlain Valley were driven back by overwhelming French

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72 Anderson, Crucible of War, pp. 77-85.
73 Steele, Warpaths, p. 215.
74 Anderson, A People’s Army, p. 142.
75 Anderson, Crucible of War, p. 236.
77 In July 1757, French forces were supplemented with 820 Native Americans from around Montreal and 1799 from the ‘Far West’; 28 Jul. 1757, Bougainville, Adventure in the Wilderness, pp. 150-51.
forces in both instances. By the end of the year, when troops retired to the cities for the winter, the English could claim only one victory from four major campaigns; they had successfully defeated the French in June at Fort Beausejour in Nova Scotia, expelling hostile Canadian settlers and Native Americans from the immediate region.

The French continued to be successful in their campaigning in 1756, during which they attacked and destroyed the English-held Fort Ontario and Fort Oswego on the shores of Lake Ontario in August. This was a particularly disheartening defeat for the British. Not only did it reinforce the failures of the previous year, but it also greatly hampered their ability to pose a credible threat to the chain of French forts stretching from Montreal to Fort Duquesne. As an added blow, the string of French victories consolidated the alliance between the French and many western Indian nations. As English hopes of taking Fort Duquesne and the Ohio Valley faded in 1756, campaigning increasingly focussed on the eastern theatre of war, taking the majority of Anglo-American troops with it. Those soldiers that remained in the west were kept busy during the summer by the construction of forts throughout the Susquehanna region, as protection against Indian and French raids from Fort Duquesne.

Campaigns continued to focus on the eastern theatre of war into 1757, culminating in one of the defining moments of the conflict; the battle of Fort William Henry in August. The year began with mixed success for the English. In March, the garrison of Fort William Henry successfully fought off an attack from the French and Native Americans. Forced to retreat, the French and Native American army returned to Montreal to regroup for a second attempt three months later. In the meantime, smaller raiding parties of Native Americans continued

79 Anderson, Crucible of War, pp. 113, 114.
80 Steele, Warpaths, p. 199.
81 Titus, The Old Dominion at War, p. 73.
82 Anderson, Crucible of War, pp. 158, 162.
83 Steele, Warpaths, pp. 201, 202.
to raid English supply lines and outlying forts throughout April and June, leaving the English reeling from the attacks and subsequent food shortages and disease outbreaks.\textsuperscript{84} By late July, the French had returned to the Champlain Valley accompanied by almost 1800 Native Americans from Acadia to Lake Michigan (the largest Native American turnout of the war), in addition to five thousand French and Canadian soldiers.\textsuperscript{85}

As the English garrison at Fort William Henry settled in for a difficult siege complicated by smallpox, in Nova Scotia another English force was facing similarly overwhelming circumstances. In early August a campaign against the strategically important Louisbourg on Cape Breton Island in the Gulf of St. Lawrence was abandoned by the English.\textsuperscript{86} The substantial French presence in the city forced the army and navy headed by Lord Loudoun, the Commander-in-Chief of the English forces, to retreat back to New York. By the time they reached New York, the garrison of Fort William Henry in the Champlain Valley was suffering a brutal defeat at the hands of the French.

The attack on Fort William Henry was a particularly significant moment in the Seven Years’ War. For the English it signalled yet another serious blow to the morale of the troops and the fading hope that they might yet win the war. For the French, their victory appeared to signal their impending success in crushing the English and finally driving them out of New France and the Ohio Valley once and for all. The reality of the aftermath of the conflict, however, was very different.

Following the surrender of the fort to the French in early August, Native American warriors had ignored French orders and attacked the departing English regiments in an

\textsuperscript{84} Anderson, \textit{Crucible of War}, p. 187.
\textsuperscript{86} Anderson, \textit{Crucible of War}, p. 208.
attempt to claim captives and plunder as evidence of their success in battle.\textsuperscript{87} The subsequent violence had severe repercussions on both sides, changing the face of the war for the final three years. The violation of the terms of capitulation both reinvigorated colonial support for the war and reinforced a distrust of Native Americans that would last for decades.\textsuperscript{88} In addition, the failure of the French to consult with the Native Americans regarding the surrender of the English, and the smallpox that many warriors contracted during the campaign made many nations unwilling to return to fight alongside the French ever again.\textsuperscript{89} The attack on Fort William Henry marked the beginning of the decline in Native American support and the end to French dominance in the Great Lakes region.

By 1758 the tides of war had changed significantly. The seemingly unstoppable French advance was quickly grinding to halt, and both the French and English struggled with the heavy toll that disease and limited supplies had taken on their soldiers. French forces suffered a serious blow in October when thirteen Native American nations in the west signed the Treaty of Easton, ending their alliance with the French in favour of the English.\textsuperscript{90} With the loss of Native American support and declining reinforcements and supplies from France, the French were dramatically outnumbered.\textsuperscript{91} Thus it was with renewed vigour that the English attacked the French simultaneously in both the eastern and western theatres of war in 1758. By the end of the year the English had successfully boxed the French in at Montreal and Quebec by the end of the year. As the balance of power shifted towards the English, the last few years of the war became much more a story of the expansion of English territory, as the French made their last stand bereft of the support of the western Native American nations.

\textsuperscript{88} Anderson, \textit{Crucible of War}, pp. 199-201.
\textsuperscript{89} Steele, \textit{Betrayals}, pp. 147, 184-85.
\textsuperscript{90} Anderson, \textit{Crucible of War}, p. 274.
\textsuperscript{91} 12 Apr. 1758, Bougainville, \textit{Adventure in the Wilderness}, p. 201; Anderson, \textit{Crucible of War}, p. 200.
Map 2

New France and the British Mainland Colonies in the Seven Years' War, 1754-1763

Major Campaigns of the Seven Years' War 1758-1760

- French Forces
- English Forces
While the French managed to hold off an English attack on Ticonderoga at Lake Champlain in July, they were less successful against other attacks. That same month the English successfully claimed Louisbourg, significantly hampering the passage of French ships to Quebec. Fort Frontenac also fell to the English that year, further disrupting French communications between the western forts in the Ohio Valley and Montreal. Perhaps the most significant victory for the English in 1758 however, was the capture of Fort Duquesne following its abandonment by the French in November. Four years after they were first defeated at that very spot, the English had finally laid claim to the forks of the Ohio River.

Encouraged by their breakthroughs the year before, the English continued to drive their enemy back into New France. In July 1759 they captured Fort Niagara and established their own forts on Lake Champlain in the wake of the French withdrawal to Montreal and Quebec. By September, following the first formal European-style battle of the war on the Plains of Abraham and the deaths of both the French and English military commanders Montcalm and Wolfe, the English had taken Quebec forcing the French to evacuate to Montreal and nearby forts. The fall of Quebec, on top of the earlier victories of the English against the western French forts, cut all supply and communication lines to Montreal. With no access to reinforcements from France or hope of help from Native American groups, the English had all but defeated the French army in North America.

The year of 1760 signalled the last stand of the French as they attempted to retake Quebec in late April. With both sides suffering from severe malnutrition due to crop failures, the two forces faced off a final time on the Plains of Abraham, each side praying that the next

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93 Steele, *Warpaths*, p. 211.
94 Ibid., p. 213.
96 Ibid., pp. 333, 340, 342.
ships to sail into the Quebec harbour with reinforcements and supplies would be theirs.\textsuperscript{98} Ultimately, the first ships to arrive at Quebec were English, and what was left of the French army was forced to once more retreat to Montreal and begin preparations for the oncoming English assault.\textsuperscript{99}

The attack, when it finally came in August, was a three pronged affair. English troops converged on Montreal by the three main routes into New France; thirty-two armed ships arrived from Quebec, 3500 troops from the Champlain Valley, and an additional 11000 men had made their perilous way up the St. Lawrence River via Lake Ontario.\textsuperscript{100} Severely outnumbered and suffering from malnutrition, the French had managed to hold off defeat until all three forces had finally closed in around the city. On the 7\textsuperscript{th} of September 1760, just over eight years after the French-Indian attack at Pickawillany, the French Commander-in-Chief Vaudreuil capitulated to the English.\textsuperscript{101}

Although the Seven Years" War continued to be fought in Europe, in North America the war had drawn to a close. Despite the end of hostilities with France, the English faced yet another conflict against a familiar enemy. Following the end of the Seven Years" War, the failure of the English to establish more trading posts and withdraw their troops form the west, as promised to Native American nations at the Treaty of Easton in 1758, ignited yet another war.\textsuperscript{102} In 1763 Native American frustration with colonial settlement of the Ohio Valley and the failure of the English to fulfil the terms of the Treaty of Easton erupted in a widespread attack against forts in the area.\textsuperscript{103} Commonly termed “Pontiac”s Rebellion”, the conflict was more accurately a cooperative attack by a large number of Native American nations against

\textsuperscript{98} Anderson, \textit{Crucible of War}, pp. 392, 393.
\textsuperscript{99} Ibid., p. 395.
\textsuperscript{100} Ibid., pp. 397, 400, 401.
\textsuperscript{101} Jennings, \textit{Empire of Fortune}, p. 425.
\textsuperscript{102} Anderson, \textit{The War That Made America}, p. 233.
\textsuperscript{103} Anderson, \textit{Crucible of War}, pp. 538-40.
British and American soldiers and settlers in an attempt to drive them out of the Great Lakes region.

Native Americans successfully defeated a string of English forts in the west in response to the increasing presence of settlers and land surveyors in their territories. Despite initial victories by the Native Americans, the absence of the French in the region limited their capacity to resupply themselves with guns and weapons through trade. Disease spread by the conflict, pressure from the Iroquois in the east, and negotiations with the English finally brought an end to the war by the end of 1764. The British managed to negotiate their way into claiming and possessing French forts and land, and Native Americans begrudgingly accepted British sovereignty over their lands and people. After thirteen years of warfare, the English were finally able to assert their control over the Great Lakes region and eastern North America.

**Conditions of the War**

Those thirteen years took a heavy toll on the inhabitants of the Great Lakes and eastern North America. Battles were not the only major cause of death; disease haunted the movements of the armies and civilians as they moved around the theatres of war. The conditions of camps and armies left much to be desired in the way of hygiene, allowing contagious diseases to develop and fester as they were passed from soldier to soldier. The heightened interaction between armies and civilians also helped to spread diseases, which killed men, women and children regardless of their loyalties. The Seven Years’ War

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104 Fort Pitt was a key example; traders bought land surrounding the fort and sold it to settlers following the war regardless of the fact that it was Delaware and Shawnee territory. Anderson, *The War that Made America*, pp. 233-235.

105 Jennings, *Empire of Fortune*, p. 450.

resulted in an exchange of blood, sweat and tears between thousands of Europeans, Americans and Native Americans on an unprecedented scale.

Famine and malnutrition was a serious problem for both the armies and civilians. Crop harvests failed year after year for the French in Canada during the war, leaving their people severely malnourished.\(^{107}\) Native Americans busy fighting against the English relied on their French allies to provide food and supplies to the warriors and their families, who frequently accompanied the men to Montreal and Quebec during campaign season, adding to the limited resources of the French.\(^{108}\) Those who remained in the west also battled famine when warriors failed to return from campaigns and raids in time for harvests or hunting season.\(^{109}\) Even when harvest did eventuate for the French, there was often simply not enough food to supply the huge numbers of soldiers and Native Americans who participated in the war.

The English also suffered the effects of malnutrition over the course of the war. In 1760 the French attack on Quebec had almost succeeded due to the debilitating consequences of scurvy on the English defenders.\(^{110}\) A force of seven thousand men had stayed on in Quebec following the defeat of the French in 1759, yet by April the next year, one thousand men were dead and another two thousand were unfit for duty due to the effects of scurvy over the winter.\(^{111}\) The French forces were equally reduced by starvation during the attack, and


sought to retake Quebec, predominately to reopen supply routes from France.\textsuperscript{112}

Supply lines were essential for the survival of a garrison in North America. The isolated nature of many forts throughout the Great Lakes and valleys meant that garrisons could not expose themselves to attack by having extensive fields and animals to feed the fort. As a result, a disruption to supply lines could have serious repercussions for a fort’s survival. In 1756, the English Fort Oswego had its supply lines frozen shut over winter, leaving the garrison severely malnourished and vulnerable when the French attacked the fort in August.\textsuperscript{113} With starvation never too far away, malnutrition weakened the inhabitants of the Great Lakes, further increasing their susceptibility to smallpox.\textsuperscript{114}

Due to their poor health, soldiers were often blamed for transmitting disease, circulating distempers from fort to city and back again throughout the year as they departed for campaigns and returned for winter quarters.\textsuperscript{115} And for good reason; army camps were a hotbed of disease for both French and English troops, allowing sicknesses to circulate year-round. Military leaders accepted the fact that diseases such as smallpox, yellow fever, and dysentery would claim the lives of many troops before they even saw the battlefield – so much so that casualties as a result of smallpox and other diseases were factored into North American military strategies. On contemplating the need for reinforcements in 1759 to defend Canada, the French government noted that by sending eight thousand troops, „on arriving in Quebec, they [would] probably be reduced, by death and disease,” to six thousand.\textsuperscript{116} Today, such a statement would represent an unacceptable loss of lives, however, during the Seven Years’ War disease was an accepted fact of war.

\textsuperscript{112} Anderson, \textit{Crucible of War}, pp. 392-93.
\textsuperscript{114} Ashburn, \textit{The Ranks of Death}, p. 61.
\textsuperscript{115} Gale, ‘Relating to the Practice of Inoculation for the Small Pox’, p. 195.
\textsuperscript{116} Memoir on Canada, Jan. 1759, \textit{NYCD}, 10:933.
The state of army camps simply reinforced the normalisation of disease during the war. Thousands of soldiers lived on top of one another; cramped tents pitched side by side, slept up to five men at a time and offered little protection to the elements. The mere stench of the camps was enough to indicate the state of the men’s health within. Soldiers camped at Crown Point Fort in 1760 routinely went on walks in order to get “clear of the smell of the camp” which was so bad that it appeared “almost infectious”, due to the sheer “numbers of sick and dead [who were] always in camp.” When the very air they breathed day after day hung heavy with the stench of death and disease, it is of little wonder that disease became an accepted part of war.

During the Seven Years’ war in Europe, armies contended with waves of epidemics such as typhus throughout their camps and cities, claiming the lives of thousands and adding to the misery of the war. Typhoid, dysentery and other respiratory and intestinal diseases also affected the Europeans and Native Americans in North America throughout the war, as in Europe. Yet the presence of highly susceptible American and Canadian-born soldiers and Native Americans meant that “Old World” diseases such as smallpox, hit the armies and civilian populations particularly hard.

The inexperience of colonial troops and their isolation from the endemic diseases of Britain and France left them vulnerable to a vast range of illnesses against which their French and English native-born counterparts had often already obtained immunity. Consequently

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118 Samuel Jenks, *Diary of Captain Samuel Jenks, During the French and Indian War, 1760* (Cambridge: John Wilson and Son University Press, 1890), pp. 31, 35.
North American-born soldiers were often viewed by their European commanders as greatly inferior soldiers when compared to those in the regular army; not only were provincial soldiers less disciplined and inexperienced, but they also appeared to fall sick at a greater rate. Anglo-American militia were characterised as being inexperienced in the conditions of war and so ‘sickly, particularly the new England ones, that they bury 40 of a day, chiefly owing to their dirtiness which gives them fevers and fluxes.”

Unlike regular European troops, provincial recruits were not professional soldiers. They were predominately volunteers; young sons of settlers, unaccustomed to sleeping on the ground and marching for miles in unforgiving terrain. Reflecting their inexperience, the conditions of their camps were particularly sickly. While regular troops produced highly organised and ordered camps, provincial camps were much more haphazard. Men quite literally lived in their own filth; latrines (when they were used at all) and drinking wells were dug close by one another in the middle of camps without regard for proper sanitation, and rubbish littered the ground around the mass of unordered tents. That colonial militia should fall sick in greater rates is thus unsurprising considering their living conditions during the war.

Even the provincial soldiers themselves recognised their greater vulnerability, noting that provincials died in greater numbers than the British-born soldiers. Yet while provincial troops were more susceptible to diseases such as smallpox, they were also present in much larger numbers than regular troops, particularly in the final years of the war. By 1758 the number of provincial soldiers in the British army equalled the entire population of New

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123 Jennings, Empire of Fortune, p. 208.
124 See Figure 2 in Anderson, A People's Army, p. 91.
125 Jennings, Empire of Fortune, p. 207; Anderson, A People's Army, pp. 90-98.
126 Jenks, Diary of Captain Samuel Jenks, pp. 8, 10, 33, 32; Charters, 'Disease, Wilderness Warfare', p. 20.
France, providing a massive number of susceptible bodies amongst which smallpox could circulate.  

To make matters worse, medical care was insufficient or completely lacking among the armies, and hospitals – if they existed – were often too small or ill-equipped to cope with disease outbreaks. In some cases, the minor medical facilities that did exist only helped to further spread epidemic diseases like smallpox from overcrowded sick rooms. The unhygienic conditions of these camps allowed sicknesses such as dysentery, plague, influenza, measles, yellow fever and worst of all smallpox, to fester among the troops.

Native Americans were equally susceptible to diseases introduced from Europe as colonial men and women. Although smallpox had been the bane of Native Americans since the arrival of the first explorers and colonisers, until the war they had not experienced them in the concentrations that the presence of thousands of new bodies around the Great Lakes and Eastern North America provided. The relative isolation of Native American groups in the pays d’en haut had also limited their experiences with diseases that had developed in association with cities and urban living. However, the Seven Years’ War rapidly increased their exposure to these contagions. Interactions with the French and English, as they travelled

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129 Richard Brocklesby, Oeconomical and Medical Observations, in Two Parts: From the Year 1758 to the Year 1763, Inclusive: Tending to the Improvement of Military Hospitals, and to the Cure of Camp Diseases, Incident to Soldiers: To Which Is Subjoined, an Appendix, Containing a Curious Account of the Climate and Diseases in Africa, Upon the Great River Senegal, and Farther up Than the Island of Senegal: In a Letter Form Mr. Boone, Practitioner in Physic to That Garrison for Three Years, to Dr. Brocklesby (London: Printed for T. Becket and P.A. De Hondt, at Tully's Head, in the Strand, 1764), p. 91.
130 Francis Jennings, The Invasion of America: Indians, Colonialism and the Cant of Conquest (Chapel Hill: Published for the Institute of Early American History and Culture by the University of North Carolina Press, 1975), p. 24; Fenn, Pox Americana, p. 22.
131 Ramenofsky, Wilbur and Stone, ‘Native American Disease History’, p. 243.
from one side of the continent to the other along the old trade routes, brought disease to warriors on campaign and to their families at home.

The arrival of thousands of European and provincial soldiers, mixing with the local populations of Native Americans and colonists, suddenly put people into contact on a continental and global scale during the Seven Years’ War. The importation of troops and supplies from England and France increased the passage of smallpox from the Old World to the New, offering more opportunities for the disease to take hold in the major seaport cities. As French and English armies and Native Americans travelled along the Ohio Valley, up the Hudson River, through the Champlain corridor or along the St. Lawrence River, moving between New France and America, they were accompanied by the menacing figure of smallpox. Over the course of the war, as conditions worsened and the effects of food shortages set in, smallpox outbreaks only intensified.\(^\text{132}\) Thus, with smallpox wreaking havoc around the world during the eighteenth century, these conditions set the stage for it to flourish in North America along the Eastern Seaboard and throughout the Great Lakes.

\(^{132}\) Ashburn, *The Ranks of Death*, p. 61.
CHAPTER TWO

The Transmission of Smallpox: Mapping the Outbreaks.

Due to the conditions of the Seven Years’ War, disease, particularly smallpox, became embedded within daily life around the Great Lakes and eastern North America. Yet discussion of smallpox during the war has been frequently overlooked by modern historians, and no attempt has been made to untangle the story of where and when smallpox outbreaks occurred over the course of the war.

In an effort to rectify this failing, we will now map the progression of smallpox outbreaks, year-by-year from 1752 to 1765, whilst taking into account the general movements of the war. As smallpox was an accepted part of the war for the inhabitants of the Great Lakes and eastern North America, it is probable that the existing evidence of outbreaks accounts for only a portion of the actual number of smallpox episodes that occurred. With this in mind it is important to note that, while still revealing, the results will represent only a conservative map of the smallpox outbreaks that took place.

Prelude to the war, 1752-1755

As with the Seven Years’ War, the story of smallpox in the Great Lakes region and Eastern North America begins with Pickawillany during the first half of 1752. The Miami town in the Ohio Valley was a busy centre for English trade and Native American attempts at inter-tribal diplomacy in the years leading up to the war.\(^\text{133}\) The establishment of a major English trading post in the town put the Miami nation at odds with their French allies, making

\(^{133}\) The prominent Pennsylvania trader George Croghan set up a trading post at Pickawillany in 1749. Anderson, Crucible of War, p. 25.
the town a hotbed of activity as neighbouring nations attempted to convince the Miami leader La Demoiselle to cease trading with the English.

Smallpox was also on the move in the lead-up to the attack on Pickawillany. Throughout April it circulated through the Ohio Valley and among the Miami, the Potawatomi and the Ottawa and Hurons around Detroit.\textsuperscript{134} The trading centred around Pickawillany, the Ohio Valley, and the \textit{pays d’en haut} during this period, provided the close contact between English, French and Native American groups required to spread smallpox from the Ohio Valley to Detroit and the St Joseph River, causing smallpox to „ravage“ the area.\textsuperscript{135}

As the west battled smallpox, the east coast cities of Boston and New York were also experiencing severe outbreaks of the disease. In December 1751 smallpox was carried to the east coast by a ship from England. Over the course of the crew’s recovery, smallpox was communicated to the city of Boston in March 1752, where it persisted until July.\textsuperscript{136} By April the disease had also made its way to New York, the outbreak there lasting at least until August.\textsuperscript{137} As major seaports on the eastern coast, outbreaks in these cities would only become more common during the war despite the quarantine restrictions that city authorities attempted to implement. As a central collection point for British and colonial troops, New York became a constant entry and dissemination point for smallpox introduced from Britain or brought back from the eastern forts during the war.\textsuperscript{138}

\textsuperscript{134} Trent, \textit{Journal of Captain William Trent from Logstown to Pickawillany}, p. 33; M. de Longueuil to M. de Rouille, 21 April 1752, \textit{NYCD}, 10:245-51.
\textsuperscript{135} M. de Longueuil to M. de Rouille, 21 April 1752, \textit{NYCD}, 10:246.
\textsuperscript{138} Shryock, \textit{Medicine and Society in America}, p. 86.
The official start to the war began quietly for the region in terms of smallpox and other diseases. As George Washington made his ill-fated voyage up the Ohio Valley, which resulted not only in a French victory but also in Washington unwittingly accepting responsibility on behalf of the English for the outbreak of fighting, reports of smallpox or other disease outbreaks in the region were conspicuously absent.\textsuperscript{139}

In fact a single episode of an unnamed „contagious distemper,” which occurred in Philadelphia in December 1754, constituted the only recorded disruption to the health of the local inhabitants of the Great Lakes and eastern North America in over two years.\textsuperscript{140} However, coinciding with the arrival of thousands of people and an increase in activity around the region as a result of the war, the number of smallpox outbreaks dramatically intensified from 1755 onwards.

It is possible that the absence of smallpox reports is a result of fewer observers writing about the conflict and region at this time. Major troop reinforcements for both the French and English were not introduced to the region until 1755 and 1756. With them came some of the major commentators on the war, Louis-Antoine Bougainville, Pierre Pouchot, and Henry Bouquet, not to mention the provincial soldiers who were enlisted throughout the conflict, and kept their own records of the war. With fewer observers present during the first years of the war, it is possible that there were in fact more outbreaks that were simply not recorded. Alternatively, it is just as possible there were genuinely no smallpox outbreaks during these years, and that 1753 and 1754 were simply the calm before the storm of war and disease that would break in 1755.

\textsuperscript{139} Schumann and Schweizer, \textit{The Seven Years War: A Transatlantic History}, pp. 18-19.
1755

After an absence of two years, in 1755 smallpox reappeared around the Great Lakes and Eastern North America. As the war began to intensify, the scope of the conflict spread east from the Ohio Valley, settling around three key areas that would remain focal points of the war for both the British and French. Lake Ontario, the Champlain Valley stretching from Montreal to Lake George and Nova Scotia in the Gulf of St. Lawrence in the east, represented the only practical access points into New France and the French strongholds of Quebec and Montreal. As such, these were the areas that witnessed the most action during the war.

By simultaneously attacking these three areas, in conjunction with an attack on Fort Duquesne in the Ohio Valley, the English hoped to isolate French forces, effectively cutting them off from supplies and reinforcements from France. However, despite English success in Nova Scotia, other campaigns in these areas during 1755 ended unfavourably for the Anglo-American troops after pre-emptive strikes by the French in the Ohio and Champlain Valleys. 141 Over the course of the war these four regions were centres of activity, with thousands of French, English troops and Native American groups moving through them each year. As a result of this concentration of activity, smallpox became heavily entrenched amongst the surrounding forts and towns.

During 1755, these key areas were affected by several unidentified sicknesses for the duration of the English campaigns. Fort Oswego on Lake Ontario, the English camp at Lake George and the settlements surrounding Albany were all hit by disease over the summer and

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141 Steele, Warpaths, pp. 189-90.
autumn months, adding to the misery of the troops already plagued by battle and famine.\textsuperscript{142}

The garrison at Fort Oswego was so depleted by disease and desertion that the original force of 3100 men had dwindled to 2300 by September, only two months after the commencement of the campaign, and to 1900 by August the following year.\textsuperscript{143} While it is not possible to determine the exact nature of these disease outbreaks, it appears that they persisted over a period of months at each location. In consideration of the presence of almost six thousand Anglo-American troops and ten thousand French and Native Americans in the area, it is unsurprising that the first eastern campaigns of the war should be accompanied by a variety of disease outbreaks.\textsuperscript{144}

It is highly probable that these unidentified episodes of disease were actually smallpox; between August and October, reports place smallpox in New York, Montreal and amongst the Seneca around Fort Niagara.\textsuperscript{145} As these areas were some of the main collection points for Anglo-American, French and Native American forces, it is conceivable that smallpox was carried further inland by these groups.\textsuperscript{146} However, as is the case in instances of other unnamed episodes of disease throughout the war, the ambiguity of sources regarding these sicknesses means that we may never know the true nature of the outbreaks. What we do


\textsuperscript{144} Steele, \textit{Warpaths}, pp. 191.


\textsuperscript{146} Historian John Duffy certainly asserts that this was the case, suggesting that smallpox was transmitted from Canada down to New York during 1755. Duffy, \textit{Epidemics in Colonial America}, p. 86.
know for certain is that smallpox was firmly in place at Montreal, New York and around Fort Niagara; sites that were becoming increasingly central to the escalating war.

1756

Compared to the year before, smallpox outbreaks exploded around the Great Lakes and throughout eastern North America in 1756. The disease was reported in both eastern and western forts and towns, despite the fact that for much of the year campaigns were focused heavily in the east. The commencement of outright warfare led to a massive increase in the mobility of groups around the region. The expulsion of hundreds of Acadians at the end of 1755 and beginning of 1756, the arrival of French and British reinforcements, the construction of British forts in the west, and an increase in French and Indian raids, saw thousands of people on the move throughout the year. As activity around the cities and forts increased so too did the number of smallpox outbreaks.

French forts were hard hit by smallpox that raged “very much amongst the French and Indians” throughout the year. The French garrison at Fort Niagara was particularly plagued by the disease; having struck sometime in 1755, smallpox continued to ravage the garrison and local area until November 1756. Many other French forts were also hard hit by smallpox, and the disease was reported throughout the chain of forts from Montreal to Fort Duquesne. The proliferation of the disease within these forts was aided by the movement

of Native Americans who passed through them as they travelled between the eastern and western theatres of war.

In the east Acadian refugees, expelled by the English following their victory at Fort Beausejour in 1755, suffered from the disease early in the year and were blamed for carrying smallpox into the eastern cities.\textsuperscript{151} In October, the Pennsylvania Assembly blamed “about fifty Neutrals [Acadians] [who] have lately had the smallpox of which many died” for transmitting the disease to Philadelphia.\textsuperscript{152} By the start of 1756 smallpox had become so widely spread throughout the region that reports suggest many western Native American groups were unwilling or unable to travel east for French campaigns later in the year.\textsuperscript{153}

As smallpox “made great havock [sic] amongst the inhabitants of Canada”, the English also struggled with the effects of the disease.\textsuperscript{154} Borders between the two nations, already highly porous before the war, disappeared with the commencement of fighting. As Anglo-American, French and Native American groups crossed back and forth between New France and America throughout out the war, there was a very real exchange of blood, sweat and tears. Trade throughout the region also ignored any notional borders that remained following the outbreak of war. Dutch traders based in Albany were accused by the British of consistently engaging in illicit trade with the French during the war.\textsuperscript{155} In the west, French

\textsuperscript{151} M. de Vaudreuil to M. de Machault, Aug. 1756, Pennsylvania Archives, Series 2, 6:362; Abstract of despatches from Canada, Feb. 1756, NYCD, 10:408.


\textsuperscript{154} Robert Rogers, Journals of Major Robert Rogers: Containing an Account of the Several Excursions He Made under the Generals Who Commanded Upon the Continent of North America, During the Late War: From Which May Be Collected the Most Material Circumstances of Every Campaign Upon That Continent, from the Commencement to the Conclusion of the War (London: J. Millan, 1765), p. 22.

and Native American raids around Pennsylvania and Virginia extinguished any hope for settlers to survive out on the fringes of the state boundaries, resulting in an exodus of settlers from their homes in the backcountry to the safety of the cities and forts.\textsuperscript{156}

This constant flow of people ensured a steady transmission of smallpox around the region. An attempt by the English to court the Delaware nation in November was disrupted by the appearance of smallpox in the town and surrounding countryside, spread by the armies and French-Indian raids.\textsuperscript{157} In Philadelphia, Anglo-American troops who headed to the Ohio forts suffered from smallpox between June and December, as did soldiers building forts along the Susquehanna River.\textsuperscript{158} By the end of the year the main eastern troop quartering points of New York and Albany had smallpox, which led to severe housing shortages as locals refused to provide accommodation for sick soldiers.\textsuperscript{159}

In addition to smallpox, there were also several unidentified disease outbreaks reported around the region throughout the year. Montreal, as the centre for French campaigns into the Champlain Valley and Lake Ontario, had a constant flow of French, Canadians and Native Americans mixing and moving through the city, providing the perfect conditions for sicknesses like smallpox to flourish. However, in June the city was also host to an outbreak of influenza introduced by ship, which incapacitated 226 and killed at least one person.\textsuperscript{160}

\textsuperscript{156} Anderson, \textit{Crucible of War}, p. 162.  
\textsuperscript{160} 29 Jun. 1756, Bougainville, \textit{Adventure in the Wilderness}, p. 4; M. de Montcalm to Count d’Argenson, 12 Jun. 1756, \textit{NYCD}, 10:414.
In August, Fort Cumberland, Fort Oswego and Fort Beausejour were also hosts to disease outbreaks of an undetermined nature, as was Albany throughout the year. While the sickness at forts Beausejour and Cumberland remain a mystery, Fort Oswego and Albany appear to have been still struggling against the effects of famine and smallpox that had first struck the year before.

The poor health of the armies and civilians, and the ever increasing food shortages, together with the growing number of people on the move during 1756, allowed smallpox to continue to thrive throughout the region. The end of the year offered no relief for the smallpox stricken inhabitants of the Great Lakes and Eastern North America; outbreaks continued well into the next year, adding to the misery of the ongoing war.

1757

The effects of crop failures in Canada in 1756 continued to plague the French and their Canadian and Native American allies into 1757. Famine took a heavy toll on the French, making them more vulnerable to disease as „poor nourishment gave rise to much sickness“ such as smallpox. In addition, limited equipment also wreaked havoc on the health of the troops; many Canadian soldiers were without proper tents, which left them exposed to the icy conditions as winter gripped the continent. Food and supply deficiencies also placed pressure on the French and Native American alliance. Without enough food and supplies to give as gifts to their allied Indian nations, the French risked losing their support during a crucial period of the war.

162 Anderson, Crucible of War, p. 200.
163 17-28 Feb. 1757, Bougainville, Adventure in the Wilderness, pp. 88; 1-8 Jun. 1757, ibid., p. 112.
164 Abstract of Despatches from Canada, 15 Jan. 1757, NYCD, 10:520.
Despite the mounting pressure, the French continued their success in the eastern theatre against the British in 1757, including the defeat of Fort William Henry. More than any other year of the war, the conflict of 1757 centred heavily on the Champlain Valley as the French launched several campaigns against the English forts around Lake George. However, as the events at Fort William Henry unfolded in August, the extensive smallpox outbreaks of 1756 continued into 1757, spreading across the Great Lakes and Eastern seaboard from Lake Michigan to Halifax, and as far south as Charleston, South Carolina.

The English were particularly hard-hit by smallpox during the first half of the year. Smallpox appeared along the well-travelled supply routes from Philadelphia to Lancaster, New York to the Susquehanna region in the west, and Albany to the Champlain Valley in the east. Smallpox was also carried via the shipping routes between Boston and Halifax, where the disease appeared towards the end of the year. The persistent flow of British troops reinforcing the eastern forts also provided a constant introduction of vulnerable bodies prolonging the smallpox outbreak that lingered around Albany and spreading the disease to Fort Edward and Fort William Henry on Lake George.

Smallpox was also present amongst the inhabitants of Montreal in May, causing many Native Americans to refuse to join French campaigns during the first half of the year. In addition to smallpox, „some sort of plague“, introduced via reinforcements from France, claimed hundreds of lives around Quebec and Montreal, acting as further incentive for Native

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165 Anderson, Crucible of War, pp. 190-92.
168 Pouchot, Memoir Upon the Late War, 1:81-82.
Americans to avoid the French cities. As many of their men continued to be struck down by disease, the French undertook a major „recruitment drive“ amongst the western Native American nations. Their efforts did not go unrewarded; 1757 witnessed the largest number of Native Americans, mainly from the pays d’en haut, fighting alongside the French in the history of the war. During spring approximately two thousand Native Americans from a variety of nations collected in Montreal, and later Fort Carillon, to attack the British-held Fort William Henry. Following the French victory in the east, smallpox appeared amongst the Ottawa around Lake Huron and Fort Michilimackinac, and the Potawatomi in the pays d’en haut throughout August and into the winter.

Although campaigns focussed on the eastern theatre of war, the soldiers and civilians left defending the west in the Ohio and Susquehanna Valleys were fighting their own battles against French and Native American raiding parties amidst the ever-worsening famine and smallpox outbreaks that pervaded the area. Smallpox also remained entrenched in Philadelphia and New York, while the Iroquois struggled with effects of the disease picked up from their interactions with the English and other Native Americans in the region. Even Charlestown and greater Virginia did not escape the disease; in June up to five hundred provincial and regular soldiers were struck down by smallpox, preventing the troops from

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joining the British force that collected in Albany and Fort Edward against further French attacks.  

As with the year before, the movement of soldiers, ships and Native Americans produced a constant flow of potential victims and steadily worsening conditions throughout the western and eastern theatres of war, allowing smallpox to flourish across the vast landscape of the eastern half of North America during 1757.

1758

With the loss of its Native American allies, famine gripping Canada, and fading support from France, the French machinery of war in North America stalled in 1758. In response, the English once went on the attack along the four main channels into New France. Both the eastern and western theatres of war were flooded with Anglo-American troops, particularly provincial militia, reinvigorated by the possibility of victory after four years of disappointing campaigns.

In terms of smallpox outbreaks, 1758 continued the widespread trend set by the two previous years, with smallpox present across the continent from the very tip of Cape Breton Island in the east, to the pays d’en haut in the west. The western Native American nations of Ottawa and Potawatomi continued to suffer from the smallpox outbreaks that first occurred at the end of the previous year, well into 1758. Following the disastrous events at Fort William Henry in 1757, Native Americans blamed their former allies for sending smallpox

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Map 2
New France and the British Mainland Colonies in the Seven Years' War, 1754-1763

Smallpox Outbreaks for 1758

- Smallpox
- Unidentified Disease
amongst them. Native American nations accused the French of giving them “bad medicine” and refused to participate in any campaigns during 1758.\footnote{179} In response, the French unsuccessfully attempted to compensate nations for the lives lost to smallpox, and to convince them of the culpability of the British for their misery.\footnote{180}

The English forts in the west also continued to suffer from smallpox outbreaks carried on from the year before. The influx of men to the region for the attack against Fort Duquesne at the forks of the Ohio River increased the number of outbreaks throughout the valley.\footnote{181} From May to December, smallpox made its way through the English forts along the Forbes and Braddock Roads, taking such a toll that the British military commander Henry Bouquet attempted to keep outbreaks secret from the rest of the army and to limit interaction with forts known to be suffering from smallpox.\footnote{182} In hindsight such attempts were futile; the region was riddled with smallpox outbreaks spread by the hundreds of susceptible provincial troops and Native Americans disillusioned with their French allies that flooded the region. Short of completely cutting off infected forts, there was no way that smallpox could be contained.\footnote{183}

In the east, New York and Albany once again struck by smallpox, the outbreaks lasting for several months thanks to the thousands of troops passing through on their way to the eastern forts at Lake Ontario and Lake George.\footnote{184} The outbreak in Albany was so severe that provincial troops refused to go on duty in the region for fear of contracting the horrifying
Boston and Nova Scotia once again traded smallpox outbreaks via shipping, with smallpox present in Halifax for the entire first half of the year, and in Louisbourg during the successful British attack in June.  

Several unidentified sicknesses also prevailed around the Great Lakes and eastern North America during 1758. While some of the unidentified disease outbreaks reported in the Ohio Valley and Philadelphia overlapped with the presence of smallpox in the region, diseases reported in the Champlain Valley occurred in isolation from any smallpox outbreaks. At the beginning of the year a soldier stationed at Ticonderoga on Lake George, was diagnosed with „the pox“; a label at first glance suggestive of smallpox. However, the treatment provided – a „triple dose of mercury“ – indicates that this was in fact a case of syphilis, also known as the great pox, a common ailment contracted as a result of some of the women who often shadowed the army camps. Although a serious disease in the eighteenth century, as a sexually transmitted disease, syphilis did not pose the same level of danger amongst an army as the more infectious smallpox.

In conjunction with the surge in the number and success of British campaigns during 1758, smallpox, and disease in general, continued to maintain a tight grip on eastern North America and the Great Lakes for the duration of the year and well into 1759.

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187 M. de Doreil to M. de Moras, 28 Jul. 1758, NYCD, 10:746.
189 Anderson, A People’s Army, pp. 118-19; 1 Mar. 1758, Bougainville, Adventure in the Wilderness, p. 195.
1759

The British continued to dominate the war during 1759, signalling the decline of French influence in the Ohio Valley, the Great Lakes, the Champlain corridor and the Gulf of St. Lawrence. By the end of the year the British had gained control of both the east and western theatres of war by successfully boxing in the French at the top of Lake Ontario and Montreal.

Despite the fact that the majority of campaigns during 1759 focussed on the eastern forts, smallpox still persisted along the forts in the Ohio Valley. Fort Bedford, the Forbes Road, Fort Cumberland, Fort Frederick and Winchester formed the centre of the outbreaks from February to August, with Williamsburg, Philadelphia and New York affected later in the year.\(^\text{190}\)

Other disease outbreaks amongst both the eastern and western forts further compounded the misery of Anglo-American troops already preoccupied by smallpox and campaigns against the French.\(^\text{191}\) Poor conditions in the area of Pittsburgh, particularly Fort Ligonier where one sixth of the fighting force was ill, increased the rates of sickness amongst the troops. Limited rations, inclement weather and „bad water” made fighting off smallpox and other diseases almost impossible for the provincials garrisoned in the area.\(^\text{192}\) As the


\(^{191}\) Montcalm Journal, Oct. 1759, NYCD, 10:1037.

conditions continued to deteriorate and winter approached, many provincial soldiers stationed in the western forts deserted their posts.\textsuperscript{193}

The militia stationed in the east were also significantly affected by sickness, leading many in the east to also desert their camps.\textsuperscript{194} Provincial troops participating in Amherst’s campaign at Lake George and Crown Point in October were also struck down by an unknown disease at great rates.\textsuperscript{195} However, as with the sickness that broke out in Quebec following the British attack, none of the reports of sickness can be clearly attributed to smallpox.\textsuperscript{196} More likely they were a result of the cramped conditions and poor rations that came in association with British forces ten thousand men strong, including almost seven thousand provincial soldiers, as they prepared for their final standoff against the French at Montreal.\textsuperscript{197}

Although the end of the Seven Years’ War was in sight for the inhabitants of the Great Lakes and the Eastern seaboard, the same could not be said about the smallpox outbreaks that plagued the region.

1760

Following the British victory at Quebec the previous year, the British turned their sights to the last French stronghold of Montreal. However, by the beginning of 1760, both sides were suffering from a lack of supplies. British troops remaining in Quebec lost one thousand men to scurvy and other illnesses related to a lack of critical provisions, and another two thousand were too sick to take part in the defence of the city against the French attack in

\textsuperscript{195} Jeffery Amherst, \textit{The Journal of Jeffery Amherst}, pp. 176, 184; Gen. Amherst to Pitt, 22 Oct 1759, ibid., p. 197.
\textsuperscript{196} Rogers, \textit{Journals of Major Robert Rogers}, p. 151.
\textsuperscript{197} Anderson, \textit{Crucible of War}, p. 320.
April and May.\textsuperscript{198} The Six Nations were also hit by disease in February; however, it was smallpox that dominated the region throughout 1760.\textsuperscript{199}

As in 1759, Winchester in the Ohio Valley continued to suffer from smallpox, the region noted to have been „much infested with the smallpox which [had] become very fatal.”\textsuperscript{200} Smallpox also remained endemic in both Philadelphia and New York, with major outbreaks recorded in the first half of the year.\textsuperscript{201} However, it was the Champlain Valley that bore the main brunt of the smallpox outbreaks during 1760.

As the British forced the French to retreat to Montreal on the St. Lawrence river, smallpox made its way from fort to fort, shadowing the thousands of Anglo-American troops that made their way into New France.\textsuperscript{202} Between June and October many provincial troops were left unfit to continue the campaign up the Champlain Valley; smallpox had caused „1200 men of the provincials [to be] now returnd [sic] unfit for duty and a great many more [to be] taken sick every day.”\textsuperscript{203} The capitulation of Quebec, when it finally arrived, could not have come soon enough for British commanders faced with two-thirds of their colonial troops too sick for duty due to smallpox.\textsuperscript{204} The disease had taken a heavy toll on both armies over the course of the war.

\textsuperscript{203} Jenks, \textit{Diary of Captain Samuel Jenks}, p. 33.
\textsuperscript{204} Ibid.
Epilogue to the war: 1761 and 1762

The end of the Seven Years’ War in America did not bring relief from conflict or from smallpox to the inhabitants of the Great Lakes and eastern North America, yet, there was a decline in both for the most part. Following the end of the war, settlers quickly began to fill the gaps left by the removal of thousands of British troops redirected to the continuing war in Europe. The Susquehanna and Ohio Valleys and large areas of land around Niagara began filling with settlers and traders from the eastern colonies, much to the dismay of the Native American nations who already owned the land. Despite this flurry of activity in the west, reported smallpox outbreaks were limited to an episode in Boston in January 1761 and one outbreak amongst the Menominee from the western shore of Lake Michigan and several outbreaks in New York and Philadelphia in 1762.

Reported smallpox outbreaks declined around the Great Lakes during 1761 and 1762 and faded back once more to the cities of the eastern seaboard. Further inland however, it was replaced by a series of undefined disease outbreaks. During January 1761, the Mohawk around Albany were hit with an unidentified severe “epidemical distemper”, characterised by “fever and head and back pain”, which carried victims off within four or five days. Initially this description is reminiscent of the early stages of smallpox, yet it seems unlikely that after almost six years of constant smallpox outbreaks in the immediate area, that the local inhabitants would not be able to explicitly identify the disease as smallpox. It appears that, following the end of the Seven Years’ War, reporting on outbreaks became increasingly sketchy as focus shifted away from the region.

205 Anderson, Crucible of War, pp. 474,72-73.
206 Ibid., 523-24.
During 1762, the Ohio region was hit with a widespread unidentified sickness affecting the Shawnee, Delaware, Potawatomi, Kickapoo and the Six Nations, the nature of which is a topic of debate amongst many historians. Helen Hornbeck-Tanner suggests that this ‘serious communicable disease’ was actually smallpox, which considering the presence of smallpox amongst the Menominee in the pays d’en haut in May, is quite possible. However, Fred Anderson suggests this sickness was in fact an outbreak of dysentery over the summer, while Michael McConnell proposes that it was in fact an influenza epidemic. As all of these diseases were present around the region, it is unlikely that unless provided with an explicit description of the disease that we shall ever know exactly what this epidemic was. Whatever the true nature of the disease, however, it was characteristic of the localised outbreaks that took place during 1761 and 1762, unlike the region-wide outbreaks of the 1750s.

1763

The conclusion of the Seven Years’ War in Europe in February 1763 did not bring a lasting peace to North America. Although the French threat to the region had been subdued, the British quickly found themselves facing a war against Native Americans nations with whom they had tentatively made peace four years earlier. The increasing incursion of settlers into the Ohio rekindled the Native American-British hostility which had pervaded throughout the war. With the first of a series of Native American attacks on British forts in April at Fort Detroit, followed by many more throughout the Ohio Valley and pays d’en haut, desperate

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211 Anderson, Crucible of War, p. 531; McConnell, A Country Between, p. 177
English and American commanders cut off by hundreds of Native Americans used everything within their means to hold off their attackers, including smallpox.\textsuperscript{212}

The first recorded smallpox outbreak of 1763 appeared in New York in March, followed by Easton and Fort Augusta later in the year.\textsuperscript{213} Further south, Charlestown, Virginia, also suffered through a severe outbreak in between March and July.\textsuperscript{214} The most famous outbreak of 1763 however, occurred at Fort Pitt in May, where it was quickly communicated to the hostile Native Americans via blankets and other provisions.\textsuperscript{215} Whether or not this was done on purpose by the garrison of Fort Pitt is a serious matter of debate amongst historians, despite the relatively blunt assertion by William Trent that the garrison had given the Native Americans gifts from the smallpox hospital, with the hope that „it will have the desired effect.”\textsuperscript{216} Side-stepping the issue of the use of smallpox as a biological weapon for the moment, the spread of smallpox post-Fort Pitt demonstrated that with the commencement of war once more, smallpox also made a marked return to the region.

1764 and 1765

As tensions between the Anglo-American troops and colonists and the Native Americans continued, reported smallpox outbreaks decreased to just three episodes between 1764 and 1765. Despite the decline of smallpox in the region, Boston experienced its worst

\textsuperscript{212} Anderson, \textit{Crucible of War}, pp. 538, 41-42.
outbreak since 1752 between January and September, 1764. By the beginning of 1765 the eastern cities were void of smallpox. After almost eleven years of smallpox in New York, Philadelphia and periodically Boston, the disease was nowhere to be seen. Inhabitants further inland were not so lucky; smallpox struck at Johnson Hall on the Mohawk River, among the Delaware and Shawnee tribes of the Ohio Valley and sporadically throughout Maryland.

Although smallpox had in no way given up the Great Lakes and eastern North America in the years following the war, it had retreated somewhat. As soldiers gave way to settlers, the disease still had an ample supply of susceptible victims; however, there were no longer the great numbers moving quickly across the countryside as there had been during the war. Nor were the conditions quite as wretched as those experienced in the camps and forts cramped with thousands of men in dismal weather, frequently without sufficient food or clothing to fight off outbreaks. Smallpox had held close to the movements of the conflict and the groups involved, inflicting more death and misery upon men who already suffered from the degrading effects of war. It is important to note that this is only a conservative map of the spread of smallpox, making it likely that the disease was even more abundant during the war than is shown here. Even in light of this however, it is evident that smallpox had a very real presence throughout the war; one that should not be overlooked by historians of the Seven Years’ War.

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Map 2

New France and the British Mainland Colonies in the Seven Years' War, 1754-1763

Smallpox Outbreaks for 1764 and 1765

- Smallpox
- Unidentified Disease
CHAPTER THREE

The Scars of Smallpox: Conclusions about Smallpox during the Seven Years’ War.

Smallpox had an extensive presence during the Seven Years’ War; it haunted the camps and towns of Native Americans and Europeans alike, and proliferated amongst the surplus of susceptible bodies provided by the cramped conditions of war. Yet to what degree did this scourge affect the daily lives of the people of eastern North America, and the war itself? Having established that smallpox was widespread, it is now necessary to determine the collective form of the outbreaks and to consider the effect that smallpox had on the war.

When eighteenth century sources wrote about smallpox, their accounts were often vague regarding the extent and nature of the outbreaks. As we have seen, this was in a large part due to the “normalisation” of smallpox and disease during the war, thereby producing a series of seemingly disconnected outbreaks. Unfortunately this ambiguity is also reflected in the current historiography. Despite referencing the eruption of smallpox at specific points during the war, historians have failed to clearly illustrate the shape and scope of the outbreaks, instead often giving the impression of isolated smallpox epidemics. However, by mapping the outbreaks year-by-year, we are presented with a larger, more cohesive smallpox event that engulfed the region for the duration of the war.

On Christmas Eve 1751, a ship from London „was bulged in Nahant Bay” just outside Boston, its crew overwhelmed by smallpox carried from England. As locals from the nearby town of Chelfey cared for the stricken crew, smallpox quickly engulfed the local village, killing one in four infected with the deadly disease.219 By January it had reached Boston, transmitted to a group of families within the city by an infected sailor. It simmered quietly

219 Douglass, A Summary, Historical and Political, p. 397.
amongst a handful of families until March, when the disease broke the town’s quarantine measures and rapidly spread throughout the population of Boston until July, causing many to flee the city.\textsuperscript{220} This incident marked the first episode of smallpox for the eastern seaboard for 1752, resulting in an epidemic in Boston. The last such epidemic to hit the city had occurred twenty-two years earlier in 1730, when smallpox had been similarly introduced by ship from Ireland.\textsuperscript{221} After 1752, Boston was not hit by another city-wide outbreak of smallpox until 1764.\textsuperscript{222}

The significance of these episodes lies in the fact that they were the only outbreaks defined as epidemics by the city, despite the fact that smallpox appeared within Boston throughout the 1750s and 1760s.\textsuperscript{223} For instance, in 1757 Boston experienced a major outbreak, during which „several families moved away for fear of the smallpox‟, yet the episode was not considered an epidemic by the city‟s officials, despite the fact that the quarantine hospital reached its capacity and private houses were set up to contain the overflow of patients.\textsuperscript{224} Boston authorities do not appear to have used any set numerical value to distinguish an epidemic from an outbreak. They simply viewed some episodes as epidemic, and others as merely isolated incidents depending on the spread of the disease throughout the city, and whether or not it signified „an unusually high incidence of smallpox‟ relative to earlier outbreaks.\textsuperscript{225}

\textsuperscript{221} Douglass, A Summary, Historical and Political, p. 395.
\textsuperscript{223} Gale, „Relating to the Practice of Inoculation for the Small Pox‟, p. 193.
\textsuperscript{225} Guy, „Two Hundred and Fifty Years of Small Pox in London‟, p. 403-04; Smallman-Raynor and Cliff, War Epidemics, p. 30.
In comparison, in New York and Philadelphia between 1755 and 1760, the disease was largely endemic. Both cities experienced serious outbreaks for months at a time, almost every year of the war. For people living in these cities, smallpox went hand-in-hand with the war; there were no years of epidemics interspersed with minor outbreaks as with Boston; only deadly smallpox year after year, with no particular outbreak standing out from the rest.

The differences in the smallpox experiences of New York and Philadelphia compared to Boston can be clearly linked to the roles of each city during the war. As major centres for quartering English troops over the winter, and busy ports for the arrival of English and colonial soldiers, in addition to having large civilian populations, New York and Philadelphia were breeding grounds for smallpox throughout the war. Boston, in contrast, had a less prominent role in the conflict, and as such was most vulnerable from infected ships from Europe and returning colonial militia. As a result, Boston was capable of more stringent quarantine procedures than the busier cities of New York and Philadelphia.

The experiences of these three cities demonstrate how smallpox outbreaks varied from place to place during the war. Towns and forts throughout the Great Lakes and eastern North America similarly had their own unique relationships with smallpox in the mid-eighteenth century. Groups around the region experienced smallpox differently, depending on their roles and levels of interaction with other groups, giving the impression that smallpox during the war occurred as discreet episodes. As a consequence, there are often discrepancies amongst historians as to the frequency and scope of smallpox outbreaks during the war.

228 Boston had specific quarantine measures for ships and people, which were improved frequently over the course of the year. See: Blake, Public Health in the Town of Boston.
Several historians have described smallpox during the war as occurring in a series of epidemics.230 Others assert that the only substantial smallpox outbreaks occurred between 1755 and 1757.231 Yet, by tracing these seemingly disconnected outbreaks year-by-year, they no longer appear as localized episodes. Rather, the increased movement of people as a result of the war forged connections between geographically distinct regions, thereby creating a greater smallpox event that affected the entire area of eastern North America and the Great Lakes throughout the war.

Although outbreaks may have become more concentrated around different areas over the course of the conflict, smallpox maintained an extensive presence in the region. From the outset of the major campaigns in 1755 until the close of the war in 1760, the region was affected by a widespread smallpox epidemic that persisted over the course of the war, similar in nature to the smallpox epidemic identified by Elizabeth Fenn during the American Revolution.232 The massive number of English, American, French and Native American troops that took part in the Seven Years’ War, their high mobility throughout the region and the unhealthy conditions in which they lived, produced a unique smallpox event that was characterised by a „considerable and irregular excess of attacks” making it distinct from other previous or subsequent epidemics, just as the war itself was distinct from any other conflict.233

231 Stearn and Stearn, The Effect of Smallpox on the Destiny of the Amerindian, p. 43; John Duffy, ‘Smallpox and the Indians in the American Colonies,’ Bulletin of the history of medicine 25 (1951), p. 336; Ward, Breaking the Backcountry, p. 146; Heagerty, Four Centuries of Medical History in Canada, pp. 39-41. Henry Dobyns is one of the few historians to note that smallpox persisted without a major decline for the length of the war, Their Number Become Thinned, p. 15.
232 Fenn, Pox Americana, pp. 274-75.
Having determined the extent and nature of the smallpox epidemic that occurred during the Seven Years’ War, we can now turn to exploring its impact. Smallpox was deeply embedded within the war; the movement of troops and battles influenced the spread of the disease throughout the region, although to what extent smallpox shaped the war is still largely undetermined. Due to the normalisation of disease that occurred within the camps and cities as a result of the war, it is difficult to confidently assert the full impact of the smallpox epidemic on the Seven Years’ War. Substantial research is required before any definitive conclusions can be reached, however the current evidence does provide some preliminary examples of its impact. With this in mind, let us now turn to consider several specific outbreaks in order to draw out the larger implications for the war.

**Boston and Pickawillany 1752**

As the entry point for smallpox during 1752, Boston offered the first lines of defence against the invading contagion. However, at several points during the course of the war, smallpox overcame the quarantine restrictions put in place by the city leaders and spread amongst the inhabitants of the town. These instances allow us to begin to realise the effect that smallpox had on the inhabitants of the Great Lakes and eastern North America, during the greater epidemic of the war.

The war itself caused enough disruption to the economy of the colonial states and to the trading practices of Native American groups. However, the 1752 smallpox outbreak at Boston effectively paralysed the busy trading centre. According to observers of the epidemic, smallpox caused “all business [to be] laid aside in town. The streets desolate, many

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of the shops shut up, and the people universally spend their time to attend the sick."\textsuperscript{237} With so many people vulnerable to the disease in America, outbreaks could effectively shut down cities. Local government assemblies were frequently postponed or moved out of town due to smallpox outbreaks, particularly in Philadelphia where smallpox was endemic and assembly members were routinely struck down by the disease.\textsuperscript{238} Although the actual battles took place in the midst of the wilderness, as smallpox flourished in the chaotic conditions of the war it became increasingly destructive amongst civilian populations.

Just as colonial communities were crippled by the appearance of smallpox, Native American society was also seriously affected by the epidemic; as the war was fought around their homes, smallpox added to the devastation of the battles.\textsuperscript{239} Whole nations comprising of men, women and children were struck down simultaneously by smallpox, causing untold devastation to the social structure of nations.\textsuperscript{240} In some cases, a victim who survived was left impotent or infertile, thereby preventing substantial population recovery amongst the hardest-hit groups.\textsuperscript{241}

In a further blow, as the number of Native Americans who left to fight for the French during the first years of the war increased, and as those who returned frequently did so carrying disease, Native Americans often struggled to feed themselves. Warriors were also the primary hunters and crop harvesters; as they died from smallpox and spread the disease to their families, many nations were unable to survive the widespread famine that hit the region.

\textsuperscript{239} McConnell, \textit{A Country Between}, p. 125.
\textsuperscript{241} Watts, \textit{Epidemics and History}, p. 104.
during the war. Smallpox and disease dealt a devastating blow to colonial and Native American daily life; perhaps even more so than the campaigns and battles.

Even the battles and campaigns were not immune to the effects of smallpox. Although they created the conditions for smallpox to flourish, at times the campaigns of the war also suffered from the devastating effects that followed. For instance, the attack on Pickawillany was directly affected by the smallpox epidemic that struck the region as a result of the heightened activity in the area. The attack had originally been planned to take place at the beginning of 1752, however the widespread outbreak of smallpox, during which „a large portion of [the French”s] trusty Indians” died, had prevented the French-allied Native Americans from executing their attack.

This was not the only time that a smallpox outbreak proved an obstacle to campaigns during the war. In 1756, at the same time that the French commander Louis-Joseph Montcalm was boasting his correspondent in France; „I flatter myself that this sickness [smallpox] will not have any unfortunate results” on their future campaigns, the Governor of New France, was forced to cancel several campaigns due to the debilitating presence of smallpox amongst the Canadian and Native American troops. That same year, an outbreak of smallpox amongst the Acadians had prevented them from joining French raids against the English, just as it had prevented the Seneca in 1755 from joining the French in Montreal, in both cases diminishing the capacity of the French to effectively attack the English.

244 M. de Longueuil to M. de Rouille, 21 Apr. 1752, NYCD, 10:246.
246 Abstract of Despatches from Canada, Feb. 1756, NYCD, 10:408; Conference between M. de Vaudreuil and the Senecas, Oct. 1755, NYCD, 10:345-46
D. Peter MacLeod has attempted to definitively show that smallpox outbreaks amongst Native American nations directly impacted their participation in the war on behalf of the French. In particular he argues that Native American participation rates dropped following smallpox epidemics he identifies to have occurred in 1755 and 1757, and then rose again in 1756 and 1758 following the conclusion of the epidemics. However, mapping the epidemic has shown that outbreaks in fact increased in 1756 and persisted steadily until 1760, suggesting that it was not just smallpox that caused the fluctuation in participation rates. Native American nations had a large stake in the war; they recognised that the outcome would have significant consequences for the region. Therefore, their participation also depended heavily on their ongoing assessment of the war year after year. While there is clearly evidence that smallpox slowed the progress of some campaigns, it is important not to ignore the politics that were also in play during the war.

Smallpox did not just incapacitate groups through the proliferation of the variola virus, but also through the proliferation of fear that raced ahead of many outbreaks. During the events at Pickawillany, the fear generated by the smallpox epidemic was just as disruptive to the campaign against the Miami as the actual presence of the disease. In April, members of the Mikinac nation informed the French at Detroit that „nothing but the fear of smallpox“ prevented them from leading the attack against Pickawillany, further delaying the proposed raid. Similar excuses were often volunteered by Native American groups for their absence or reluctance to participate in campaigns or peace talks. In 1757, members of the Iroquois refused to attend a conference with the English at Philadelphia due to their „fear of sickness, as many of the Indians dyed there in the Fall and Winter [sic],“ much to the frustration of

247 MacLeod, ‘Microbes and Muskets’, pp. 44-46.
248 M. de Longueuil to M. de Rouille, 21 Apr. 1752, NYCD, 10:246.
their English negotiators. The sickness the Iroquois refer to in this instance is in fact smallpox, which had prevailed in the city between June and December in 1756 and again in February 1757.

In hindsight, it appears that often the fear of smallpox was used as a delaying tactic by Native American nations to avoid participating in campaigns or talks that would not provide them with any long-term advantage. Yet, the very real devastation that smallpox caused consistently throughout the war and the „inexpressible terror” that it generated amongst the inhabitants of the entire region, regardless of nationality, meant that such claims could not be ignored, despite the apparent convenience of the excuse.

As Native Americans refused to leave the safety of their homes, colonists refused to let those carrying smallpox into theirs. News of smallpox within the army frequently led to towns refusing to provide winter quarters for the disease-riddled troops. In 1756 the people of Philadelphia refused to give shelter to soldiers due to the presence of smallpox amongst them. In addition, the constant presence of the disease in the army also deterred civilians from joining their local militia. Although support for the war against France increased over the course of the conflict, it appears that initially, young inexperienced colonial men were reluctant to volunteer for a war during which men died from horrifying diseases like smallpox before they even laid eyes on a French soldier or Native American warrior.

Amongst those who made it to the forts and army camps, smallpox dramatically lowered the morale of the garrisons in association with the general miseries of war. Soldiers expressed their fear by deserting, leaving in the middle of campaigns as the threat of

249 A Letter from Mr. Croghan, 10 Apr. 1757, Pennsylvania Archives, Colonial records, 6:479; A Meeting with the Indians at John Harris’ 2 Apr. 1757, ibid., Colonial Records, 6:510.
250 See Maps for 1756 and 1757 in Chapter Two.
253 Charters, ‘Disease, Wilderness Warfare’, p. 3.
smallpox pervaded their encampments. During the rash of outbreaks in the Ohio Valley in 1759, forts along the valley suffered a double blow as the disease tore through the susceptible provincials. Those who managed to avoid the disease often deserted their posts.\textsuperscript{254}

In response, some military commanders concealed outbreaks within forts from their subordinates.\textsuperscript{255} However, the presence of a disease like smallpox within a small fort could only ever be kept quiet for a limited time, thereby only delaying the desertions that followed for a week or two at the most. As the campaign season and the ravages of smallpox stretched on in 1759, garrisons were left decimated by death and desertion. By winter, the conditions at so wretched that the commander of Fort Ligonier in the Ohio Valley wrote:

\begin{quote}
What now remains of your unfortunate battalion is barely worth writing about – the graveyard has most of them. Exhausted as they were with the fatigues of a most unmerciful campaign, it was impossible that they should withstand the united effects of sickness and hard duty.\textsuperscript{256}
\end{quote}

In the face of such conditions, it is unsurprising that many soldiers deserted their posts and returned home.

\textbf{Fort William Henry 1757}

Occurring at the midway point of the war, the attack on Fort William Henry by the French in 1757 had a critical influence on the direction of the last few years of the war. It

\textsuperscript{255} Thomas Agostini, “‘Deserted His Majesty’s Service’: Military Runaways, the British-American Press, and the Problem of Desertion During the Seven Years’ War”, \textit{Journal of Social History} 40, no. 4 (Summer 2007), p.966; Bouquet to Forbes, 31 Jul. 1758, \textit{The Papers of Henry Bouquet}, 2:293.
signalled the last victory of the French over the English as well as the end to the French and Native American alliance.

Following a month-long siege, the French army; supported by two thousand Native American warriors, brought the English Fort William Henry to capitulation on the 9th of August 1757.\footnote{Anderson, \textit{Crucible of War}, pp. 187-95.} The English garrison had suffered severe casualties as a result of the siege and a severe outbreak of smallpox within the fort. The terms of the surrender, which permitted the English to leave with their personal belongings, came at an unacceptable cost to the Native Americans who were refused the right to claim hostages and plunder from the defeated garrison as evidence of their victory. In response to this, Native American warriors attacked the departing English troops and the sick left behind in the fort.\footnote{Steele, \textit{Betrayals}, p. 111. This attack has been popularised in James Fenimore Coopers' novel \textit{The Last of the Mohicans} (Boston: Houghton, Mifflin and Co., 1876).}

The wounded at the fort included the remaining victims of the smallpox outbreak that had permeated the fort since at least July. During their search for scalps and trophies, Major Robert Rogers, whose brother had died from smallpox at the fort shortly before the siege, claims that upon seeing freshly dug graves, Native American warriors disinterred the bodies, including the body of Rogers’ brother in order to scalp them.\footnote{Journal of Major Robert Rogers, p. 55.} In doing so they spread the variola virus that still clung to the clothes and flesh of the corpses amongst themselves. Immediately following this attack the two thousand-strong Native American support disbanded and returned home via Montreal, predominantly to the west, unwittingly carrying smallpox with them.\footnote{Pouchot, \textit{Memoir Upon the Late War}, pp. 91, 92.} The destruction caused by smallpox amongst the Ottawa in 1757 occurred as a direct result from the events of Fort William Henry.\footnote{Blackbird, \textit{History of the Ottawa and Chippewa Indians of Michigan}, pp. 9-10.}
Thousands of lives were lost during the Seven Years’ War by the barrage of cannons, rifles and hand to hand fighting, but as a result of the widespread communication of the disease that occurred, many more perished as a result of the smallpox that permeated the conflict.\(^{262}\) By the late nineteenth century, a weaker form of smallpox caused by the variola minor virus replaced the more virulent form of variola major. However, during the Seven Years’ War, variola major dominated the Great Lakes and eastern North America, killing at least one in four victims.\(^{263}\)

Although we are left with very few explicit casualty records regarding smallpox, some sources do give us an idea of the impact the disease had on the populations of Native Americans and colonists in the Great Lakes and eastern North America. Smallpox was not a disease to affect individuals one at a time; it flourished amongst susceptible groups, regularly killing hundreds in a single outbreak.\(^{264}\) For instance, Blackbird’s account of the outbreak that occurred amongst the Ottawa reported that entire towns were wiped out from smallpox, a claim supported by a more contemporary observer to the epidemic, which reported that that same outbreak almost entirely extinguished the Potawatomi nation.\(^{265}\) By the end of the war, the neighbouring Menominee nation was also reported to have lost over 300 of their people, including many of their chiefs to smallpox.\(^{266}\) Overall, historians have suggested that almost eight times as many men died from disease than from battle, making smallpox truly the “captain of the men of death.”\(^{267}\)

Once a person had contracted smallpox, there was no cure or treatment available to reduce the likelihood of death. Variolation, also known as inoculation, offered the only

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\(^{262}\) Blake, *Public Health in the Town of Boston*, p. 87.


\(^{264}\) Pitt, *Correspondence of William Pitt*, p. 286.


\(^{267}\) Frey, *The British Soldier in America*, p. 28; Ashburn, *The Ranks of Death*, p. 81.
chance of controlling how and when a person contracted smallpox. First used centuries earlier in Africa and Asia, variolation involved the insertion of pus or scab residue from an infected person into a patient’s skin in order to induce a milder form of smallpox than would be experienced by catching smallpox naturally.\footnote{Hopkins, \textit{Princes and Peasants}, p. 7. For the different versions of variolation see also: Gale, ‘Historical Memoirs, Relating to the Practice of Inoculation for the Small Pox, in the British American Provinces, Particularly in New England: Addressed to John Huxham, M. D. F. R. S.,” p. 202 - 04.}

Yet the risks involved meant that very few people during the 1755-60 epidemic underwent variolation. While the practice produced a less severe form of smallpox in the patient, with only a one to three per cent likelihood of death, it was still infectious and deadly to others.\footnote{Hopkins, \textit{Princes and Peasants: Smallpox in History}, p. 7.} It was for this reason that variolation was not widely practiced in America during the war, and why colonial assemblies banned inoculation except under particularly severe conditions due to the risk unsafe variolation posed.\footnote{Blake, \textit{Public Health in the Town of Boston}, pp. 52, 56.} Without proper supervision, smallpox could be spread from variolation patients to the rest of the community, making it unsuitable for use amongst the armies and civilian populations of the war.\footnote{Gale, ‘Relating to the Practice of Inoculation for the Small Pox’, p. 196. One or two sources do mention intending to inoculate troops; however there is very little evidence to suggest that it actually occurred. It is highly likely that it posed too great a risk to armies and to colonial support to undertake widespread inoculation. Loudoun to Cumberland, 22 Nov. and 26 Dec. 1756, Pargellis, ed. \textit{Military Affairs}, p. 263; Memorandum, 26 Dec. 1756, \textit{The Papers of Henry Bouquet}, 1:43. See also: Erica M. Charters, ‘Military Medicine and the Ethics of War: British Colonial Warfare During the Seven Years War (1756-63),’ \textit{Canadian Bulletin of Medical History} 27, no. 2 (2010), pp. 281-82.} As a result, following events like Fort William Henry, smallpox was let loose upon the Great Lakes and eastern North America, spread naturally by the movement of the armies and Native Americas.

The exact transmission routes of smallpox during the war are not clear; however using 1757 as a guide, it appears that Native American groups were predominantly to blame. No other battle of the war witnessed the huge numbers of Native Americans and French and English troops that were present at the siege of Fort William Henry. Thousands of Native Americans had come from as far as the western shores of Lake Michigan to attack the
smallpox-riddled fort and when they returned home, they took with them enough cases of smallpox to cause some of the most devastating and wide-reaching outbreaks of the war.272

Native American groups travelled much faster than the armies, allowing them to travel greater distances and communicate the disease the greatest number of people. As a result, the role of Native Americans in spreading the disease from the fort in this instance suggests that while French and Anglo-American troops were often responsible for the introduction of the disease to the cities and the central forts, Native Americans were responsible for spreading smallpox amongst the smaller forts, towns and villages along the major travelling routes throughout the Great Lakes and the backwoods of eastern North America.

However, if the English or French believed their Native American allies to be the main carriers of the disease that decimated the morale and health of their outlying forts, they made no mention of it within the sources. Instead, they blamed each other for the appearance of smallpox throughout the region, in obvious attempts to vilify the enemy and reinforce their own alliances with Native American nations. Admitting responsibility would have risked alienating their allies. The belief held by Indian nations that smallpox was transmitted by „bad medicine“ from the French or English could put an end to Native American support for the remainder of the war or worse, drive them into the arms of the enemy.273 Thus, after major outbreaks, such as that amongst the Ottawa in 1757, the French vehemently declared that „the wholesale murder of the Ottawas by this terrible disease“ had been perpetrated by the British out of hatred and „expressly to kill off the Ottawas and Chippewas because they

272 Steele, Betrayals, pp. 78-79. Although only the Ottawa and Potawatomi were explicitly noted as suffering from smallpox following Fort William Henry, sources often speak in general terms of the wide ranging effects of the outbreaks amongst all western nations.
273 1-13 Mar. 1758, Bougainville, Adventure in the Wilderness, p. 197.
were friends of the French Government."\textsuperscript{274} While predominantly propaganda, claims such as these by the French were not entirely unsupported. There is evidence that, in order to neutralise the threat posed by enemy Native American nations, the French and particularly the English deliberately spread smallpox amongst the Native Americans.\textsuperscript{275}

**Fort Pitt 1763**

Fort Pitt is perhaps the most famous smallpox event to have occurred in American history. The events following the intentional dissemination of smallpox by the Anglo-American garrison amongst hostile Native American groups has been the focus of countless historical studies. In recognition of this, the following exploration of the events that took place at the fort will be relatively brief.

In June 1763, in the midst of the Native American and English conflict that many historians term "Pontiac’s Rebellion", Native Americans besieging Fort Pitt in the Ohio Valley were struck down by smallpox.\textsuperscript{276} The besieged garrison, themselves sick with smallpox since May, had made a present of "two blankets and a handkerchief" to the Native Americans, "out of [their] regard for them."\textsuperscript{277} However, this "gift" had been taken from the overcrowded smallpox hospital within the fort, thereby conferring the disease via dead skin and dried scabs from English smallpox victims to the surrounding Native Americans.\textsuperscript{278}

The resulting transmission of smallpox to the Native Americans was no accident. The English knew the threat that smallpox-infected clothing posed from their troubled experiences with the disease over the course of the earlier war. Furthermore, the local

\textsuperscript{276} Anderson, *Crucible of War*, p. 541.  
\textsuperscript{277} Volwiler, ‘William Trent’s Journal at Fort Pitt’, p. 400.  
\textsuperscript{278} Ibid.
military commander Henry Bouquet, in his correspondence with the head of English forces in America Jeffery Amherst, at almost the exact moment that the Fort Pitt garrison had taken it upon themselves to spread the disease, has been recorded discussing the usefulness of sending smallpox amongst the attacking Native American forces. The English it seems undertook this transmission consciously and maliciously, fully aware of the consequences.

The years leading up to this important episode in Native American and British relations had seen a substantial drop in the number of smallpox outbreaks since the end of the war in 1760. Smallpox outbreaks had occurred sporadically throughout the region for short periods of time, yet the appearance of smallpox in Fort Pitt in 1763 had followed a two year reprieve of the disease in the Ohio Valley.

After years of French propaganda regarding the deliberate spread of smallpox amongst the Native Americans by the English, it appears that there was some truth to it the claims. However, while the English appear to have been the first to maliciously employ smallpox as a biological weapon, they were by no means the first to consider it. As early as 1752, French commanders had discussed the desirability “that it [smallpox] should break out and spread throughout the localities inhabited by our rebels” as the ensuing devastation would “be fully as good as an army.” If the “rebels” being referred to were the troublesome Miami of Pickawillany, then the French got their wish almost immediately, although at a significant cost to their allies.

There is little evidence within the other sources to suggest that this outbreak was purposely initiated, particularly considering the delay it caused for French plans to attack the town. However, the fact that in 1763 both the garrison at Fort Pitt and their commanders

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279 Francis Parkman, *Conspiracy of Pontiac*, pp. 39-40. Note that Parkman dedicates only two pages to this disturbing incident out of his two volume study of the Native American and English war.

corresponding miles away came to the exact same idea independently of one another to deliberately spread smallpox at around the same time, suggests that the idea was not new to the conflict that enveloped North American in mid-eighteenth century. Even before the official start of the war, we have seen that similar ideas were being discussed, if not acted upon, by the French. If this was the case, then the deliberate spread of smallpox between 1755 and 1760 would have had significant implications for war, particularly considering the impact that we have seen that smallpox had on the colonial militia and civilian populations in addition to the devastation it wrought amongst the Native Americans. With this in mind, as historians explore the origins of biological warfare in North America, it seems that perhaps they should look past Fort Pitt to the Seven Years’ War. It appears that exactly how, why and by whom smallpox was spread during the Seven Years’ War requires further consideration by future studies.

It is clear that smallpox was intrinsically linked to the Seven Years’ War; the war created the crowded, highly mobile disease-riddled environment in which smallpox thrived, and smallpox significantly influenced the groups involved and at times even shaped the direction of the war. Together they created the exceptional events of the mid-eighteenth century in North America, marked by an unprecedented number of Native Americans, French, English, and colonial Americans and Canadians on the move who took part in the war amidst an extensive and pervading smallpox epidemic. As a result, it seems that smallpox left behind it a number of scars that reached far beyond the pockmarked faces of those who survived both the disease and the war. Just by establishing the horrible conditions of the war and by mapping the spread of the 1755-60 epidemic, we have uncovered evidence of these scars – further research would clearly reveal their depth.

In mapping the smallpox epidemic year-by-year, we have uncovered an aspect of the war that had previously been overlooked, yet in doing so, not only has it emphasised the need for future studies to consider the presence of smallpox during the war, but it also leads one to wonder what other events in American colonial history might have a similarly obscured story of smallpox to tell.
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